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DLN: 93493130006200

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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)

OMB No 1545-0047 2008

epartment of the Treasury ▶ The organization may have to use a copy of this return to satisfy state reporting requirements Internal Revenue Service Inspection A For the 2008 calendar year, or tax year beginning 07-01-2008 and ending 06-30-2009 D Employer identification number B Check if applicable Please BABSON COLLEGE use IRS 04-2103544 Address change label or Doing Business As E Telephone number Name change print or type. See (781) 239-5298 Initial return Specific Number and street (or P O box if mail is not delivered to street address) Room/suite **G Gross receipts** \$ 258,761,780 Instruc-231 FOREST ST Termination tions. Amended return City or town, state or country, and ZIP + 4 BABSON PARK, MA 024570310 Application pending Name and address of Principal Officer **H(a)** Is this a group return for Leonard Schlesinger affiliates? 231 FOREST STREET BABSON PARK, MA 02457 H(b) Are all affiliates included? (If "No." attach a list See instructions) Group Exemption Number 🕨 Web site: ► www babson edu L Year of Formation 1919 M State of legal domicile MA Briefly describe the organization's mission or most significant activities Activities & Governance See Additional Data Table Check this box ┌ if the organization discontinued its operations or disposed of more than 25% of its assets Number of voting members of the governing body (Part VI, line 1a) \cdot \cdot 46 <u>42</u> Number of independent voting members of the governing body (Part VI, line 1b) $\,$. 2,068 Total number of employees (Part V, line 2a) . Total number of volunteers (estimate if necessary) . 1,734 Total gross unrelated business revenue from Part VIII, line 12, column (C) . 7a 950,909 Net unrelated business taxable income from Form 990-T, line 34 . 7b -18,517 b **Prior Year Current Year** Contributions and grants (Part VIII, line 1h) . . 14,805,802 23,397,689 8 9 Program service revenue (Part VIII, line 2g) . . 147,839,703 154,780,250 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) . 9,527,977 -5,816,008 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 1,097,250 1,954,504 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12 173,270,732 174,316,435 25,562,877 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 22,879,115 14 Benefits paid to or for members (Part IX, column (A), line 4) 0 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-15 Expenses 76,963,751 81,372,983 10) 16a Professional fundraising fees (Part IX, column (A), line 11e) 0 (Total fundraising expenses, Part IX, column (D), line 25 $\frac{4,098,503}{}$ b **17** Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f) 66,809,986 65,281,912 Total expenses—add lines 13-17 (must equal Part IX, line 25, column (A)) 172,217,772 18 166,652,852 Revenue less expenses Subtract line 18 from line 12 19 6,617,880 2,098,663 8 % **End of Year** Beginning of Year Assets of Balance 20 Total assets (Part X, line 16) 432,654,379 398,685,191 21 Total liabilities (Part X, line 26) 163,573,776 163,816,088 22 Net assets or fund balances Subtract line 21 from line 20 269,080,603 234,869,103 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

Please Sign Here

2010-05-10 Signature of officer

Philip N Shapiro VP Finance & CFO Type or print name and title

Preparer's Paid Preparer's **Use Only**

signature

Date Check if Preparer's PTIN (See Gen Inst) Gwen Spencer empolyed 🕨 🦵

PRICEWATERHOUSECOOPERS LLP Firm's name (or yours if self-employed). address, and ZIP + 4 125 HIGH STREET

Phone no (617) 530-5000 BOSTON, MA 02110

Cat No 11282Y

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

1	Briefly describe the organization's mission Babson college educates men and women to	be entrepreneurial leaders in a	a rapıdly changıng world We	prepare them, identify opportunit	ies and initiate actions that
	result in genuine accomplishment				
2	Did the organization undertake any s the prior Form 990 or 990-EZ? .		ces during the year whi	ch were not listed on	Yes ✓ No
	If "Yes," describe these new service				
3	Did the organization cease conducti		nanges in how it conduc		Yes 🔽 No
4	If "Yes," describe these changes on				
4	Describe the exempt purpose achieved Section 501(c)(3) and (4) organizate others, the total expenses, and reve	ions and 4947(a)(1) trus	sts are required to repoi		
4a	(Code) (Expenses BABSON COLLEGE ENROLLS APPROXIMATEL WORLDWIDE THE COLLEGE OFFERS EDUC UNDERGRADUATE PROGRAM THE COLLEG THROUGH THE F W OLIN GRADUATE SCHO HELP COMPANIES REACH THEIR STRATEGI	Y 1,800 UNDERGRADUATE AN ATION IN BUSINESS AND LIBE E ALSO GRANTS MASTER OF B OL OF BUSINESS AT BABSON (RAL ARTS, AND IT GRANTS T USINESS ADMINISTRATION D	HE BACHELOR OF SCIENCE DEGRI DEGREES AND CUSTOM MASTER O	EE THROUGH ITS F SCIENCE DEGREES
4b	(Code) (Expenses	\$ Inc	cluding grants of \$) (Revenue \$)
4c	(Code) (Expenses	\$ inc	cluding grants of \$) (Revenue \$)
4d	Other program services (Describe	ın Schedule O N			
-t u	(Expenses \$	in Schedule 0) including grants of \$	Y	(Revenue \$)
4e	Total program service expenses \$	149,889,918	Must equal Part IX, Line		<u> </u>

Part IV	Checklis	t of Re	eauired	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	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors? 🕏	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		Νo
4	Section 501(c)(3) organizations Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4	Yes	
5	Section $501(c)(4)$, $501(c)(5)$, 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		No
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		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		No
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		No
10	Did the organization hold assets in term, permanent,or quasi-endowments? If "Yes," complete Schedule D, Part $\sqrt{80}$	10	Yes	
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	Yes	
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	Yes	
13	Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	Yes	
14a	Did the organization maintain an office, employees, or agents outside of the U S ?	14a		No
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	Yes	
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		No
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		No
17	Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I	17		No
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	Yes	
19	Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19	Yes	
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		No
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		Νo
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	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete Schedule J	23	Yes	
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	Yes	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		Νo
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		No
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		Νο
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		No
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		No
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		No
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		No

Part VI

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			
а	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		No
b	Have a family member who had a direct or indirect business relationship with the organization? If "Yes," complete Schedule L, Part IV	28b	Yes	
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	Yes	
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 🕏	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		Νο
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Νο
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32		Νο
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		Νο
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		Νο
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		Νο
36	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		Νo
37	Did the organization conduct more than 5 percent 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,	37		No

Pai	rt 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	348			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	0			
_	Did the organization comply with backup withholding rules for reportable payments to ven	_			
	gaming (gambling) winnings to prize winners?		1c	Yes	
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	2.068			
h	If at least one is reported in 2a, did the organization file all required federal employment t	,			
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this retuin		2b	Yes	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the	year covered by this			
_	return?		3a	Yes	
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule	ŀ	3Ь	Yes	
4a	At any time during the calendar year, did the organization have an interest in, or a signatuover, a financial account in a foreign country (such as a bank account, securities account account)?		4a		No
ь	,				
	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	f 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		Νο
Ь	Did any taxable party notify the organization that it was or is a party to a prohibited tax sh	nelter transaction?	5b		Νο
c	If "Yes," to 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entit	ty Regarding Prohibited			
	Tax Shelter Transaction?		5c		
6a	Did the organization solicit any contributions that were not tax deductible?	•	6a		No
b	If "Yes," did the organization include with every solicitation an express statement that su were not tax deductible?	ch contributions or gifts	6b		
7	Organizations that may receive deductible contributions under section 170(c).				
а	Did the organization provide goods or services in exchange for any quid pro quo contribut more?	on of \$75 or	7a	Yes	
b	If "Yes," did the organization notify the donor of the value of the goods or services provide	d?	7b	Yes	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for	which it was required to	_		
	file Form 8282?		7c		N o
a	If "Yes," indicate the number of Forms 8282 filed during the year				
e	Did the organization, during the year, receive any funds, directly or indirectly, to pay prembenefit contract?	niums on a personal	7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal b	enefit contract?	7f		No
q	For all contributions of qualified intellectual property, did the organization file Form 8899	•	7g		No
_	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a F	ŀ	- 3		
	required?		7h		Νο
8	Section $501(c)(3)$ and other sponsoring organizations maintaining donor advised funds and se				
	supporting organizations. Did the supporting organization, or a fund maintained by a spons excess business holdings at any time during the year?	oring organization, have	8		
9	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.				
	Did the organization make any taxable distributions under section 4966?		9a		
	Did the organization make a distribution to a donor, donor advisor, or related person? .	ŀ	9b		
10	Section 501(c)(7) organizations. Enter				
а	Initiation fees and capital contributions included on Part VIII, line 12 10a				
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities				
11	Section 501(c)(12) organizations Enter	_			
а	Gross income from members or shareholders				
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)				
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu o	of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year				

Section A. Governing Body and Management

Yes

11

Νo

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

For each "Yes" response to lines 2-7 below, a	and for a "No" response to lines	8 or 9b below, de	escribe the circumstand

	For each "Yes" response to lines 2-7 below, and for a "No" response to lines 8 or 9b below, processes, or changes in Schedule O. See instructions.	desc	ribe the circumstance.	es,			
1a	Enter the number of voting members of the governing body	1a		46			
Ь	Enter the number of voting members that are independent	1b		42			
2	Did any officer, director, trustee, or key employee have a family relationship or a bus other officer, director, trustee, or key employee?		•		2	Yes	
3	Did the organization delegate control over management duties customarily performed supervision of officers, directors or trustees, or key employees to a management con				3		No
4	Did the organization make any significant changes to its organizational documents stilled? \cdot .	ınce t	the prior Form 990 v	vas	4		No
5	Did the organization become aware during the year of a material diversion of the organization	nızat	ıon's assets?		5		No
6	Does the organization have members or stockholders?			. [6		No
7a	Does the organization have members, stockholders, or other persons who may elect governing body?			the	7a		No
Ь	Are any decisions of the governing body subject to approval by members, stockholde	ers, o	r other persons? .		7b		No
8	Did the organization contemporaneously document the meetings held or written action year by the following	ns ur	ndertaken during the	•			
а	the governing body?			.	8a	Yes	
Ь	each committee with authority to act on behalf of the governing body?			- [8b	Yes	
9a	Does the organization have local chapters, branches, or affiliates?				9a		No
b	If "Yes," does the organization have written policies and procedures governing the acaffiliates, and branches to ensure their operations are consistent with those of the or		• •	,	9b		
10	Was a copy of the Form 990 provided to the organization's governing body before it was the describe in Schedule 0, the process, if any, the organization uses to review the		-		10		No

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

Section B. Policies

			Yes	No
12a	Does the organization have a written conflict of interest policy? If "No", go to line 13 \cdot .	12a	Yes	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
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	Yes	
13	Does the organization have a written whistleblower policy?	13	Yes	
14	Does the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision			
а	The organization's CEO, Executive Director, or top management official?	15a	Yes	
b	Other officers or key employees of the organization?	15b	Yes	
	Describe the process in Schedule O			
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		Νo
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 MA
- Section 6104 requires an organization to make its Form 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
- 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 See Additional Data Table
- State the name, physical address, and telephone number of the person who possesses the books and records of the organization

RICHARD BOWMAN NICHOLS BUILDINGBABSON COLLEGE BABSON PARK, MA 024570301

(781) 239-5298

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

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

- * List all of the organization's **current** officers, directors, trustees (whether individuals or organizations) and key employees 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, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- * List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

The check this box in the organization and i	·	Posit	(C) chec	:k al				(E)	(F)
(A) Name and Title	(B) Average hours per week	Individual Trustee or Chrector	Institutional Trustee	Officei	조 명류 compensation from relate		Reportable compensation from related organizations (W- 2/1099-	Estimated amount of other compensation from the organization and related organizations		
							_			

			tion (that a	(che		ıll			(E)	(F)
(A) Name and Title	(B) verage hours per week	Individual Trustee or Director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W- 2/1099MISC)	Reportable compensation from related organizations (W- 2/1099- MISC)	Estimated amount of other compensation from the organization and related organizations
							Н			
					-		Н			
							Н			
							\vdash			
1b Total			•				>	5,537,717	7 (574,370

2 Total number of individuals (including those in 1a) who received more than \$100,000 in reportable compensation from the organization ►146

			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	Yes	
4	For any individual listed online 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule I for such			
	ındıvıdual	4	Yes	
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 I for such person	5		No

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
Bigelow & Fleming LLC 14 Norfolk Avenue Easton, MA 02375	Construction	307,745
Watertown Floor Covering LLC P O Box 204 Watertown, MA 02471	Flooring Services	293,896
Banc of America Leasing & Capital LLC One Financial Plaza Providence, RI 02903	Financial Leasing	223,799
PricewaterhouseCoopers LLP P O Box 7247-8001 Philadelphia, PA 19170	External Auditor	193,279
InterPro Solutions LLC 301 North Ave 2nd Floor Wakefield, MA 01880	Consulting Firm	192,32
2 Total number of independent contractors (including those in 1) who rec		10

Statement of Revenue

				(A) Total Revenue	(B) Related or Exempt Function Revenue	(C) Unrelated Business Revenue	(D) Revenue Excluded from Tax under IRC 512, 513, or 514
	1a	Federated campaigns 1a	a		Kevenue		
¥ ¥	ь	Membership dues					
亞克		11	, ———				
Contributions, gifts, grants and other similar amounts	C	Fundraising events	61,225				
₹ <u>₹</u>	d	Related organizations1c	I				
35, ∭.	e	Government grants (contributions) 16	870,077				
afion STS	f	All other contributions, gifts, grants, and similar amounts not included above	22,466,387	j	j		İ
ê₩		11					
Ęž	g	Noncash contributions included in					
ರ≅	h	Innes 1a-1f \$		23,397,689			
	ļ -		<u> </u>				
9	2a	TUITION & FEES	Business Code 900,099	116,260,956	116,260,956		
Ken	ь	ROOM & BOARD	900,099	18,974,519	18,974,519		
<u> 8</u> 2	c	Ed/Non-Ed Prog Rev	900,099	18,743,190	18,743,190		
ASe	d	OTHER ED PROG/AUX ACT	713,990	642,696	10,743,130	642,696	
38	e	OTHER ED PROG/AUX act	713,990	158,889		158,889	
E	f	All other program service revenue	-	130,009		130,009	
Program Service Revenue	-						
δ	g	Total. Add lines 2a-2f					
	3	Investment income (including div	ıdends, ınterest				
		other similar amounts)	· · · · · · · · · · · · · · · · · · ·	2,276,490		149,324	2,127,166
	4	Income from investment of tax-exempt l	oond proceeds	20,252			20,252
	5	Doubling	▶				
	5	Royalties	(II) Personal				
	6a	Gross Rents 1,218,333	(ii) i eisonai				
	ь	Less rental					
	С	expenses Rental income 1,218,333					
	d	or (loss) Net rental income or (loss)	 	1,218,333			1,218,333
			<u> </u>	, ,			, ,
	7a	(i) Securities Gross amount 76,261,808	(II) O ther				
	/a	from sales of assets other					
	١.	than inventory					
	ь	Less cost or 84,374,558 other basis and					
	с	sales expenses Gain or (loss) -8,112,750					
	d	Net gain or (loss)		-8,112,750			-8,112,750
	8a		<u>.</u>				
	oa	Gross income from fundraising events (not including					
e		\$ 35,380					
nua		of contributions reported on line 1c) See Part IV, line 18					
ě		Attach Schedule G if total exceeds \$15,000					
.	ь	\$15,000	01,223				
Other Revenue	c	Net income or (loss) from fundrais	sing events	-13,090			-13,090
J	9a	Gross income from gaming	<u> </u>				
	-	activities See part IV, line 19					
		Complete Schedule G If total exceeds \$15,000					
		a	30,380				
	ь	Less direct expensesb					
	С	Net income or (loss) from gaming	activities -	8,063	8,063		
	10a	Gross sales of inventory, less					
		returns and allowances .					
	ь	Less cost of goods sold b					
	c	Net income or (loss) from sales of					
		Miscellaneous Revenue	Business Code				
	11a	Net gain-financing	900,099	741,198			741,198
	ь						
	С						
	d	All other revenue					
	e	Total. Add lines 11a-11d					
	12	Takal Danisan A. (1977)	\$ 741,198	174,316,435	153,986,728	950,909	-4,018,891
	12	Total Revenue. Add lines 1h, 2g, 8c,		1/4,310,433	133,300,728	330,309	-4,010,091
]	9c, 10c, and 11e	▶				Form 990 (2008)

Part IX Statement of Functional Expenses

A	Section 501(c)(3) and 501(c)(4) orgall other organizations must complete column (A) but are not re).
Do r	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				
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22	25,562,877	25,562,877		
3	Grants and other assistance to governments, organizations and individuals outside the U S See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	3,366,220	792,240	2,154,524	419,456
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$	244,334	192,446	51,888	
7	Other salaries and wages	61,751,756	53,318,346	51,888	2,312,541
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	4,528,614	3,894,609	452,861	181,144
9	Other employee benefits	7,364,521	6,333,488	736,452	294,581
10	Payroll taxes	4,117,538	3,541,083	411,754	164,701
11	Fees for services (non-employees)				
а	Management				
b	Legal	179,808		179,808	
c	Accounting	154,791		154,791	
d	Lobbying				
e	Professional fundraising See Part IV, line 17				
f	Investment management fees				
g	Other				
12	Advertising and promotion	2,412,898	2,309,357	103,541	
13	Office expenses	5,983,365	4,531,326	1,195,838	256,201
14	Information technology	6,678,376	6,290,296	362,036	26,044
15	Royalties				
16	Occupancy	7,311,869	7,185,403	95,613	30,853
17	Travel	4,928,514	3,474,786	1,128,248	325,480
18	Payments of travel or entertainment expenses for any Federal, state or local public officials				
19	Conferences, conventions and meetings	1,291,710	1,210,370	69,987	11,353
20	Interest	6,370,875	6,370,875		
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	9,582,137	9,416,404	125,300	40,433
23 24	Insurance				
а	FOOD & BEVERAGE SERVICE	7,476,202	7,476,202		
ь	OTHER EXPENSES	5,338,177	2,239,640	3,085,448	13,089
c	Professional Consulting	3,060,018	2,511,964	525,427	22,627
d	ROOM, CONF & ADMIN	2,663,836	2,663,836		
e	Purchased services	1,849,336	574,370	1,274,966	
f	All other expenses				
25	Total functional expenses. Add lines 1 through 24f	172,217,772	149,889,918	18,229,351	4,098,503
26	Joint Costs. Check 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				rm 990 (2008)

Part X	Balance	Sheet

						(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing				34,955,254	1	42,758,445
	2	Savings and temporary cash investments				,	2	, ,
	3	Pledges and grants receivable, net	_			22,716,880	\vdash	31,896,263
	4	Accounts receivable, net		· ·		6,583,573	H	5,194,488
	5	Receivables from current and former officers, directors, trustee other related parties Complete Part II of Schedule L			oyees or		5	-,,
	6	Receivables from other disqualified persons (as defined under s persons described in section 4958(c)(3)(B) Complete Part II of	ection	1495			6	
	7	Notes and loans receivable, net				3,910,189	H	4,007,522
	8	Inventories for sale or use	Ē		8			
92	9	Prepaid expenses and deferred charges				2,996,867	9	3,616,382
ssets	10a	Land, buildings, and equipment cost basis						
⋖		Land and the desired decreases and the Control of t	10a		298,327,806	-		
	Ь	Less accumulated depreciation <i>Complete Part VI of</i> Schedule D	10Ь		161,966,398	141,783,852	10c	136,361,408
	11	Investments—publicly traded securities	•	٠.		152,186,736	11	117,009,809
	12	Investments—other securities See Part IV, line 11 Complete F Schedule D	Part VII	I of		64,189,786	12	55,255,831
	13	Investments—program-related See Part IV, line 11 $\it Complete$ of $\it Schedule D$.			13			
	14	Intangible assets			14			
	15	Other assets See Part IV, line 11 Complete Part IX of Schedule D		3,331,242	15	2,585,043		
	16	Total assets. Add lines 1 through 15 (must equal line 34)				432,654,379	16	398,685,191
	17	Accounts payable and accrued expenses .				14,824,398	17	14,041,217
	18	Grants payable			18			
	19	Deferred revenue				12,188,283	19	12,021,396
	20	Tax-exempt bond liabilities				95,042,195	20	92,749,095
ē.	21	Escrow account liability Complete Part IV of Schedule D					21	
Liabilities	22	Payable to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified						
Ë		persons Complete Part II of Schedule L					22	
	23	Secured mortgages and notes payable to unrelated third parties	s .			29,840,000	23	29,175,000
	24	Unsecured notes and loans payable					24	
	25	Other liabilities Complete Part X of Schedule D				11,678,900	25	15,829,380
	26	Total liabilities. Add lines 17 through 25				163,573,776	26	163,816,088
es S		Organizations that follow SFAS 117, check here ► 🔽 and complete through 29, and lines 33 and 34.	plet e l	ines 2	7			
anc	27	Unrestricted net assets				111,325,956	27	91,503,125
Balance	28	Temporarily restricted net assets				77,894,715	28	52,335,951
핕	29	Permanently restricted net assets				79,859,932	29	91,030,027
r Fund		Organizations that do not follow SFAS 117, check here ► □ al lines 30 through 34.	ı					
S O	30	Capital stock or trust principal, or current funds			30			
Assets	31	Paid-in or capital surplus, or land, building or equipment fund			31			
ASS	32	Retained earnings, endowment, accumulated income, or other fi			32			
Net /	33	Total net assets or fund balances	•			269,080,603	\vdash	234,869,103
Ż	34	Total liabilities and net assets/fund balances				432,654,379		398,685,191
	l 							
Pa	rt XI	Financial Statements and Reporting						

Dowl VI	Financial	Ctatamanta	and Reporting
7.11.5	l Financiai	Statements	and Reporting

			Yes	No
1	Accounting method used to prepare the Form 990			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		Νο
b	Were the organization's financial statements audited by an independent accountant?	2b	Yes	
С	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	Yes	
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	Yes	
ь	If "Yes," did the organization undergo the required audit or audits?	3b	Yes	

Employer identification number

OMB No 1545-0047

Public Charity Status and Public Support

(Form 990 or 990EZ)

SCHEDULE A

Department of the Treasury
Internal Revenue Service

Name of the organization

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.

2008

Open to Public
Inspection

BABSO	ON COLL	EGE						0.4	210254	4	
Pa	rt I	Reason	for Public C	harity Status (to be co	mpleted	by all or	ganizatio		-210354 <i>-</i> Instruct		
				ation because it is (Please					moduce	101137	
1	Ē			nurches, or association of ch					(A)(i).		
2	<u></u>	•		tion 170(b)(1)(A)(ii). (Attac							
3	Г	A hospital	or a cooperativ	e hospital service organizati	on descril	bed in Sec	tion 170(l	b)(1)(A)(i	ii). (Attac	h Schedul	e H)
4	Γ	A medical i	research organi	zation operated in conjunction	on with a l	hospital d	escribed i	n Section	170(b)(1)	(A)(iii). E	nter the
		hospital's name, city, and state									
5	Γ	An organization operated for the benefit of a college or university owned or operated by a governmental unit described in									
		Section 170	D(b)(1)(A)(iv).	(Complete Part II)							
6	Γ	A federal, s	tate, or local g	overnment or governmental	unıt descr	ıbed ın Se	ction 170	(b)(1)(A)	(v).		
7	Γ	An organiza	ation that norm	ally receives a substantial p	art of its s	support fro	om a gove	rnmental ເ	ınıt or fron	n the gene	ral public
		described i	n Section 170(l	o)(1)(A)(vi) (Complete Par	tII)						
8	Γ	A communi	ity trust describ	oed in Section 170(b)(1)(A)	(vi) (Com	plete Par	tII)				
9	Γ	An organiza	ation that norm	ally receives (1) more than	331/3% o	fits supp	ort from c	ontributior	ns, membe	rship fees	, and gross
		receipts fro	om activities re	lated to its exempt functions	—subject	to certair	n exceptio	ns, and (2) no more	than 331/	3% of
		ıts support	from gross inve	estment income and unrelate	ed busines	ss taxable	ıncome (l	less sectio	on 511 tax	k) from bu	sınesses
		acquired by	the organizati	on after June 30, 1975 See	Section 5	09(a)(2).	(Complete	e Part III)		
10		An organiza	atıon organızed	and operated exclusively to	test for p	ublic safe	ty See Se	ct ion 509	(a)(4). (Se	ee instruc	tions)
11	Γ	_	=	and operated exclusively for					•	•	
				orted organizations describe type of supporting organizat						Section 5	09(a)(3). Check
			ype I b				nally Integ		'' d	Гтуре	III - Other
е	Γ	By checkin	g this box, I ce	rtify that the organization is					one or mor	e disquali	fied persons
				agers and other than one or	more publ	ıcly supp	orted orga	nızatıons	described	ın sectior	1509(a)(1) or
f		section 50		d =t.a data	+b - TDC	. +6-+ .+	5 Tuno I	TunaII.a	. Tuna III		
•		check this		d a written determination fro	ill the IKS	tilat it is	а гуре 1,	Type II o	i Type III	Supportin	ig organization,
g				as the organization accepted	d any gift	or contrib	utıon from	any of the	!		•
		following pe									
			•	r indirectly controls, either a		_	tn persons	s describe	a in (ii)		Yes No
			· -	ng body of the the supported	_	tion				11g	
			•	erson described in (i) above		h 2				11g(
L				ty of a person described in (11g(<u>''') </u>
h		Provide the	e lollowing infor	mation about the organizatio	ns the org	janization	supports				
	(i) Na	ame of	(ii) EIN	(iii) Type of organization	(iv) ī	s the	(v) Did v	ou notify	(vi) T	s the	(vii) A mount of
		orted	(,	(described on lines 1-9		ation in		nızatıon		ation in	support?
	Organ	ıızatıon		above or IRC section		listed in	ın col (i	i) of your		rganızed	
	(See Instructions)) your governing support? in the U.S.? document?										
					Yes	No	Yes	No	Yes	No	-
					162	140	162	140	162	140	
							 				
							 	<u> </u>			
							+	+			

Total

Part II	Support Schedule for Organizations Described in IRC 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.)

Pι	ıblic Support		, ,	,				
Cale	endar 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 The value of services or facilities					 		
3	furnished by a governmental unit to the							
	organization without charge							
4	Total. Add line 1-3					1		
5	The portion of total contribution by each							
5	person (other than a government unit or							
	publicly supported organization) included							
	on line 1 that exceed 2% of the amount							
	shown on line 11, column							
	· (f)							
6	Public Support subtract line 5 from line							
	4							
	otal Support		1		T			
	endar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) :	2008	(f) Total
7	A mounts 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							
10	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 instructio	ns)		•	12		
13	First Five Years. If the Form 990 is for the	organization's f	irst second thu	d fourth or fifth	ntay vearas a F		3)	
	organization, check this box and stop here		mat, second, tim	u, rouren, or mer	rtax year as a s	/O1(C)(C	• •	▶ □
								•
Co	omputation of Public Support Perc	entage						
14	Public Support Percentage for 2008 (line 6	5 column (f) dıvı	ded by line 11 c	olumn (f))		14		
15	Public Support Percentage for 2007 School	dule A , Part IV -	A, line 26f			15		
16a	33 1/3% Test - 2008. If the organization di	d not check the	box on line 13.	and line 14 is 3	3 1/3% or more.		this box	
	and stop here. The organization qualifies a				,			▶ □
b	33 1/3% Test - 2007. If the organization d				15 is 33 1/3% d	r more,	check th	
	box and stop here. The organization qualifi	es as a publicly	supported orga	nızatıon				▶ □
17a	10% Facts and Circumstances Test - 2008.							
	more, and if the organization meets the "fa		•					· —
	organization meets the "facts and circums							► □
Ь	10% Facts and Circumstances Test - 2007.							
	more, and if the organization meets the "fa		•					_
4.0	the organization meets the "facts and circu							n ▶
18	Private Foundation. If the organization did	not check the b	oux on line 13, 1	oa, 160, 1/a or	1/D, check this	oox an	u see	▶ □
	ınstructions							F-1

Pa	Support Schedule for On (Complete only if you ched)(2)		
	ction A. Public Support						
Cale	ndar 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						
2	include any "unusual grants ") Gross receipts from admissions,						
2	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	A mounts included on lines 1, 2, and 3						
	received from disqualified persons Amounts included on lines 2 and 3						
D	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	Total of lines 7a and 7b						
8	Public Support (Substract line 7c from						
·	line 6)						
To	tal Support		•	•			
Cale	ndar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
9	A mounts 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 30 June, 1975						
С	Add lines 10a and 10b						
11	Net income from unrelated business						
	activities not included in line 10b,						
	whether or not the business is regularly carried on						
12	Other income Do not include gain or loss						
12	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 fi	rst, second, thir	d, fourth, or fifth	ntax year as a 5	01(c)(3) organı	zation,
	check this box and stop here						▶□
	mputation of Public Support Perc						
15	Public Support Percentage for 2008 (line		•	olumn (f))		15	
16	Public Support Percentage for 2007 Sche	dule A , Part IV -	A, line 27g			16	
	mputation of Investment Income			40 1 1			
17	Investment Income Percentage for 2008 (-))	17	
18	Investment Income Percentage from 2007	'Schedule A , Pa	rt IV-A, line 27	h		18	

19a 33 1/3% 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 **33 1/3% 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

Private Foundation If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions

Schedule A (Form 990 or 990-EZ) 2008

▶□

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

Schedule A (Form 990 or 990-EZ) 2008

Software ID: Software Version:

EIN: 04-2103544

Name: BABSON COLLEGE

Form 990, Part VII - Section Aaa

Porm 990, Part VII - Section Ada			(C tion (hat a	chec		I			(5)	(F)
(A) Name and Title	(B) Average hours per week	Individual Trustee or Director	Institutional Trustee		Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W- 2/1099MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	Estimated amount of other compensation from the organization and related organizations
Kelly A Ayotte , TRUSTEE	1 20	Х						0	0	0
JOSEPH P CAMPANELLI , TRUSTEE	1 20	X						0	0	0
THE Honor Craig Benson , TRUSTEE	1 20	Χ						0	0	0
THOMAS J BLISCHOK , TRUSTEE	1 20	Χ						0	0	0
WILLIAM G BURRILL , TRUSTEE	1 20	Х						0	0	0
KAREN K CHANDOR , TRUSTEE	1 20	Х						0	0	0
STEPHEN D CUTLER , TRUSTEE	1 20	Х						0	0	0
WILLIAM BYGRAVE , TRUSTEE	1 20	Х						36,715	0	0
ANTHONY R CHIASSON , TRUSTEE	1 20	Х						0	0	0
THOMAS F GILBANE JR , TRUSTEE	1 20	Х						0	0	0
GLORIA M GUTIERREZ , TRUSTEE	1 20	Х						0	0	0
MUHAMMAD H HABIB , TRUSTEE	1 20	Х						0	0	0
BRUCE T HERRING , TRUSTEE	1 20	Х						0	0	0
N LYLE HOWLAND , TRUSTEE	1 20	Х						0	0	0
ANN B HUTCHINS , TRUSTEE	1 20	Х						0	0	0
ESTEFANO E ISAIAS SR, TRUSTEE	1 20	Х						0	0	0
THEODORE A CLARK , TRUSTEE	1 20	Х						0	0	0
ERIC G JOHNSON , TRUSTEE	1 20	Х						0	0	0
KATHRYN D KARLIC CFA , TRUSTEE	1 20	Х						0	0	0
CLEVE L KILLINGSWORTH , TRUSTEE	1 20	Х						0	0	0
PAUL W CHISHOLM , TRUSTEE	1 20	Х						0	0	0
DAVID F LAMERE , TRUSTEE	1 20	Х						0	0	0
ANDRONICO LUKSIC , TRUSTEE	1 20	Х						0	0	0
DR MYRA M HART , TRUSTEE	1 20	Х						0	0	0
WILLIAM F MARKEY JR , TRUSTEE	1 20	X						0	0	0
STEVEN A GAKLIS , TRUSTEE	1 20	X						0	0	0
DR RICHARD K MILLER , TRUSTEE	1 20	Х						0	0	0
JEREMIAH J NOONAN , TRUSTEE	1 20	Х						0	0	0
RICHARD A RENWICK , TRUSTEE	1 20	Χ						0	0	0
THOMAS N RILEY , TRUSTEE	1 20	Х						0	0	0

Form 990, Part VII - Section Aaa

Form 990, Part VII - Section Aaa										
		Posit	(C tion (hat a	chec		l			(E)	(F)
(A) Name and Title	(B) Average hours per week	Individual Trustee or Errector	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W- 2/1099MISC)	Reportable compensation from related organizations (W- 2/1099- MISC)	Estimated amount of other compensation from the organization and related organizations
GOBIND SAHNEY , TRUSTEE	1 20	Х						0	0	0
THOMAS T STALLKAMP , TRUSTEE	1 20	Х						0	0	0
JAMES W TAYLOR , TRUSTEE	1 20	Х						0	0	0
GARY T DICAMILLO , TRUSTEE	1 20	Х						0	0	0
DELIA H THOMPSON , TRUSTEE	1 20	Χ						0	0	0
AARON M WALTON , TRUSTEE	1 20	Χ						0	0	0
LAWRENCE WEBER , TRUSTEE	1 20	Χ						0	0	0
RONALD G WEINER , TRUSTEE	1 20	Х						0	0	0
ROBERT E WEISSMAN , TRUSTEE	1 20	Χ						0	0	0
JOSEPH L WINN , TRUSTEE	1 20	Χ						0	0	0
ANTHONY C WOODRUFF , TRUSTEE	1 20	Х						0	0	0
CARY L ZWERLING , TRUSTEE	1 20	Χ						0	0	0
CARLETON F KILMER , TRUSTEE	1 20	Χ						0	0	0
KENNETH G ROMANZI , TRUSTEE	1 20	Χ						0	0	0
WARREN KK LUKE , TRUSTEE	1 20	Х						0	0	0
LEO NARD A SCHLESINGER , PRESIDENT	40 00	Х		х				281,479	0	42,139
SHAHID ANSARI , ACT PROV/DEAN OF FACULTY	40 00			х				252,370	0	20,262
ROBERT V FOGEL, EXECUTIVE V P /EXECUTIVE	40 00			х				174,514	0	3,474
MARY ROSE , V P FOR ADMINISTRATION	40 00			х				200,195	0	22,175
RICHARD VOOS , VP FOR INST'I ADVaNCE	40 00			х				233,802	0	27,273
PHILIP SHAPIRO , VP FOR FINANCE & CFO	40 00			х				258,052	0	33,717
JONATHAN MOLL , VP AND GENERAL COUNSEL	40 00			х				188,090	0	24,626
CAROL HACKER , CLERK	40 00			Х				157,857	0	16,924
DENNIS HANNO , DEAN OF UNDERGR SCHOOL	40 00				х			236,935	0	45,849
SHELLEY KAPLAN , AVP FOR FACILITIES MANGT	40 00				х			153,792	0	17,217
ELAINE EISENMAN , DEAN OF BABSON EXECUTIVE	40 00				х			331,358	0	28,221
jay RAO , Faculty	40 00					Х		402,827	0	18,391
Joseph Weintraub , faculty	40 00					Х		388,871	0	23,791
PaTRICIA Guinan , faculty	40 00					Х		365,195	0	20,257
Mark Rice , faculty	40 00					Х		345,219	0	25,760

Form 990, Part VII - Section Aaa

orm 550, rait vii Section Au	<u> </u>									
		ı	(C tion (hat a	chec		I				(F)
(A) Name and Title	(B) Average hours per week	Individual Trustee or Director	Institutional Trustee		Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W- 2/1099MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	Estimated amount of other compensation from the organization and related organizations
Dhruv Grewal , faculty	40 00					Х		330,547	0	36,717
bRIAN M BAREFOOT , foRMER PRESIDENT	40 00						х	179,722	0	70,514
pATRICIA GREENE , FORMER PROVOST	40 00						х	320,618	0	25,941
hENRY DENEAULT , VICE PROVOST	40 00						Χ	254,879	0	23,914
MICHAEL FETTERS , FORMER PROVOST	40 00						X	188,351	0	19,060
E SCOTT TIMMINS , Former VP FOR MARKETING	40 00						х	256,329	0	28,148

Form 990, Part VIII - Statement of Revenue - 2a - 2g Program Service Revenue -

	Business Code	(A) Total Revenue	(B) Related or Exempt Function Revenue	(C) Unrelated Business Revenue	(D) Revenue Excluded from Tax under IRC 512, 513, or 514
a TUITION & FEES	900,099	116,260,956	116,260,956		
b ROOM & BOARD	900,099	18,974,519	18,974,519		
c Ed/Non-Ed Prog Rev	900,099	18,743,190	18,743,190		
d OTHER ED PRO G/AUX ACT	713,990	642,696		642,696	
e OTHER ED PRO G/A UX act	721,000	158,889		158,889	

Form 990, Part I, Line 1 - Briefly describe the Organization's mission or most significant activities:

See Schedule OBABSON COLLEGE IS A GLOBAL LEADER IN MANAGEMENT EDUCATION WITH APPROXIMATELY 1800 UNDERGRADUATE AND 1600 GRADUATE ENROLLMENT. WE EDUCATE MEN AND WOMEN TO BE ENTREPRENEURIAL LEADERS IN A RAPIDLY CHANGING WORLD. THROUGHOUT THEIR CAREERS, WE PREPARE THEM TO IDENTIFY OPPORTUNITIES AND INITIATE ACTIONS THAT RESULT IN GENUINE ACCOMPLISHMENT. OUR INNOVATIVE CURRICULA CHALLENGE STUDENTS TO THINK CREATIVELY AND ACROSS DISCIPLINARY BOUNDARIES. WE CULTIVATE THE WILLINGNESS TO TAKE AND MANAGE RISK, THE ABILITY TO ENERGIZE OTHERS TOWARD A GOAL, AND THE COURAGE TO ACT RESPONSIBLY. OUR STUDENTS UNDERSTAND THAT LEADERSHIP REQUIRES BOTH TECHNICAL KNOWLEDGE AND A SOPHISTICATED APPRECIATION OF INSTITUTIONS, SOCIETIES, CULTURES, AND THE SELF. THEY WELCOME THE CHALLENGE OF LEARNING CONTINUOUSLY AND TAKING RESPONSIBILITY FOR THEIR CAREERS. OUR STUDENTS WILL BE KEY CONTRIBUTORS IN ESTABLISHED ENTERPRISES AS WELL AS EMERGING VENTURES.

SCHEDULE C

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Political Campaign and Lobbying Activities

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

OMB No 1545-0047

Open to Public Inspection

To be completed by organizations described below. Attach to Form 990 or Form 990-EZ

If the organization answered "Yes," to Form 990, Part IV, Line 3, or Form 990-EZ, Part VI, line 46 (Political Campaign Activities)

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

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

- ◆ Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) complete Part II-A Do not complete Part II-B
- ◆ Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A tion answered "Vos " to Form 000 Port IV Line 5 (Provy Tox)

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

	ection 501(c)(4), (5), or (6) organ	uzations complete Part III				
	ame of the organization BSON COLLEGE			Employer iden	itification number	
				04-2103544		
Par		by all organizations exemp ee the instructions for Schedule		n 501(c) and section	527	
1	Provide a description of the o	rganization's direct and indirect pol	itical campaign act	tivities in Part IV		
2	Political expenditures				\$	
3	V olunteer hours					
Par	rt I-B To be completed for Schedule C for o	by all organizations exemp	t under sectio	n 501(c)(3). (See the	instructions	
1	Enter the amount of any excis	se tax incurred by the organization u	ınder section 4955	5	\$	
2	Enter the amount of any excis	e tax incurred by organization mana	agers under sectio	n 4955	\$	
3	If the organization incurred in	a section 4955 tax, did it file Form	4720 for this year	r?	┌ Yes	
4a	Was a correction made?				┌ Yes	
b	If "Yes," describe in Part IV					
Par		by all organizations exemp s for Schedule C for details.)	t under sectio	n 501(c), except sect	tion 501(c)(3).	
1	Enter the amount directly exp	Enter the amount directly expended by the filing organization for section 527 exempt function activities				
2	Enter the amount of the filing 527 exempt funtion activities	organization's internal funds contrib	outed to other orga	nizations for section	\$	
3	Total of direct and indirect ex 1120-POL, line 17b	empt function expenditures Add lin	es 1 and 2 and en	ter here and on Form	\$	
4	Did the filing organization file	Form 1120-POL for this year?			┌ Yes	
5	were made Enter the amount political contributions receive	and Employer Identification Number paid and indicate if the amount was ed and promptly and directly deliver action committee (PAC) If addition	paid from the filing ed to a separate po	g organization's own interna olitical organization, such a	l funds or were s a separate	
	(a) Name	(b) Address	(c) EIN	(d) A mount paid from filing organization's internal funds If none, enter - 0 -	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none, enter - 0 -	

Cat No 50084S

Schedule C (Form 990 or 990-EZ) 2008

d Grassroots non-taxable amount

f Grassroots lobbying expenditures

e Grassroots ceiling amount (150% of line d, column (e))

P	art II-A To be completed by (election under sec						768		
	Check If the filing organization	belongs to an affili	ated group						
<u>B</u>	Check If the filing organization Limits on Lo (The term "expenditure	bbying Expend	litures—		olly	(a) Filing Organization's Totals	(b) Affiliated Group Totals		
1a	Total lobbying expenditures to influe	nce public opinion	(grass roots lob	bying)					
ь	Total lobbying expenditures to influe	nce a legislative b	ody (direct lobby	yıng)					
c	Total lobbying expenditures (add lin	es 1a and 1b)							
d	Other exempt purpose expenditures								
e	Total exempt purpose expenditures	(add lines 1c and 1	d)						
f	Lobbying nontaxable amount Entercolumns— If the amount on line 1e, column (a) or (b) is: Not over \$500,000		taxable amount						
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% o	of the excess over \$	500,000					
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% o	of the excess over \$	51,000,000					
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of	the excess over \$1	.,500,000					
	Over \$17,000,000	\$1,000,000							
	Grassroots nontaxable amount (ente	er 25% of line 1f)							
h	Subtract line 1g from line 1a Enter	0- ıflıne g ıs more	than line a						
i	Subtract line 1f from line 1c Enter -	0- ıflıne fıs more t	han line c						
j	If there is an amount other than zero section 4911 tax for this year?	on either line 1h o	r line 11, did the	organization file	Form 4720 rep	orting	┌ Yes ┌ No		
	(Some organizations tha columns below.		on 501(h) el	ection do not	have to cor		he five		
	Lobb	ying Expendit	ures During	4-Year Avera	ging Period				
	Calendar year (or fisca beginning in)	l year	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) Total		
_2a	Lobbying non-taxable amount								
	Lobbying ceiling amount (150% of line 2a, column(e))								
	: Total lobbying expenditures								

Schedule C (Form 990 or 990-EZ) 2008

ككسا	rt II-B To be completed by organizations exempt under section 501(c)(3) the 5768 (election under section 501(h)). (See the instructions for Schedule C			eu FUIII	J II
		(a	1)	(b)	
		Yes	No	A mou	ın
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of				_
а	Volunteers?		No		
b	Paid staff or management (include compensation in expenses reported on lines c through i)?		Νο		
c	Media advertisements?		Νo		
d	Mailings to members, legislators, or the public?		Νo		
е	Publications, or published or broadcast statements?		Νo		
f	Grants to other organizations for lobbying purposes?		No		
g	Direct contact with legislators, their staffs, government officials, or a legislative body?		No		
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means?		No		
i	Other activities If "Yes," describe in Part IV	Yes			
j	Total lines 1c through 1:				_
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		No		
b	If "Yes" enter the amount of any tax incurred under section 4912				
c	If "Yes" enter the amount of any tax incurred by organization managers under section 4912				
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
Pai	t III-A To be completed by all organizations exempt under section 501(c)(4) section 501(c)(6). (See the instructions for Schedule C for details.)	, section	501(c)(5), or	•
				Yes	\rfloor
1	Were substantially all (90% or more) dues received nondeductible by members?			1	

			Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?	1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?	2		
3	Did the organization agree to carryover lobbying and political expenditures from the prior year?	3		

Part III-B To be completed by all organizations exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) if BOTH Part III-A, questions 1 and 2 are answered "No" OR if Part III-A, question 3 is answered "Yes." (See the instructions for Schedule C for details.)

1	Dues, assessments and similar amounts from members	1 \$
2	Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).	
а	Current Year	2a \$
b	Carryover from last year	2b \$
c	Total	2c \$
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3 \$
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4 \$
5	Taxable amount of lobbying and political expenditures (line 2c total minus 3 and 4)	5 \$

Part IV Supplemental Information

Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, and Part II-B, line 1i Also, complete this part for any additional information.

Ident if ier	Return Reference	Explanation
Part II-B, Line 11	Explanation of Other Lobbying Activities	The organization pays membership dues to member organizations which may engage in lobbying activities Therefore, a portion of the dues may be attributable to lobbying activities

Part IV Supplemental I	<u>nformation</u>	
Ident if ier	Return Reference	Explanation

Schedule C (Form 990 or 990EZ) 2008

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As Filed Data

DLN: 93493130006200

OMB No 1545-0047

Open to Public Inspection

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

► 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.

Supplemental Financial Statements

Employer identification number Name of the organization BABSON COLLEGE 04-2103544

Pa	rt I Organizations Maintaining Donor A organization answered "Yes" to Form 9		unds or Accounts	. Complete if the
	organization answered Tes to Form 5	(a) Donor advised funds	(b) Funds and o	ther accounts
	Total number at end of year			
	Aggregate Contributions to (during year)			
;	Aggregate Grants from (during year)			
	Aggregate value at end of year			
i	Did the organization inform all donors and donor adv funds are the organization's property, subject to the	3	noradvised	┌ Yes ┌ No
,	Did the organization inform all grantees, donors, and used only for charitable purposes and not for the beimpermissible private benefit?	5 5	•	┌Yes ┌No
Pa	rt III Conservation Easements. Complete	ıf the organization answered "Yes" t	o Form 990, Part IV	', line 7.
	Purpose(s) of conservation easements held by the of Preservation of land for public use (e.g., recreat Protection of natural habitat Preservation of open space	ion or pleasure) Preservation of a	n historically important ertified historic structu	•
2	Complete lines 2a-2d if the organization held a qua on the last day of the tax year	lified conservation contribution in the forn	n of a conservation eas	ement
			Held at	the End of the Year
а	Total number of conservation easements		2a	
b	Total acreage restricted by conservation easemen	ts	2b	
c	Number of conservation easements on a certified h	nstoric structure included in (a)	2c	
d	Number of conservation easements included in (c)	acquired after 8/17/06	2d	
;	Number of conservation easements modified, transf the taxable year 🕨	erred, released, extinguished, or terminat	ed by the organization (during

- 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?
- Staff or volunteer hours devoted to monitoring, inspecting and enforcing easements during the year
- 7 A mount of expenses incurred in monitoring, inspecting, and enforcing easements during the year ▶\$
- Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(ı) and 170(h)(4)(B)(ıı)?

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.

- 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
- 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

For Paperwork Reduction Act Notice, see the Intructions for Form 990

(ii) Assets included in Form 990, Part X

- 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
- Revenues included in Form 990, Part VIII, line 1

Assets included in Form 990, Part X

Cat No 52283D

Schedule D (Form 990) 2008

┌ Yes

Part 1	<u>III</u> Organizations Maintaining Co	illections of Art, F	IIST	tori	<u>cai ireas</u>	ures, or Otne	er Similai	r Asse	ts (co	ontinued)
	sing the organization's accession and othe ems (check all that apply)	r records, check any o	fthe	e fol	-	_		llection	1	
аГ	Public exhibition	•	d	Γ	Loan or ex	change programs	5			
ьГ	Scholarly research		e	Γ	Other					
с Г	Preservation for future generations									
	rovide a description of the organization's coart XIV	ollections and explain	how	the	y further the	organization's e	xempt purp	ose in		
	uring the year, did the organization solicit ssets to be sold to raise funds rather than						nılar	Г	Yes	┌ No
	Trust, Escrow and Custodial . Part IV, line 9, or reported an ar	Arrangements. Co	omp	olet	e if the org		vered "Yes	s" to Fo	rm 9	90,
	s the organization an agent, trustee, custoo ncluded on Form 990, Part X?	dian or other intermedia	ary 1	for c	ontributions	or other assets	not	Г	Yes	┌ No
b If	f "Yes," explain why in Part XIV and comple	ete the following table								
								A mou	int	
	Beginning balance					1c				
	additions during the year					1d				
_	Distributions during the year					1e				
f E	inding balance					1f				
2a D	id the organization include an amount on F	orm 990, Part X, line 2	17					Γ	Yes	∏ No
	f "Yes," explain the arrangement in Part XI\									
Part	V Endowment Funds. Complete	If the organization a				Form 990, Par Two Years Back (d			Naur V	a a ro. Do ale
1a B	eginning of year balance	216,376,522	(D)	Prior	Year (c)	Two Years Back (a) i nree Years i	васк (е)Four Y	ears back
	ontributions	4,043,573								
	nvestment earnings or losses	-38,842,574								
	rants or scholarships	-2,143,564								
	ther expenditures for facilities	-8,409,675								
	nd programs	,,,,,,,								
f A	dministrative expenses									
g E	nd of year balance	171,024,282								
2 P	rovide the estimated percentage of the yea	r end balance held as								
а в	oard designated or quasi-endowment	39 000 %								
	ermanent endowment - 61 000 %									
	erm endowment 🕨									
	re there endowment funds not in the posse	ssion of the organization	on t	hat a	are held and	administered for	· the			
	rganization by	ooron or the organization	011 (1						Yes	No
(i	i) unrelated organizations							3a(i)		Νo
-	ii) related organızatıons							3a(ii)		No
	f "Yes" to 3a(II), are the related organizatio	•						3b		<u> </u>
	escribe in Part XIV the intended uses of th	<u>-</u>				D 10				
Part \	VI Investments—Land, Building	s, and Equipment	. Se							
	Description of investment				Cost or other (investment)	(b) Cost or other basis (other)	(c) Depreci	ation	(d) Bo	ok value
1a Lar	nd		\top			489,673				489,673
b Bui	ıldıngs					239,175,289	121,26	8,821	11	7,906,468
c Lea	asehold improvements									
d Equ	uipment					28,707,863	27,43	32,116		1,275,747
e Oth	her					29,954,981	13,26	55,461	1	6,689,520
	Add lines 1a-1e <i>(Column (d) should equal Fo</i>	orm 990, Part X, column	(B),	line	10(c).) .		▶		13	6,361,408

Part VIII Investments—Other Securities. See	Form 990, Part X, line 12.	
(a) Description of security or cateory	(b)Book value	(c) Method of valuation
(including name of security) inancial derivatives and other financial products		Cost or end-of-year market value
Closely-held equity interests		
Other ALTERNATIVE INVESTMENTS	55,255,831	
Jule ALIERNATIVE INVESTMENTS	35,253,631	
otal. (Column (b) should equal Form 990, Part X, col (B) line 12)	55,255,831	
otal. (Column (b) should equal form 990, Fait A, col (b) line 12)	33,233,631	
art VIII Investments—Program Related. Se	e 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)	- 15	
Part IX Other Assets. See Form 990, Part X, II (a) Descri		(b) Book value
(4) 503011	ption	(b) Book value
		<u> </u>
otal. (Column (b) should equal Form 990, Part X, col.(B) line	15)	<u>.</u>
Part X Other Liabilities. See Form 990, Part X		
(a) Description of Liability	(b) A mount	
ederal Income Taxes		
OVERNMENT ADVANCES FOR STUDENT LOANS	2,934,689	
MARKET VALUE OF INTEREST RATE SWAP		
ONTRACTS	12,894,691	
Total. (Column (b) should equal Form 990, Part X, col (B) line 25) 🕨	15,829,380	

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	174,316,43
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	172,217,77
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	2,098,66
4	Net unrealized gains (losses) on investments	4	-36,310,163
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	
9	Total adjustments (net) Add lines 4 - 8	9	-36,310,163
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	-34,211,500
	t XII Reconciliation of Revenue per Audited Financial Statements With Revenue		· · ·
1	Total revenue, gains, and other support per audited financial statements	1	112,443,39!
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments		
b	Donated services and use of facilities		
c	Recoveries of prior year grants		
d	Other (Describe in Part XIV)		
e	Add lines 2a through 2d	2e	-61,873,040
3	Subtract line 2e from line 1	3	174,316,43!
4	A mounts included on Form 990, Part VIII, line 12, but not on line 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b .		
b	Other (Describe in Part XIV)		
С	Add lines 4a and 4b	4c	(
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	174,316,43
	Reconciliation of Expenses per Audited Financial Statements With Expenses		
1	Total expenses and losses per audited financial statements	1	146,654,89!
2	A mounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities		
Ь	Prior year adjustments		
C 	Losses reported on Form 990, Part IX, line 25		
a	Other (Describe in Part XIV)		,
e	Add lines 2a through 2d	2e	146 654 901
3	Subtract line 2e from line 1	3	146,654,89
4	A mounts 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)		25 562 673
C -	Add lines 4a and 4b	4c	25,562,877
5 Date	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5	172,217,772
		- mt VIV - I	
Con	nplete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, P	ait XIV , IINe	s id and ∠b,

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

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part XIV, 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

Ident if ier	Ret urn Reference	Explanation
Part V , Line 4	Description of Intended Use of Endowment Funds	Babson College's endowment consists of over 225 individual funds which have been established over time for various purposes, including scholarships, chairs and professorships, facilities, athletics and other educational services
Part X	Description of Uncertain Tax Positions Under FIN 48	No Liability for FIN 48
Part XII, Line 2d - Other Adjustments		STUDENT AID \$25,562,877
Part XIII, Line 4b - Other Adjustments		STUDENT AID \$25,562,877

Employer identification number

OMB No 1545-0047

2008

Open to Public Inspection

SCHEDULE E

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

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

Schools

BABSON COLLEGE 04-2103544 YES NO Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body? 1 Yes Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships? 2 Yes Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe If "No," please explain 3 Yes BABSON COLLEGE PROHIBITS DISCRIMINATING ON THE BASIS OF RACE, COLOR, NATIONAL, OR ETHNIC ORIGIN, RELIGION, SEX, LIFESTYLE, SEXUAL ORIENTATION PREFERENCE, AGE, HANDICAP, OR VETERAN STATUS THIS POLICY IS PUBLISHED IN FACULTY & STAFF HANDBOOK Does the organization maintain the following? a Records indicating the racial composition of the student body, faculty, and administrative staff? 4a Yes b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory 4h Yes c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships? 4c Yes d Copies of all material used by the organization or on its behalf to solicit contributions? 4d Yes If you answered "No" to any of the above, please explain (If you need more space, attach a separate statement) Does the organization discriminate by race in any way with respect to a Students' rights or privileges? 5a Νo **b** Admissions policies? 5b Νo c Employment of faculty or administrative staff? 5c Νo d Scholarships or other financial assistance? 5d Νo e Educational policies? 5e Νo f Use of facilities? 5f Νo g Athletic programs? 5g Νo h Other extracurricular activities? 5h Νo 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? 6a Yes **b** Has the organization's right to such aid ever been revoked or suspended? 6b Νo If you answered "Yes" to either 6a or b, 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

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DLN: 93493130006200

OMB No 1545-0047

2008

Open to Public Inspection

Department of the Treasury

Internal Revenue Service

SCHEDULE F

(Form 990)

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

Statement of Activities Outside the United States

Name of the organization

Employer identification number

3A B	SON COLLEGE					04-2103544	1		
Pa	art I General Info	mation on Ac	tivities Outsi	de the United States	s. Complete			nswere	d
	"Yes" to Form S								
1	assistance, the grante	ees' eligibility fo	or the grants or	ecords to substantiate factorial and the se	lection crite	rıa used to a	ward	∕es 「	_ _{No}
2	For grant makers. Descr United States	ibe in Part IV the	organization's pr	ocedures for monitoring th	ne use of gra	nt funds outsıd	e the		
3	Activites per Region (U	se Schedule F-1	(Form 990) ıf add	ditional 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)	ıs a progr describe sı	ty listed in (d) am service, pecific type of s) in region	(f) Total e	xpenditi egion	ures ır
Se	e Add'l Data			and region,	,	, 3			

Totals .

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

	F-1 (Form 990) if a			tea States. Complete	if the organization a	inswered "Yes" to Form	990, Part IV, line 16.
(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) A mount of cash grant	(e) Manner of cash disbursement	(f) A mount of non- cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
	I			1	1	1	I

Schedule F (Form 990) 2008

Part IV Supplemental Infor Complete this part to	provide the information requi	red in Part I, line 2, and any other additional information.
Identifier	ReturnReference	Explanation
Method Used to Acccount for Expenditures		Schedule F, Part I, Line 3 The organization does not currently track foreign expenditures for each program separately Therefore, Pursuant to IRS guidance, disclosure in this column is not required in the current year

Software ID: **Software Version:**

EIN: 04-2103544

Name: BABSON COLLEGE

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

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type)(i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures in region
Central America and the Caribbean	0	0	Fundraising/Alumni Relations		_
Central America and the Caribbean	0	0	Program Services	Student Study Abroad Programs	
East Asia and the Pacific	0	0	Fundraising/Alumni Relations		
East Asia and the Pacific	0	0	Program Services	Executive Education	_
East Asia and the Pacific	0	0	Program Services	Student Study Abroad Programs	
Europe	0	0	Fundraising/Alumni Relations		
Europe	0	0	Program Services	Executive Education	
Europe	0	0	Program Services	Student Study Abroad Programs	
Middle East and North Africa	0	0	Fundraising/Alumni Relations		
North America	0	0	Program Services	Executive Education	
North America	0	0	Program Services	Student Study Abroad programs	
Russia and Newly Independent States	0	0	Program Services	Executive Education	
Russia and Newly Independent States	0	0	Program Services	Student Study Abroad Programs	
South America	0	0	Fundraising/Alumni Relations		
South America	0	0	Program Services	Executive Education	
South America	0	0	Program Services	Student Study Abroad Programs	
South Asia	0	0	Fundraising/Alumni Relations		0
Various	0	0	Program Services	Student Study Abroad Programs	0
Europe	0	0	Investment		0
Central America and the Caribbean	0	0	Investment		0

Form 990 Schedule F Part II - Grants and Other Assistance to Organizations or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)

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DLN: 93493130006200

OMB No 1545-0047

2008

Department of the Treasury

Internal Revenue Service

(Form 990 or 990-EZ)

SCHEDULE G

Attach to Form 990 or Form 990-EZ. Must be completed by organizations that answer "Yes" to Form 990, Part IV, lines 17, 18, or 19, and by organizations that enter more than \$15,000 on Form 990-EZ, line 6a.

Supplemental Information Regarding

Fundraising or Gaming Activities

Open to Public Inspection

Name of the organization				Employer identification number			
BABSON COLLEGE				04-2103544			
Part I Fundraising Activities	. Complete if the o	organızat	ion answered "Yes" t	to Form 990, Part IV	, line 17.		
1 Indicate whether the organization ra	aised funds through a	any of the	following activities Che	eck all that apply			
a Mail solicitations	_		e Solicitation of r	on-government grants			
b Email solicitations			f	jovernment grants			
c Phone solicitations			g Special fundrais	sing events			
d In-person solicitations							
2a Did the organization have a written or key employees listed in Form 99	•	•			Γ _{Yes} Γ _{No}		
b If "Yes," list the ten highest paid inc to be compensated at least \$5,000							
	,) Did		(-) (
(i) Name of individual	Cust	serhave ody or	(iv) Gross receipts from activity	(v) A mount paid to (or retained by) fundraiser listed in col (i)	(vi) A mount paid to		
or entity (fundraiser) (ii)	Activity	trol of			(or retained by) organization		
		outions?			organization		
	Yes	No					
<u> </u>							
Total		>					

3 List all states in which the organization is registered or licensed to solicit funds or has been notified it is exempt from registration or licensing

Pai	rt II	Fundraising Events. Com more than \$15,000 on Form					repor	ted
			(a) Event #1	(b) Event #2	(c) O ther Events	(Add col		
			President's Cup (event type)	(event type)	(total number)	cc	ol (c))	
₽	1	Gross receipts	96,605	5			9	6,605
Revenue	2	Less Charitable	61,225	5			6	1,225
ш.	3	Gross revenue (line 1 minus line 2)	35,380				3	5,380
	4	Cash Prizes	С					
မှာ ()	5	Non-cash Prizes	C					
Direct Expenses	6	Rent/Facility costs	41,155	5			4	1,155
ă	7	Other direct expenses	7,315	5				7,315
ਰ ਵਿ	8			4	8,470			
Δ	9		-1	3,090				
Par	t III	Net income summary Combine III Gaming. Complete if the or \$15,000 on Form 990-EZ, III	ganization answered		art IV, line 19, or repo	rted moi	e thar	1
Revenue			(a) Bingo (b) Pull tabs/Instant bingo/progressive bingo					(Add ol (c))
~	1	Gross revenue			30,380		3	0,380
<u> </u>	2	Cash prizes			18,648		1	8,648
pens,	3	Non-cash prizes			1,351	ı		1,351
Direct Expenses	4	Rent/facility costs						
짇	5	Other direct expenses			2,318		2,	
	6	Volunteer labor	│ Yes	│ Yes	├ Yes% 			
	7	Direct expense summary Add line	s 2 through 5 ın column (d)				2,317
	8	Net gaming income summary Com	bine lines 1 and 7 in colu	ımn (d)				8,063
9	Ent	er the state(s) in which the organiza	ation operates gaming ac	tivities MA			Yes	No
а		he organization licensed to operate				. 9a	Yes	
b	If"	No," Explain						
10a		re any of the organization's gaming l Yes," Explain	licenses revoked, suspen	ided or terminated during	g the tax year?	10a		No
b	1f "'	_						
11		es the organization operate gaming a	activities with nonmembo	urs?				N o
12	Ist	he organization a grantor, beneficia	ry or trustee of a trust or	a member of a partnersh	nip or other entity			10
	forn	ned to administer charitable gaming	?			12		Νο

								Yes	No
13		percentage of gaming ac							
а	The organiza	ation's facility			13a	100 000 %			
b	An outside f	acılıty			13b				
14	Provide the records	name and address of the	person who prepares the	e organization's gaming/sp	pecial 6	events books and			
	Name 🟲	Pamela Curtin							
	Address 🟲	231 Forest Street Babson Park, MA 024	57				-		
15a				whom the organization red			15a		No
ь	If "Yes," ent	er the amount of gaming	revenue received by the	e organization 🟲 \$		and the			
	amount of ga	amıng revenue retained b	y the third party 🏲 \$						
c	If "Yes," ent	er name and address							
	Name 🟲								
	Address 🟲								
16	Gaming manager information								
	Name 🟲	None							
	Gaming man	ager compensation 🟲 \$ _		0_					
	Description	of services provided 🕨 _							
	Director,	/officer	☐ Employee	Independer	nt cont	ractor			
.7	Mandatory d	ıstrıbutıons							
а	=			ole distributions from the g	amıng	proceeds to	17a		No
b		nount of distributions requ zation's own exempt acti		stributed to other exempt of	organız	ations or spent			

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

OMB No 1545-0047

2008

DLN: 93493130006200

Department of the Treasury Internal Revenue Service Name of the organization

BABSON COLLEGE

Schedule I

(Form 990)

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

Open to Public Inspect ion

Employer identification number

							04-2103544	
Pä	art I General Infor	mation on Gra	nts and Assistance				•	
1 2	Does the organization mathe selection criteria use Describe in Part IV the c	ed to award the gra	nts or assistance?					√ Yes
	Form 990, Part Part IV and Sch	her Assistance	e to Governments any recipient that receptional space is	and Organizations	in the United Stat	tes. Complete if the confined one recipient rec		
1	(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) A mount of cash grant	(e) A mount 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 seconganizations					•		
3	Enter total number of oth							•
	Paperwork Reduction Act No				Cat No 500551	p	Sch	nedule I (Form 990) 2008

	•	
art 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) A mount of cash grant	(d)A mount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
Institutional Grants/Scholarship	1164	25,562,877			

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

See Additional Data Table

Ident if ier	Return Reference	Explanation
Procedure for Monitoring Grants in the U S	,	Schedule I, Part I, Line 2 The procedures for need-based awards include review and resolution of all federal-processor- identified eligibility conflicts, and 100% verfication of reported parent and student incomes. For all funds there is a separation of the awarding and disbursement functions (different individuals responsible for each), monthly reconciliations between student accounts and the College's general ledger, and an annual audit in accordance with OMB Circular A-133 SCHEDULE I, PART III THE CASH GRANT IS REFLECTED ON STUDENTS' ACCOUNTS

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DLN: 93493130006200

Employer identification number

OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury

ın Part III

Name of the organization

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.

Open to Public Inspection

BABSON COLLEGE 04-2103544 **Questions Regarding Compensation** Νo Yes 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 Housing allowance or residence for personal use First class or charter travel Payments for business use of personal residence Travel for companions Health or social club dues or initiation fees Tax idemnification and gross-up payments Discretionary spending account Personal services (e.g., maid, chauffeur, chef) If line 1a is checked, did the organization follow a written policy regarding payment or reimbursement or provision of all the expenses described above? If "No," complete Part III to explain **1**b Νo 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 Yes 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 Written employment contract Independent compensation consultant Compensation survey or study Form 990 of other organizations Approval by the board or compensation committee During the year, did any person listed in Form 990, Part VII, Section A, line 1a Receive a severance payment or change of control payment? Yes Participate in, or receive payment from, a supplemental nonqualified retirement plan? 4b Νo 4c Νo Participate in, or receive payment from, an equity-based compensation arrangement? If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III 501(c)(3) and 501(c)(4) organizations only must complete lines 5-8. 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 Yes 5b Νo Any related organization? If "Yes," to line 5a or 5b, describe in Part III 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 6a The organization? Νo 6b Any related organization? Νo If "Yes," to line 6a or 6b, describe in Part III 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 Νo Were any amounts reported in Form 990, Part VII, paid or accured pursuant to a contract that was subject to the initial contract exception described in Regs section 53 4958-4(a)(3)? If "Yes," describe

Νo

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space 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	f W-2 and/or 1099-MI	SC compensation	(C) Deferred	(D) Nontaxable	(E) Total of columns	(F) Compensation reported in prior Form 990 or Form 990-EZ	
	(i) Base compensation	(ii) Bonus & Incentive compensation	(iii) Other compensation	compensation	benefits	(B)(ı)-(D)		
See Addıtıonal Data Table (i)								
(ii)								
(i)								
(ii)								
(i)								
(ii)								
(i)								
(ii)								
(i)								
(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

Ident if ier	Ret urn Ref erence	Explanation
	Part I, Line 1a	FIRST-CLASS TRAVEL THE COLLEGE POLICIES ALLOW THE PRESIDENT TO TRAVEL FIRST-CLASS UNDER CERTAIN CIRCUMSTANCES Travel for companions ON occasion, The President's spouse travels with the president to certain Babson College fundraising and networking events to assist in these activities which further the mission of the college Housing allowance. The president and the Dean of the undergraduate school are required to live in campus housing as a condition of employment for the convenience of the Babson College. The fair market value of housing is included as a non-taxable benefit. Health or Social Club. The president receives an annual membership to a local country club. The value attributable to the President's non-business use is included in his compensation. (FY09 amount. none)
	Part I, Line 1b	All the items checked above are included as part of the individual's employment contract and approved by the executive committee of the board of trustees
	Part I, Line 4a	Scott Timmins received six months of compensation as a result of his separation from Babson College
	Part I, Line 5	One key employee has a incentive plan based on the performance of certain programs at the College
Supplemental Information	Part III	Former President Brian M Barefoot's term with Babson ended on June 30, 2008 Leonard A Schlesinger started his term as the President on July 1, 2008

Software ID: Software Version:

EIN: 04-2103544

Name: BABSON COLLEGE

Form 990, Schedule J, Part	rm 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees											
(A) Name	(B) Breakdown o	f W-2 and/or 1099-MI	SC compensation	(C) Deferred	(D) Nontaxable	(E) Total of columns	(F) Compensation reported in prior Form					
	(i) Base Compensation			compensation	benefits	(B)(ı)-(D)	990 or Form 990-EZ					
LEONARD A SCHLESINGER	(ı) 235,702 II)		45,777	2,139	40,000	323,618						
	(i) 226,804 ii)		25,566	20,262		272,632						
	(i) 160,433		14,081	2,139	1,335	177,988						
MARY ROSE ((ı) 194,208 II)		5,987	21,949	226	222,370						
RICHARD VOOS	(ı) 206,911)		26,891	25,562	1,711	261,075						
PHILIP SHAPIRO ((ı) 215,662 II)		42,390	25,562	8,155	291,769						
	(ı) 167,722 ıı)		20,368	19,471	5,155	212,716						
	(ı) 138,772 II)		19,085	16,338	586	174,781						
DENNIS HANNO	(i) 205,365 ii)		31,570	25,078	20,771	282,784						
SHELLEY KAPLAN ((i) 145,665		8,127	15,506	1,711	171,009						
	(ı) 281,026 II)	43,941	6,391	25,562	2,659	359,579						
	(ı) 379,018 II)		23,809	13,236	5,155	421,218						
	(ı) 364,589 II)		24,282	15,132	8,659	412,662						
PaTRICIA Guinan	(ı) 346,669 II)		18,526	14,102	6,155	385,452						
Mark Rice	(i) 318,944 ii)		26,275	23,101	2,659	370,979						
Dhruv Grewal	(ı) 308,656 II)		21,891	25,562	11,155	367,264						
brian m barefoot	(i) 166,340		13,382	12,728	57,786	250,236						
pATRICIA GREENE	(ı) 293,727 (ı)		26,891	25,562	379	346,559						
hENRY DENEAULT ((ı) 213,707 II)		41,172	20,688	3,226	278,793						
MICHAEL FETTERS ((ı) 183,615 II)		4,736	18,945	115	207,411						
E SCOTT TIMMINS	(ı) 120,473 (ı)		135,856	23,423	4,725	284,477						

DLN: 93493130006200

2008

OMB No 1545-0047

Supplemental Information on Tax Exempt Bonds

Department of the Treasury Internal Revenue Service

Schedule K

(Form 990)

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

Open to Public Inspect ion

Name of the organization Employer identification number BABSON COLLEGE 04-2103544 **Bond Issues** (Required for 2008) (h) O n Behalf of (g) Defeased (c) CUSIP # (d) Date Issued (b) Issuer EIN (f) Description of Purpose (a) Issuer Name (e) Issue Price Issuer Yes No Yes No MASSACHUSETTS REFINANCE 1995 BONDS -DEVELOPMENT FINANCE 04-3431814 57583RCV5 08-31-2005 22.996.717 STUDENT DORM Х Х AGENCY CONSTRUCTION MASSACHUSETTS DEVELOPMENT FINANCE 04-3431814 57583RSC0 10-04-2007 21,336,830 REFINANCE 1997 BOND ISSUE Χ Χ AGENCY MASSACHUSETTS DEVELOPMENT FINANCE 57583RVW3 04-17-2008 36,475,000 REFINANCE 2001 BOND ISSUE Χ Χ 04-3431814 AGENCY Proceeds (Optional for 2008) C Ε Α D Total Proceeds of Issue Gross Proceeds in Reserve Funds 2 Proceeds in Refunding or Defeasance Escrows 3 Other Unspent Proceeds 4 5 Issuance Costs from Proceeds Working Capital Expenditures from Proceeds 6 Capital Expenditures from Proceeds 7 Year of Substantial Completion 8 Yes No Yes No Yes No Yes No Yes No Were the bonds issued as part of a current refunding issue? 10 Were the bonds issued as part of an advance refunding issue? Has the final allocation of proceeds been made? 11 Does the organization maintain adequate books and records to support the final allocation of proceeds? Part III Private Business Use (Optional for 2008) C Ε Α D Yes No Yes No Yes No Yes No Yes No Was the organization a partner in a partnership, or a member of an LLC, which owned property financed by tax-exempt bonds? Are there any lease arrangements with respect to the financed property

which may result in private business use?

Schedule K	(Form 990) 20	800	
Part III	Private Bu	siness Use	(Continued)

		Α		В		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?										
3b	Are there any research agreements with respect to the financed property which may result in private business use?										
3с	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 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 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?										
Pai	rt IV Arbitrage (Optional for 2008)										
		ı	Α	E	3	(<u>c</u>	ı	<u> </u>	ı	Ε
		Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
1	Has a Form 8038-T been filed wth respect to the bond issue?										
2	Is the bond issue a variable rate issue?										
3a	Has the organization or the government issuer identified a hedge with respect to the bond issue on its books and records?										
ь	Name of provider										
С	Term of hedge										
4a	Were gross proceeds invested in a GIC?										
ь	Name of provider										
С	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?										

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OMB No 1545-0047

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Schedule L

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

► Attach to Form 990 or Form 990-EZ. ► To be completed by organizations that answered "Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V lines 38b or 40b.

Transactions with Interested Persons

Name of the organization BABSON COLLEGE

Employer identification number

04-2103544

Part I Excess Benefit Transac To be completed by organization									. Pari	V. line	 ≥ 40b
1 (a) Name of disqualifie					on of trans					c) Cor	rected?
									-	Yes	No
2 Enter the amount of tax imposed on section 4958	_	-	or disqualified pers		during the y	ear ui	nder F	\$			
3 Enter the amount of tax, If any, on II			the organization .				•	\$			
Part II Loans to and/or From			000 D t	TV 1.	26 5		00 F	7 0	V 1	- 20-	
To be completed by organiza		Yes c	on Form 990, Part	1 V , II	ne 26, or F	orm 9	9U-E	2, Part (f		e 38a	
(a) Name of interested person and purpose	(b) Loan to or from the organization?	(c)	O riginal principal amount	(d)B	alance due	(e) defa		Approved by board o		agree	Vritten ement?
p.a. p.o.c	To From	+	2			Yes No		comm Yes	No.	Yes	No
	10 110111					103	110	103	110	103	+ 110
	_										+
											+-
To be completed by orga (a) Name of Interested person	nizations that answ (b)Relationshi				(c)A mount of grant or type				pe of	assista	ance
Part IV Business Transactions To be completed by orga				90	Part IV lir	ne 28	a 28	b or i	28c		
(a) Name of interested person	(b) Relationsh between interes person and the	ıp ted	(c) A mount of		(d) Desci			-		organız	aring of ation's nues?
	organization									Yes	No
Janice Bell	Spouse of Acting Provost		179,	945	Faculty Me	mber					Νο
Fidelity Investments	CIO of Fidelity & Babson Trustee		99,	402	Investmen	t fee p	aıd				Νο
Fidelity Investments	cIO of Fidelity & Babson Trustee		35,	386	Executive l	Educa	tion f	ees			Νο
Blue Cross Blue Shield	President/CEO & E Member are also Babson Trustee & President emeritus		5,135,	123	Health insu	ırance	prem	niums p	aıd		No
blue Cross Blue Shield	President/CEO & E Member are also Babson Trustee & President emeritus	Board	140,	257	7 Executive Education fees received						Νο

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DLN: 93493130006200

OMB No 1545-0047

Open to Public Inspection

SCHEDULE M (Form 990)

Department of the Treasury

Part I Types of Property

To be completed by organizations that answered "Yes" on Form 990, Part IV, lines 29 or 30. Attach to Form 990

Non-Cash Contributions

Internal Revenue Service Name of the organization

Employer identification number BABSON COLLEGE 04-2103544

		(a) Check If	(b) Number of Contributions	(c) Revenues reported on Form 990, Part VIII, line	(d) Method of de reven	termi	nıng	
		applicable		1 g				
1	Art—Works of art							
2	Art—Historical treasures .							
3	Art—Fractional interests							
4	Books and publications							
5	Clothing and household goods							
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property							
9	Securities—Publicly traded .	Х	23	1,262,659	Avg of Hı&Low-date	tradı	ng	
10	Securities—Closely held stock $\ .$							
11	Securities—Partnership, LLC, or trust interests							
12	Securities—Miscellaneous							
13	Qualified conservation contribution (historic structures)							
14	Qualified conservation contribution (other)							
15	Real estate—Residential .							
16	Real estate—Commercial							
17	Real estate—Other							
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies .							
21	Taxıdermy							
22	Historical artifacts							
23	Scientific specimens							
	Archeological artifacts							
25	Other (describe)							
26	Other (describe)							
27	Other (describe)							
	Other (describe)							
29	Number of Forms 8283 received which the organization complete Acknowledgement	, ,	3 ,	ar for contributions for	29			0
							Yes	No
30a	During the year, did the organization hold for at	ation receiv	e by contribution any prope	rty reported in Part I, lines	1-28 that it must			
	least three years from the date of			not required to be used for e	exempt purposes			
	for the entire holding period? .					30a		No
	If "Yes", describe the arrangeme					24	V	
31	Does the organization have a gif	t acceptano	ce policy that requires the r	eview of any non-standard	contributions?	31	Yes	
32a	Does the organization hire or us contributions?	e third parti	es or related organizations	to solicit, process, or sell r	non-cash	32a	Yes	
ь 33	If "Yes", describe in Part II If the organization did not report	revenues i	n Column (c) for a type of p	roperty for which Column (a	ı) ıs			
	checked, describe in Part II							

Page 2 Schedule M (Form 990) 2008 Part II Supplemental Information. Complete this part to provide the information required by Part I, lines 30b, 32b, and 33. Also complete this part for any additional information. Identifier ReturnReference Explanation Third Party Use Part I, Line 32b Babson utilizes the services of a broker to sell donated securities Column (B) Babson used the number of contributions received for column (B)

OMB No 1545-0047

SCHEDULE 0

Department of the Treasury Internal Revenue Service

(Form 990)

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.

2008

Open to Public Inspection

Name of the organization **BABSON COLLEGE**

Employer identification number

04-2103544

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section A, line 2		Tw o trustees sit on the board of another not-for-profit organization

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section A, line 10		The Form 990 is prepared internally and reviewed by management and Pricew aterhousecoopers, LLP "PWC" The full 990 return, including schedule B, is then reviewed by senior management, and the audit committee The final form 990, with the exception of schedule B, is then made available to the full board of trustees prior to filing with the IRS PWC signs the return as paid preparer

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section B, line 12c		Each year all trustees are required to complete and sign a conflict of interest questionnaire and statement of compliance. Their response to the questionnaire is reviewed by management. In addition, payroll and vendor files are reviewed for the existence of transactions with related parties. If a conflict occurs the board member will recuse him or herself from any matters relating to the transaction.

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section B, line 15		Compensation for the President, officers and key employees of the College is reviewed by Human Resources at least once a year. This review includes comparing relevant, independent market compensation and is documented. The executive committee of the Board of Trustees is provided appropriate information including a recommendation for compensation (or increase in compensation). Any changes to compensation for the President, officers and key employees is approved by this committee.

ldentifier	Return Reference	Explanation	
Form 990, Part VI, Section C, line 19		Babson College's financial statements can be found at www babson edu. Babson does not make available to the public our conflict of interest policy, or other governing documents	

ldentifier	Return Reference	Explanation	
Form 990, Part XI, Line 2c		The audit committee of the board of trustees is responsible for oversight of the audit. The committee review's and approves the audited financial statements	