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DLN: 93493111002080

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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 C Name of organization HEBREW COLLEGE B Check if applicable Please use IRS 04-2104300 Address change label or Doing Business As E Telephone number Name change print or type. See (617) 559-8600 Initial return Specific Number and street (or P O box if mail is not delivered to street address) Room/suite **G Gross receipts** \$ 14,804,799 Instruc-160 HERRICK ROAD Termination tions. City or town, state or country, and ZIP + 4 NEWTON, MA 02459 Amended return Application pending Name and address of Principal Officer **H(a)** Is this a group return for Rabbi Daniel Lehmann affiliates? 160 HERRICK ROAD NEWTON, MA 02459 H(b) Are all affiliates included? 501(c) (3) ◀ (insert no) √ 4947(a)(1) or
√ 527 (If "No." attach a list See instructions) Group Exemption Number 🕨 Web site: ► hebrewcollege edu L Year of Formation 1927 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 16 16 Number of independent voting members of the governing body (Part VI, line 1b) $\,$. 444 Total number of employees (Part V, line 2a) . 125 Total number of volunteers (estimate if necessary) . Total gross unrelated business revenue from Part VIII, line 12, column (C) . 0 Net unrelated business taxable income from Form 990-T, line 34 . 0 7b b **Prior Year Current Year** Contributions and grants (Part VIII, line 1h) . . 6,103,569 4,862,793 9 Program service revenue (Part VIII, line 2g) . . 8,571,200 6,368,793 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) . 330,127 182,196 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 432,297 245,923 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12 15,437,193 11,659,705 1,073,747 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 209,956 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 10,657,975 9,428,094 10) 16a Professional fundraising fees (Part IX, column (A), line 11e) 0 b (Total fundraising expenses, Part IX, column (D), line 25 $\underline{610,424}$ **17** Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f) 8,789,325 6,627,427 Total expenses—add lines 13-17 (must equal Part IX, line 25, column (A)) 17,129,268 18 19,657,256 Revenue less expenses Subtract line 18 from line 12 19 -4,220,063 -5,469,563 8 % **End of Year** Beginning of Year Assets of Balance 20 Total assets (Part X, line 16) 40,191,332 33,860,823 21 Total liabilities (Part X, line 26) 34,895,362 36,208,568 22 Net assets or fund balances Subtract line 21 from line 20 5,295,970 -2,347,745 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** 2010-04-03 Sign Signature of officer Here Rabbi Daniel Lehmann President Type or print name and title Date Check if Preparer's PTIN (See Gen Inst) Preparer's DANA MARKS signature Paid empolyed 🕨 🦵 Preparer's ALEXANDER ARONSON FINNING & CO PC Firm's name (or yours

21 EAST MAIN STREET

WESTBORO, MA 01581 May the IRS discuss this return with the preparer shown above? (See instructions) . .

if self-employed).

address, and ZIP + 4

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

1	Briefly describe the organization's mission See Part I, Line 1				
2	Did the organization undertake any significant the prior Form 990 or 990-EZ?		rvices during the year	r which were not listed on	┌ Yes ┌ No
3	If "Yes," describe these new services Did the organization cease conducting services?	g or make significant	changes in how it coi	nducts any program	┌ Yes ┌ No
4	Describe the exempt purpose achieve Section 501(c)(3) and (4) organizatio others, the total expenses, and revenue	ments for each of the ns and 4947(a)(1) to	rusts are required to i	report the amount of grants	
4a	(Code) (Expenses \$ Instruction Knowledge generation and the d daytime, evening and weekend programs in				
4b	(Code) (Expenses \$ Academic Services Providing services for Colstudents	267,939 llege student recruitment,	including grants of \$ student records and adm) (Revenue \$ Inistration for the Academic progra	5,100) ams for approximately 700
4c	(Code) (Expenses \$ Student Services Operating the library and ii	598,444 Information technology for	including grants of \$ r the Academic programs f) (Revenue \$ or approximately 700 students	9,848)
	(Code) (Expenses \$	150,345	including grants of \$) (Revenue \$	58,102)
4d	Other program services (Describe ii				
4e	(Expenses \$ Total program service expenses \$	including grants of 11,954,946) (Revenue \$, Line 25, column (B).)

Part IV	Checklist of	Required	Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	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		Νο
4	Section 501(c)(3) organizations Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4		No
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		Νο
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8	Yes	
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 V 🕏	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		Νο
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		No
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? <i>If "Yes," complete Schedule F, Part II</i>	15		Νο
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? <i>If</i> "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		No
19	Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		Νo
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		Νο
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		Νο
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		No
ь	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
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		N o
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		Νο
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 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			
		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		No
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		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		No
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</i> "Yes," complete Schedule N, Part II	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations section 301 7701-2 and 301 7701-3? <i>If</i> "Yes," complete Schedule R, Part I	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		No
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		No
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		Νο
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, Part VI	37		No

Pa	t V Statements Regarding Other IRS Filings and Tax Complianc	е				
					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	485			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	1b	0			
c	Did the organization comply with backup withholding rules for reportable payments t			_		
_	gaming (gambling) winnings to prize winners?			1c		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements filed for the calendar year ending with or within the year covered by this return	2a	444			
b	If at least one is reported in 2a, did the organization file all required federal employn	nent t	ax returns?	2b	Yes	
3a	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this Did the organization have unrelated business gross income of \$1,000 or more durin				165	
	return?			3a		N o
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Scho			3b		
4a	At any time during the calendar year, did the organization have an interest in, or a sover, a financial account in a foreign country (such as a bank account, securities acaccount)?	-	•	4a		No
b	If "Yes," enter the name of the foreign country					
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1 , <i>Re Financial Accounts</i> .	port o	f Foreign Bank and			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during	ng the	tax year?	5a		Νο
b	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-Exemp Tax Shelter Transaction?	t Entit	y Regarding Prohibited	5c		
6a	Did the organization solicit any contributions that were not tax deductible?			6a		N o
ь	If "Yes," did the organization include with every solicitation an express statement th					
	were not tax deductible?			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 con more?	trıbutı	on of \$75 or	7a		No
b	If "Yes," did the organization notify the donor of the value of the goods or services \boldsymbol{p}	rovide	d?	7b		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal proper	rty for	which it was required to	7c		NI -
الد	file Form 8282?	7d		/c		N o
u	Trives, indicate the number of Forms 6262 med during the year	/u				
e	Did the organization, during the year, receive any funds, directly or indirectly, to pay benefit contract?			7e		Νο
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal transfer of the property of the pro			7f		No
g	For all contributions of qualified intellectual property, did the organization file Form 8	8899	as required?	7g		
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization f	ıle a F	orm 1098-C as			
_	required?			7h		
8	Section $501(c)(3)$ and other sponsoring organizations maintaining donor advised funds a supporting organizations. Did the supporting organization, or a fund maintained by a sexcess business holdings at any time during the			8		
9	year?					_
	Did the organization make any taxable distributions under section 4966?	_		9a		
ь	Did the organization make a distribution to a donor, donor advisor, or related person			9b		
10	Section 501(c)(7) organizations. Enter					
а	Initiation fees and capital contributions included on Part VIII, line 12	10a				
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b				
11	Section 501(c)(12) organizations Enter					
	Gross income from members or shareholders					
		11a				
D	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	11b				
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in	lieu	of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the	124				
	year	12b				

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

	Section A.	. Governing	Body and	Management
--	------------	-------------	-----------------	------------

			res	NO
	For each "Yes" response to lines 2-7 below, and for a "No" response to lines 8 or 9b below, describe the circumstances, processes, or changes in Schedule O. See instructions.			
1a	Enter the number of voting members of the governing body 1a 16			
b	Enter the number of voting members that are independent 1b 16			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		Νo
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		Νo
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4	Yes	
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		Νo
6	Does the organization have members or stockholders?	6		No
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a		Νο
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		Νo
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	the governing body?	8a	Yes	
b	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		N N
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?	9b		
10	Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations must describe in Schedule O the process, if any, the organization uses to review the Form 990	10	Yes	
11	Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	11		Νo

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		Νo
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		Νo
	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		No
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.

 upon request
- 19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public See Additional Data Table
- 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization

LEON ZAIMES CPA 160 HERRICK ROAD NEWTON, MA 02459 (617) 559-8782

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	·	(C) Position (check all that apply)							(E)	(F)
(A) Name and Title	(B) Average hours per week	Individual Trustee or Chrector	Institutional Trustee	(D) Reportable compensation from the organizations (W-2/1099MISC) (E) Reportable compensation from related organizations (W-2/1099-MISC)	Reportable compensation from the organization (W-	Estimated amount of other compensation from the organization and related organizations				
							-			

Part VIII Continued

		(C) Position (check all that apply)							(E)	(F)	
(A) Name and Title	(B) A verage hours per week	Individual Trust on or Director	11 1		Highest compensated employee Key employee Officei Institutional Trustee		Former Highest compensated employee Key employee		(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
							\vdash				
			-								
			1								
1b Total							•	1,031,802	2	97,904	
2 Total number of individuals (including	those in 1	a) who	recei	ved	mor	e thai	n \$1	00 000 in reportabl		1	

Total number of individuals (including those in 1a) who received more than \$100,000 in reportable compensation from the organization ►11

				110
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If</i> " <i>Yes,"</i> complete Schedule <i>J</i> 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 J for such individual	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 J 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				
Accounting Management Solutions Inc 800 South Street suite 95 Waltham, MA 02453	Accounting/Management	555,181				
Mintz Levin Cohn Ferris Glovsky & Po One Financial Center Boston, MA 02111	Legal	101,908				
Total number of independent contractors (including those in 1) who received more than \$100,000 in compensation						

Ves No

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 can	npaigns 1a					
ants Ints	ь	Membership d	ues					
s, gra	c	Fundraising ev	1b /ents 1c					
<u>#</u>	d	Related organ	ızatıons1d					
<u>∞,</u> E	e	Government gran	nts (contributions) 1e					
Other Revenue Contributions, gifts, grants and other similar amounts	f	All other contribut similar amounts r	tions, gifts, grants, and not included above	4,862,793				
語品	а	Noncash cont	1f rıbutıons ıncluded ın					
동물	9							
<u> </u>	h	Total (Add line	es 1a-1f) . . .		4,862,793			
				Business Code				
Other Revenue Program Service Revenue and other similar amounts amounts and other similar amounts amounts and other simila	2a	Tuition and fees		900,099	5,909,372	5,909,372		
	ь	Auxiliary enterpris	ses	900,099	459,421	459,421		
	c							
	d							
જૂ	e							
gran	f	All other prog	ram service revenue					
Other Revenue Contributions, gifts, grants amounts and other similar amounts amounts and other similar amounts and other s	g	Total. Add line ▶ \$ 6,368,793	es 2a-2f					
	3		come (including divi	dends, interest				
		other sımılar a	imounts)	[170,420			170,420
	4	Income from inve	estment of tax-exempt bo	ond proceeds				
	5	Royalties .		•				
		Royalties :	(ı) Real	(II) Personal				
	6a	Gross Rents	(1)	(,				
Other Revenue Program Service Revenue	ь	Less rental expenses						
	с	Rental income						
	d	or (loss) Net rental inco	ome or (loss)					
			(ı) Securities	(II) O ther				
	7a	Gross amount from sales of	3,156,870					
		assets other than inventory						
	ь	Less cost or other basis and	3,097,100	47,994				
	c	sales expenses Gain or (loss)	59,770	-47,994				
		Net gaın or (lo		•	11,776			11,776
	8a	Gross income	from fundraising					
		events (not in	cluding					
Ξ		of contribution	ns reported on line					
क ≥		1c) See Part : Attach Schedul	IV, line 18 e G if total exceeds					
Other Revenue Contributions, gifts, grants and other similar amounts		\$15,000 · ·	a					
	ь		xpensesb					
	С	Net income or	(loss) from fundraisi	ing events ►				
	9a	Gross income activities See	from gaming part IV, line 19					
		Complete Sched						
		CACCCUS \$15,00	a					
	ь	Less directe	xpensesb					
Program Service Revenue	С		(loss) from gaming a	activities Þ -				
	10a	Gross sales or returns and al	f inventory, less lowances .	-				
	ь	Less cost of						
			(loss) from sales of	ınventory►				
		Mıscellaneou	s Revenue	Business Code				
	11a	Gain on sale o	fbooks	900,099	245,923			245,923
	ь							
	c							
	d	All other revei	nue					
	e	Total. Add line						
	12	Total Davis	N dd linas 4 5 3 - 3	\$ 245,923	11,659,705	6,368,793	0	428,119
	12	8c,	. Add lines 1h, 2g, 3		11,035,103	5,550,75	O	120,117

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 1	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	1,073,747	1,073,747		
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	356,427		356,427	
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$				
7	Other salaries and wages	8,174,470	6,668,211		389,753
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
9	Other employee benefits	309,729	233,593	62,483	13,653
10	Payroll taxes	587,468	461,030	99,491	26,947
11	Fees for services (non-employees)				
а	Management				
b	Legal	203,746	4,139	199,607	
c	Accounting	93,759		93,759	
d	Lobbying				
е	Professional fundraising See Part IV, line 17				
f	Investment management fees				
g	Other	724,260	189,910	509,950	24,400
12	Advertising and promotion	38,895	34,877	1,650	2,368
13	Office expenses	733,068	563,811	130,503	38,754
14	Information technology	38,690	38,690		
15	Royalties				
16	Occupancy	591,865	197,971	393,894	
17	Travel	329,027	321,718	6,802	507
18	Payments of travel or entertainment expenses for any Federal, state or local public officials				
19	Conferences, conventions and meetings	15,902	13,315	2,123	464
20	Interest	1,525,559	1,075,807	388,978	60,774
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	885,085		885,085	
23 24	Insurance	31,559		31,559	
а	Training	453,984	453,455	350	179
ь	Special Programs & Even	410,587	380,280	25,386	4,921
c	Repairs & maintenance	230,112	6,546	218,426	5,140
d	Miscellanous	207,795	151,862	13,369	42,564
e	Bad debt	47,846	45,316	2,530	· · · · · ·
f	All other expenses	65,688	40,668	25,020	
25	Total functional expenses. Add lines 1 through 24f	17,129,268	11,954,946	4,563,898	610,424
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)

Dart V	Balance	Shoot
Part X	Balance	Sheet

					(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing			291.431		785,669
	2	Savings and temporary cash investments				2	
	3	Pledges and grants receivable, net			4,850,494		3.281.351
	4	Accounts receivable, net			296,225		167.337
	5	Receivables from current and former officers, directors, trustees other related parties Complete Part II of Schedule L			5	,	
	6	Receivables from other disqualified persons (as defined under sepersons described in section 4958(c)(3)(B) Complete Part II of 3	958(f)(1)) and		6		
	7	Notes and loans receivable, net				7	
	8	Inventories for sale or use	• •	• •		8	
60	9	Prepaid expenses and deferred charges	•		208,354	<u> </u>	59,507
ē	10a	Trepaid expenses and defened charges	•		200,001	<u> </u>	55,551
Assets	IUa	Land, buildings, and equipment cost basis	10a	28,369,174			
	b	Less accumulated depreciation <i>Complete Part VI of Schedule D</i>	10b	7,754,980	21,484,728	10c	20,614,194
	11	Investments—publicly traded securities			52,920	11	132,497
	12	Investments—other securities See Part IV, line 11 $\it Complete Passive Schedule D$	rt VII c	of	7,264,771	12	3,284,913
	13	Investments—program-related See Part IV, line 11 $\it Complete Part Section 11 $			13		
	14	Intangible assets			14		
	15	Other assets See Part IV, line 11 Complete Part IX of Schedule D	5,742,409	15	5,535,355		
	16	Total assets. Add lines 1 through 15 (must equal line 34)			40,191,332	16	33,860,823
	17	Accounts payable and accrued expenses .	1,030,894	17	1,179,185		
	18	Grants payable		18			
	19	Deferred revenue		772,648	19	660,675	
	20	Tax-exempt bond liabilities			32,100,000	20	32,100,000
<u>, o</u>	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					
ï		persons Complete Part II of Schedule L	•		22		
	23	Secured mortgages and notes payable to unrelated third parties				23	
	24	Unsecured notes and loans payable			336,033	24	378,596
	25	Other liabilities Complete Part X of Schedule D		655,787	25	1,890,112	
	26	Total liabilities. Add lines 17 through 25		34,895,362	26	36,208,568	
S do		Organizations that follow SFAS 117, check here ► and complet through 29, and lines 33 and 34.	lete lin	es 27			
Balance	27	Unrestricted net assets			-12,667,870	27	-11,434,465
8	28	Temporarily restricted net assets			8,976,763	28	1,355,304
돧	29	Permanently restricted net assets			8,987,077	29	7,731,416
or Fund		Organizations that do not follow SFAS 117, check here ► and lines 30 through 34.	lete				
<u>د</u>	30	Capital stock or trust principal, or current funds	•			30	
Assets	31	Paid-in or capital surplus, or land, building or equipment fund .			31		
As	32	Retained earnings, endowment, accumulated income, or other fu			32		
Net	33	Total net assets or fund balances			5,295,970	33	-2,347,745
_	34	Total liabilities and net assets/fund balances			40,191,332	34	33,860,823
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		No
b	Were the organization's financial statements audited by an independent accountant?	2b	Yes	
c	If "Yes" to lines 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c	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	
b	If "Yes," did the organization undergo the required audit or audits?	3b	Yes	

Employer identification number

OMB No 1545-0047

SCHEDULE A (Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

Public Charity Status and Public Support

To be completed by all section 501(c)(3) organizations and section 4947(a)(1)nonexempt charitable trusts. Attach to Form 990 or Form 990-EZ. See separate instructions.

Open to Public Inspection

HEBRE	N COL	LEGE								_		
Do		D	fa Darbija Ci	havitus Ctatus (to be ea		h all a			-210430			
Par				harity Status (to be co ation because it is (Please					mstruct	ions)		
	ryaiii.								/A \/:\			
1	 	•		urches, or association of ch			Section 1	L/U(B)(1)((A)(I).			
2	-			ion 170(b)(1)(A)(ii). (Attac			470/1		/ *			
3	<u> </u>	•	•	e hospital service organizati			-		• •		•	
4	ļ		-	zation operated in conjuncti	on with a i	hospital d	escribed ii	n Section	1/U(b)(1)	(A)(III). ⊨	nter the	
_	_		name, city, and									
5	ı			or the benefit of a college or	universit	y owned o	r operated	by a gove	ernmental	unit desci	ribed in	
	_			(Complete Part II)								
6	<u> </u>	A federal, state, or local government or governmental unit described in Section 170(b)(1)(A)(v).										
7	ı			ally receives a substantial p		support fro	m a gove	rnmental ı	ınıt or fron	n the gene	ral public	
	_		-))(1)(A)(vi) (Complete Par	•							
8	<u> </u>		•	ed in Section 170(b)(1)(A)			•					
9	ı	_		ally receives (1) more than					•			5 S
		•		ated to its exempt functions	-		•	, ,	•			
			-	estment income and unrelate			,			() from bu	sinesses	
	_	acquired by	the organization	on after June 30, 1975 See	Section 5	09(a)(2).	(Complete	e Part III)			
10	<u>_</u>	=	-	and operated exclusively to	-		· ·				-	
11		_	•	and operated exclusively fo		, ,			,	•		
				orted organizations describe type of supporting organiza						Section 5	U9(a)(3).	Cneck
		a T				- Function			'' d	Гтуре	III - Oth	ner
e	\sqcap	By checkin	g this box, I ce				-		one or mor	e disquali	fied perso	ons
		other than	foundation man	agers and other than one or	more publ	licly suppo	orted orga	nızatıons (described	ın section	509(a)(i	L) or
_									_			
f	By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) If the organization received a written determination from the IRS that it is a Type I, Type II or Type III supporting organization, check this box											
g				as the organization accepted	d anv gift	or contrib	ution from	anv of the	1			'
_		following pe		.	, 3			,				
		(i) a perso	n who directly o	r indirectly controls, either a	alone or to	gether wi	th persons	describe	d ın (ıı)		Yes	No
		and (III) bel	ow, the governı	ng body of the the supported	d organiza	tion?				11g	(i)	
		(ii) a famıly	/ member of a p	erson described in (i) above	7					11g(ii)	
		(iii) a 35%	controlled enti	ty of a person described in (ı) or (ıı) al	bove?				11g(iii)	
h		Provide the	following inform	nation about the organizatio	ns the org	ganızatıon	supports					
					Γ		1		1		1	
	• •	ame of	(ii) EIN	(iii) Type of organization		sthe	`	ou notify	l	s the	(vii) A m	
(oorted nization		(described on lines 1-9 above or IRC section		ation in listed in	_	nızatıon) of your		ation in rganized	supp	ortr
`	, i gui			(See Instructions))		verning		ort?		US?		
						ment?						
					Yes	No	Yes	No	Yes	No		

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, 100, 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						
С	Total of lines 7a and 7b						
8	Public Support (Substract line 7c from						
_	line 6)						
То	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						
	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	organızatıon's fı	rst, second, thir	d, fourth, or fifth	ntax year as a 5	01(c)(3) organı	zation,
	check this box and stop here						▶ □
	manufaction of Dublic Compact Days						
15	mputation of Public Support Perc Public Support Percentage for 2008 (line		dod by line 12 o	olumn (fl)		T 4= T	
			•	.orumin (1))		15	
16	Public Support Percentage for 2007 Sche	dule A , Part IV -	A, line 27g			16	
		D					
Co	mputation of Investment Income Investment Income Percentage for 2008 (ne 13 column /f	<u> </u>	17	
	-			-	"	17	
ΤQ	Investment Income Percentage from 2007	ocnequie A , Pa	TLIV-A, IINE 2/	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

OMB No 1545-0047

2008

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 **HEBREW COLLEGE** 04-2104300 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the Part I organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year Aggregate Contributions to (during year) 3 Aggregate Grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised □ No funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor or other impermissible private benefit? Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7 Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or pleasure) Preservation of an historically importantly land area Preservation of certified historic structure Protection of natural habitat Preservation of open space Complete lines 2a-2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Year 2a Total number of conservation easements h 2b Total acreage restricted by conservation easements 2c c Number of conservation easements on a certified historic structure included in (a) 2d d Number of conservation easements included in (c) acquired after 8/17/06 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during 3 the taxable year 🕨 Number of states where property subject to conservation easement is located 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
- b If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items
 - (i) Revenues included in Form 990, Part VIII, line 1

- \$

(ii) Assets included in Form 990, Part X

- \$

- 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

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

Part	Organizations Maintaining Co	llections of Art,	His	tori	<u>cal Treası</u>	ıres, or Othe	<u>r Similar</u>	Asse	ts (co	ontinued)
3	Using the organization's accession and other items (check all that apply)	records, check any	ofth	ne fol	owing that ai	e a significant u	ise of its co	llection	ו	
а	Public exhibition		d	Γ	Loan or exc	hange programs				
ь	Scholarly research		e	Γ	Other					
c	✓ Preservation for future generations									
4	Provide a description of the organization's co	llections and explai	n hov	w the	y further the	organization's e>	kempt purpo	ose in		
	Part XIV									
5	During the year, did the organization solicit of assets to be sold to raise funds rather than t						nılar	_	Yes	√ No
Par	Trust, Escrow and Custodial A Part IV, line 9, or reported an an	Arrangements.	Com	plet	e if the orga		ered "Yes			
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?					or other assets	not	Г	Yes	☐ No
b	If "Yes," explain why in Part XIV and comple	te the following tabl	е				_			
								A mou	ınt	
С	Beginning balance					1c				
d	Additions during the year					1d				
e	Distributions during the year					1e				
f	Ending balance					1f				
2a	Did the organization include an amount on Fo	rm 990, Part X, line	21?					Г	Yes	∏ No
	If "Yes," explain the arrangement in Part XIV									
Pai	t V Endowment Funds. Complete								V E	Dl-
1-	Beginning of year balance	(a)Current Year 8,507,181	(D)Prior	rear (c)	wo Years Back (d)	Inree Years E	заск (е)Four Y	ears Back
1a L	Contributions	-654,467								
ь	Investment earnings or losses	-828,165								
c d	Grants or scholarships	020,103								
e	Other expenditures for facilities	340,000								
•	and programs	,								
f	Administrative expenses									
g	End of year balance	6,684,549								
2	Provide the estimated percentage of the yea	r end balance held a	s							
а	Board designated or quasi-endowment 🕨									
b	Permanent endowment									
с	Term endowment ▶									
3a	Are there endowment funds not in the posses	sion of the organiza	tion	thata	are held and a	administered for	the			
	organization by						1	- (1)	Yes	No
	(i) unrelated organizations			•				3a(i)		No
ь	(ii) related organizations							3a(ii) 3b	<u> </u>	N o
ь 4	Describe in Part XIV the intended uses of th	•						30		<u> </u>
	t VI Investments—Land, Buildings					art X line 10				
I QI	tor investments tand, bandings	, and Equipmen	16. 0		Cost or other	(b)Cost or other		Т		
	Description of investment				s (investment)	basis (other)	(c) Depreci	ation	(d) Bo	ok value
1a l	and					2,283,974	1			2,283,974
	Buildings					20,677,032	ገ)7,327		6,669,705
	easehold improvements					70,685	<u> </u>	15,605		55,080
	Equipment					2,973,107		25,702		147,405
	Other					2,364,376		06,346		1,458,030
	. Add lines 1a-1e <i>(Column (d) should equal Fo</i>	rm 990, Part X, colum	nn (B)), line	10(c).)			, -		0,614,194
		· · · · · · · · · · · · · · · · · · ·	. ,				Schedi	ule D (F		90) 2008

Part VII Investments-Other Securities. See	Form 990, Part X, line 1:	2.	
(a) Description of security or cateory (including name of security)	(b) Book value		d of valuation year market value
Financial derivatives and other financial products			
Closely-held equity interests			
Other pooled investment fund	3,284,913		F_
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)	3,284,913		
Part VIII Investments—Program Related. Se	e Form 990. Part X. line	13.	
(a) Description of investment type	(b) Book value	(c) Method	d of valuation
(a) Description of investment type	(b) book value	Cost or end-of-	year market value
Total. (Column (b) should equal Form 990, Part X, col (B) line 13)			
Part IX Other Assets. See Form 990, Part X, III	ne 15.		
(a) Descri	ption		(b) Book value
Debt Service Reserve Fund			3,349,868
Debt Service funds			392,830
Bond Issuance Costs, net			1,386,441
Restricted cash			406,216
Total. (Column (b) should equal Form 990, Part X, col.(B) line 3	15.)		5,535,355
Part X Other Liabilities. See Form 990, Part X	 Ine 25. 		
(a) Description of Liability	(b) A mount		
Federal Income Taxes			
fair value of interest rate swap liability	1,546,684		
Annuity payable	343,428		
Total. (Column (b) should equal Form 990, Part X, col (B) line 25) ▶	1,890,112		

1 7	Total revenue (Form 990, Part VIII, column (A), line 12)	1	11,659,705
2 _T	Total expenses (Form 990, Part IX, column (A), line 25)	2	17,129,268
3 E	Excess or (deficit) for the year Subtract line 2 from line 1	3	-5,469,563
4 N	Net unrealized gains (losses) on investments	4	-898,296
5 [Donated services and use of facilities	5	
6 I	nvestment expenses	6	
7 F	Prior period adjustments	7	-384,959
8 (Other (Describe in Part XIV)	8	-890,897
9 7	Fotal adjustments (net) Add lines 4 - 8	9	-2,174,152
10 E	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	-7,643,715
Part >	Reconciliation of Revenue per Audited Financial Statements With Revenue p	er R	eturn
1	Total revenue, gains, and other support per audited financial		9,870,512
2	statements	1	
	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
	Net unrealized gains on investments		
	Recoveries of prior year grants		
	Other (Describe in Part XIV)	2-	1 700 103
		2e 3	-1,789,193 11,659,705
	Amounts included on Form 990, Part VIII, line 12, but not on line 1	3	11,059,705
	Investment expenses not included on Form 990, Part VIII, line 7b . 4a		
	Other (Describe in Part XIV) 4b		
c	Add lines 4a and 4b	4c	0
	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	11,659,705
Part X			· · ·
-	Total expenses and losses per audited financial statements	1	17,129,268
2	A mounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities		
b	Prior year adjustments		
c	Losses reported on Form 990, Part IX, line 25 2c		
d	Other (Describe in Part XIV) 2d		
e	Add lines 2a through 2d	2e	0
3	Subtract line 2e from line 1	3	17,129,268
4	A mounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIV) 4b		
С	Add lines 4a and 4b	4c	0
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5	17,129,268

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

Part XIV Supplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part 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	Return Reference	Explanation
Part III, Line 1a		The College does not capitalize collections, which have been acquired through purchase or donation. Purchases of collection items are recorded as decreases in unrestricted net assets in the year in which the items are acquired.
Part III, Line 4		The library has a number of valuable artifacts including rare texts, sculptures, scrolls and other religious artifacts which have been donated to the College over a period of many years. The College is also in possession of a collection of rare coins. These collections further the exempt purpose of the College because they are Jewish cultural artifacts being preserved for future generations and being used for the purposes of Jewish learning.
Part V , Line 4	Description of Intended Use of Endowment Funds	Part V, line 4 Part V, line 1b - Contributions includes a \$655,467 transfer from endowment to unrestricted net assets for prior year endowment contributions that were redesignated by the donor during the year Part V, line 4 - a portion of the endwoment investment return is used to help support the operations of the school, under an investment spending policy voted on by the Board of Trustees
Part XI, Line 8 - O ther Adjustments		unrealized loss on carrying value of interest rate swap contract -890897
Part XII, Line 2d - Other Adjustments		Unrealized loss on carrying value of interest rate swap contract -890897

SCHEDULE E

(Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Schools

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.

OMB No 1545-0047

2008

Open to Public

Name of the organization **Employer identification number HEBREW COLLEGE** 04-2104300 YES NO 1 Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body? 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 Yes The student materials, recruiting materials, web site, and employee handbook all have the required policy information disclosed 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 4b Yes c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships? 4c Yes 4d d Copies of all material used by the organization or on its behalf to solicit contributions? 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 5h h Other extracurricular activities? 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 **h** 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 CB 587, covering racial nondiscrimination? If "No," attach an explanation

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DLN: 93493111002080

OMB No 1545-0047

2008

Open to Public

Grants and Other Assistance to Organizations, (Form 990) Governments and Individuals in the U.S.

Department of the Treasury Internal Revenue Service Name of the organization

Schedule I

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

Inspect ion Employer identification number

HEBREW COLLEGE						04-2104300	
Does the organization m the selection criteria use	aintain records to s ed to award the grai	nts or assistance?	t of the grants or assista		gibility for the grants or as		▼ Yes □
Part IV and Sch	ther Assistance IV, line 21 for an nedule I-1 if addi	e to Governments ny recipient that rece tional space is	and Organizations erved more than \$5,0	in the United Sta	tes. Complete if the of if no one recipient rec	eived more than \$5,	
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 se organizations	, , , ,	_			<u> </u>		
					<u> </u>		•

Schedule I	(Form 990) 2008	
Part III	Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" on Form 990, Pai	rt 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
Various grants and scholarships to Hebrew College students	224	1,073,747			

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 College complies with the US Department of Education policy regarding Title IV funds The College has dedicated individuals perform the work outlined in the scope of the grant who work to ensure proper stewardship of funds These individuals follow the statutory and regulatory requirements set forth in the grant Funds are drawn after expenses are incurred Progress reports are submitted in compliance with the grant requirements and appropriate documentation is maintained

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DLN: 93493111002080

OMB No 1545-0047

Schedule J (Form 990)

Compensation Information

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

2008

Department of the Treasury Internal Revenue Service 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

Name of the organization HEBREW COLLEGE

Employer identification number

04-2104300

Pa	Tt I Questions Regarding Compensation	n				
					Yes	Νo
1a	Check the appropiate box(es) if the organization pr 990, Part VII, Section A, line 1a Complete Part II		•			
	First class or charter travel	<u> -</u>	Housing allowance or residence for personal use			
	Travel for companions	Γ	Payments for business use of personal residence			
	Tax idemnification and gross-up payments	Γ	Health or social club dues or initiation fees			
	Discretionary spending account	Γ	Personal services (e g , maid, chauffeur, chef)			
b	If line 1a is checked, did the organization follow a v provision of all the expenses described above? If "			1b	Yes	
2	Did the organization require substantiation prior to officers, directors, trustees, and the CEO/Executiv			2		No
3	Indicate which, if any, of the following the organizat organization's CEO/Executive Director Check all t					
	Compensation committee	<u> </u>	Written employment contract			
	Independent compensation consultant		Compensation survey or study			
	Form 990 of other organizations	⊽	Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990,	Part VII	I, Section A, line 1a			
а	Receive a severance payment or change of control	payment	t?	4a		Νo
b	Participate in, or receive payment from, a suppleme	ental non	qualified retirement plan?	4b	Yes	
c	Participate in, or receive payment from, an equity-l	based co	mpensation arrangement?	4c		Νo
	If "Yes" to any of lines 4a-c, list the persons and p	rovide th	ne applicable amounts for each item in Part III			
	501(c)(3) and 501(c)(4) organizations only must c	omplete	lines 5-8.			
5	For persons listed in form 990, Part VII, Section A compensation contingent on the revenues of	, line 1a,	, did the organization pay or accrue any			
а	The organization?			5a		Νo
b	Any related organization?			5b		Νo
	If "Yes," to line 5a or 5b, describe in Part III					
6	For persons listed in form 990, Part VII, Section A compensation contingent on the net earnings of	, line 1a,	, did the organization pay or accrue any			
а	The organization?			6a		No
Ь	Any related organization?			6b		No
	If "Yes," to line 6a or 6b, describe in Part III					
7	For persons listed in form 990, Part VII, Section A payments not described in lines 5 and 6? If "Yes,"		•	7		No
8	Were any amounts reported in Form 990, Part VII, subject to the initial contract exception described in Part III			8		N o

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)(1)-(111) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a

(A) Name		(B) Breakdown of W-2 and/or 1099-MISC compensation		SC compensation	(C) Deferred	(D) Nontaxable	(E) Total of columns	(F) Compensation
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other compensation	compensation benefits		(B)(ı)-(D)	reported in prior Form 990 or Form 990-EZ
Daniel Lehmann	(ı) (ıı)	150,225			32,000	22,927	205,152	
Michael Gilbert	(I) (II)	167,018				11,047	178,065	
moshe margolin	(I) (II)	135,428				15,119	150,547	
David Gordis	(I) (II)	149,110				7,560	156,670	
	(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	Explanat ion
		Pursuant to President Rabbi Lehmann's employment agreement, the College has set up a deferred compensation plan under section 457 of the Internal Revenue Code and accrued a contribution of \$22,250 to this plan as of 6/30/09 Contributions to this plan vest at various times through June, 2013, as long as the employee remains employed at the College
Supplemental Information	Part III	Schedule J Part I - Line 2 - The housing allowance is a parsonage allowance, the amount of which is negotiated as part of the President's contract
	T	

OMB No 1545-0047

Open to Public Inspection

SCHEDULE 0

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990

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

Name of the organization **HEBREW COLLEGE**

Employer identification number

04-2104300

ldentifier	Return Reference	Explanation
Form 990, Part III, line 4d	Other Program Services	Other The College provides accounting services for entities located within the campus such as a Camp, Historical Society and an Institute Funds are reimbursed to the college by these organizations Expenses \$ 150345 including grants of \$ 0 Revenue \$ 58102

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section A, line 4		During FY 2009, the college added articles to the bylaw's to incorporate the addition of emeritus and ex officio trustees

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section A, line 10		The form 990 is formally approved by the Finance Committee and then made available to the Board of Directors

ldentifier	Return Reference	Explanation							
Form 990, Part VI, Section B, line 12c		The college requires sign off of the conflict of interest policy. This is how compliance is monitored							

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section B, line 15		The president's salary is determined by the Board using comparability data, such as 990's of other organizations. The Board regularly evaluates the President's performance

ldentifier	Return Reference	Explanation						
Form 990, Part VI, Section C, line 19		Governing documents, conflict of interest policies and the financial statements of the college are available through public wiebsites and upon request						

ldentifier	Return Reference	Explanation
Form 990, Part XI, Line 2c		The board of directors is responsible for oversight of the audit. This process has not changed from the prior year.

Software ID: Software Version:

EIN: 04-2104300

Name: HEBREW COLLEGE

Form 990, Part VII - Section Aaa

Form 990, Part VII - Section Aaa										
	(B) Average hours per week	(C) Position (check all that apply)							(E)	(F)
(A) Name and Title		Individual Trustee or Director	Institutional Trustee	Officei	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
Susan Aın , Secretary	1 00	Х		Х				0	0	0
David Begelfer , TRUSTEE	1 00	Х						0	0	0
jack A eiferman , TRUSTEE	1 00	Х						0	0	0
ronald feinstein , TRUSTEE	1 00	Х						0	0	0
harold kotler , TRUSTEE	1 00	Х						0	0	0
GEORGE KRUPP , TRUSTEE	1 00	Х						0	0	0
BETH MOSKOWITZ, TRUSTEE	1 00	Х						0	0	0
HOWARD RUBIN , Treasurer	1 00	Х		Х				0	0	0
JAMES SOKOLOVE , TRUSTEE	1 00	Х						0	0	0
MICKEY CAIL , TrustEE	1 00	Х						0	0	0
THEODORE TEPLOW , TrustEE	1 00	Х						0	0	0
mark Atkıns , chaır	1 00	Х		Х				0	0	0
Mark Goldweitz , trusteE	1 00	Х						0	0	0
Barbara Karas , TrustEE	1 00	Х						0	0	0
Alfred Moses , Trustee	1 00	Х						0	0	0
Jason Weiner , TrustEE	1 00	Х						0	0	0
Danıel Lehmann , President	40 00			Х				150,225	0	54,927
Michael Gilbert , Vice President of Develo	40 00					Х		167,018	0	11,047
Gregory A Corsico , Director of Development	40 00					Х		146,250	0	1,478
Barry Mesch , Provost	40 00					Х		144,713	0	5,047
Richard Feczko , Chief Operating Officer	40 00					Х		139,058	0	2,726
moshe margolin , regional director - NY o	40 00					х		135,428	0	15,119
David Gordis , President Emeritus	40 00						Х	149,110	0	7,560

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

Hebrew College promotes excellence in Jewish learning and leadership within a pluralistic environment of open inquiry, intellectual rigor, personal engagement and spiritual creativity. The college empowers and inspires individuals to contribute their voices and vision to the Jewish community and to bring Jewish values to bear on the critical issues of our time. The college is dedicated to building bridges between the academy and the community, and offers diverse educational and cultural programs for youths, adults and Jewish professionals.