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Form

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

Open to Public

_						11.0poption
<u>A_</u>	For the 200	8 calendar y	ear, or tax year beginning $7/01/08$, and ending $6/30/0$	9		
<u>B</u>	Check if applica		C Name of organization		D Emplo	yer identification number
	Address change	use IRS	GILLETTE COLLEGE FOUNDATION	ľ		
百	Nome shares	label or print or	Doing Business As		83-	0284135
님	Name change	type.	Number and street (or P O box if mail is not delivered to street address)	Room/suite		one number
Ш	Initial return	See	300 WEST SINCLAIR	1 tooms outle	•	-686-0254
\Box	Termination	Specific				
Ħ		Instruc-	City or town, state or country, and ZIP + 4	ŀ	G Gross rece	npts\$ 1,121,463
닏	Amended return	tions.	GILLETTE WY 82718			
Ш	Application pen	unia i	e and address of principal officer		H(a) Is this	a group return for
			EG BLIKRE, PRESIDENT		affiliate	
		"S	AME AS C ABOVE"		H(b) Are all include	
					If "No,"	attach a list (see instructions)
$\overline{}$	Tax-exempt	status X	501(c) (3) ◄ (insert no) 4947(a)(1) or 527			
J	Website:				H(c) Group	exemption number
	Type of organiz	12-1	poration Trust Association Other L	Year of formation 1		M State of legal domicile WY
	art I		· · · · · · · · · · · · · · · · · · ·	rear or formation ===	<u>, , , , , , , , , , , , , , , , , , , </u>	W State of legal doffliche W E
		Summa			-	
	i	-	he organization's mission or most significant activities			_
e	E		THE OFFERINGS AND OPERATIONS OF THE GILLETTE C	=		
ğ	F	UNDING	FOR SPECIFIC PROJECTS THAT SUPPORT THE GILLETT	E CAMPUS,	INCLUI	DING
Activities & Governance	s	TUDENT	AID, EQUIPMENT AND FACILITIES			
ð	2 Che	ck this box	If the organization discontinued its operations or disposed of more than	25% of its asset	s	
O .	3 Num		members of the governing body (Part VI, line 1a)		3	15
ŝ	4 Num		endent voting members of the governing body (Part VI, line 1b)		4	15
誤	5 Tota				5	0
÷	5 Tota		employees (Part V, line 2a)		6	0
ĕ			volunteers (estimate if necessary)			
	1	-	lated business revenue from Part VIII, line 12, column (C)		7a	
	b Net	unrelated bu	siness taxable income from Form 990-T, line 34	D-lay Van	7b	Current Year
				Prior Yea	7,407	922,086
e	8 Conf		d grants (Part VIII, line 1h)	107	, 407	<u> </u>
en i	9 Prog	gram service	revenue (Part VIII, line 2g)	0.5	- 645	2 006
Revenue	10 Inve	stment inco	me (Part VIII, column (A), lines 3, 4, and 7d)		647	3,896
Jœ	11 Othe	er revenue (l	Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		739	21,640
	12 Tota	I revenue-	add lines 8 through 11 (must equal Part VIII, column (A), line 12)	243	3,793	947,622
			ar amounts paid (Part X, column A), lines 1,3)	74	1,346	110,965
			or for members (Part IX, column (A), line 4)			
		ries other o	ompensation, temployep penefits (Part 17, column (A), lines 5–10)			
Ses	15 Oala					
enses	16a Proi	essionai iun	draising fees (Part IX, column (A), line 11e) (↑) expenses (Part IX, column (D), line 25) 120, 290	-		
Exp	blota	il tundraising	expenses (Part IX, column (D), line 25) 120, 290 (Part IX, column (A) lines tailed 4 (24)		405	152 546
ш					485	153,546
	18 Tota	I expenses	Add lines 13-17 (must equal Part IX, column (A), line 25)		831	264,511
_	19 Rev	enue less ex	penses Subtract line 18 from line 12		2,962	683,111
Net Assets or	8			Beginning of		End of Year
Set	20 Tota	ıl assets (Pa	rt X, line 16)	1,148		1,931,143
Ϋ́	21 Tota	il liabilities (f	Part X, line 26)		1,114	130,925
ž	22 Net	assets or fu	nd balances Subtract line 21 from line 20	1,117	7,107	1,800,218
	Part II	Signatu	re Block			
			ties of penjury, I declate that I have examined this return, including accompanying schedules	and statements, a	nd to the be	st of my knowledge
		and belief, i	is true, correct, and complete Declaration of preparer (other than officer) is based on all inf	ormation of which p	reparer has	any knowledge
Sig	an l		h / h / has /		13E	6/10
	ere	Summation 1			Doto!	/
ne	16	Signati	AN P. NEAL VICE PRESIDENT		Pate	
		<u> </u>		 		<u> </u>
_		▼ Type o	print name and title	71		Preparer's identifying number
D-	است	Preparer's	Date	Check I self-	ſ _	(see instructions)
Pa	_ [signature	The word 1/25	employe	ed 🕨 🗀	P00880940
	eparer's	-	Crowell & Sylte, LLC	//	EIN	▶ 83-0327079
Us	se Only	Firm's name if self-emple	Coryours TEAC		Phone	
		address, an	77			307-682-3510
<u></u>	u the IDS d				1 110	Yes No
IVIA	A For Drive	ISCUSS (NIS F	Paperwork Reduction Act Notice, see the separate instructions.	<u> </u>		Form 990 (2008)
UA	A FOR PRIV	acy Act and	raperwork neuronitationalite, see the separate instructions.	7		FUIII 330 (2000)
			$\mathcal{O}^{\cdot,\gamma}$.			

(Expenses \$ including grants of \$) (Revenue \$ 4e Total program service expenses ► \$ 110, 965 (Must equal Part IX, Line 25, column (B).) Form 990 (2008)

4d Other program services (Describe in Schedule O)

Form 990 (2008) GILLETTE COLLEGE FOUNDATION 83-0284135 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,"		111	
	complete Schedule A	1	х	
2	is the organization required to complete Schedule B, Schedule of Contributors?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
	candidates for public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete			
	Schedule C, Part II	4		X
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e)	Ì		
	notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any accounts where donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete			
	Schedule D, Part I	6		_X_
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		<u> X</u>
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	complete Schedule D, Part III	8		<u> </u>
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part	ļ	ļ	
	X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes,"			
	complete Schedule D, Part IV	9_	Х	
10	Did the organization hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	_X_	
11	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If "Yes," complete Schedule D,			
	Parts VI, VII, VIII, IX, or X as applicable	11	Х	
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	Х	37
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a		14a		<u> </u>
þ				x
	business, and program service activities outside the U.S.? If "Yes," complete Schedule F, Part I	14b		
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any	45		x
	organization or entity located outside the United States? If "Yes," complete Schedule F, Part II	15		
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance	16		X
	to individuals located outside the United States? If "Yes," complete Schedule F, Part III	17		$\frac{x}{x}$
17	Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part II	18	x	
18	Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	19		X
19	Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	20		X
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H Did the organization report more than \$5,000 on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
21 22	Did the organization report more than \$5,000 on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	X	
23	Did the organization report more than \$5,000 on Fart IX, column (X), line 2 ft Fes, "complete consocio", Farto Fart IX, Column (X), line 2 ft Fes, "complete			
	Schedule J	23		x
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
74	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer questions			
	24b–24d and complete Schedule K. If "No," go to question 25	24a		X
b		24b		
c	The state of the s			
-	to defease any tax-exempt bonds?	24c		
d	The state of the s	24d		
25a	The second secon			
	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		_X
b	The state of the s			
	person from a prior year? If "Yes," complete Schedule L, Part I	25b		X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or			
	disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		<u> </u>
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		<u> </u>
		Form	990	(2008)

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		X
b	Have a family member who had a direct or indirect business relationship with the organization? If "Yes,"	i		
	complete Schedule L, Part IV	28b		X
С	Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a			
	professional corporation) doing business with the organization? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	X	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
	Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32_		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301 7701-2 and 301 7701-32 If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II,			
	III, IV, and V, line 1	34		X
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete		_	
	Schedule R, Part V, line 2	35		X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related			
	organization? If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part			
	VI	37		Х

Form **990** (2008)

	990 (2008) GILLETTE COLLEGE FOUNDATION 83-0284	133	<u></u>			Page 5
<u> </u>	irt V Statements Regarding Other IRS Filings and Tax Compliance				T	
4.	Enter the number reported in Day 2 of Form 1000. Assure Summary and Transmitted of		1	_	Yes	No
ıa	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	0			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	1b	0			
C		ىتنى	_			
·	gaming (gambling) winnings to prize winners?	portabl		1c	1	x
22	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	1 1		10	 	 ^
Za	Statements, filed for the calendar year ending with or within the year covered by this return	2a	0			
ь	If at least one is reported on line 2a, did the organization file all required federal employment tax retuin			2b	1	İ
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see				 	<u> </u>
	instructions)					
3a		d by				
Ja	this return?	u by		3a	1	x
ь	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O			3b	╁	├ <u></u> -
	At any time during the calendar year, did the organization have an interest in, or a signature or other	authori	tv	35	1	╁
74	over, a financial account in a foreign country (such as a bank account, securities account, or other fin		Ly			İ
	account)?	anciai		4a		x
h	If "Yes," enter the name of the foreign country					
b	See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign	Rank		i i		
	and Financial Accounts	Dank				
50	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a	1	x
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction at any time during the tax year.	tion?		5b	1	X
	If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity			1 35	 	<u> </u>
·	Regarding Prohibited Tax Shelter Transaction?			5c		1
62	Did the organization solicit any contributions that were not tax deductible?			6a		x
	If "Yes," did the organization include with every solicitation an express statement that such contribution	ons or		100	 	
b	gifts were not tax deductible?			6b		
7	Organizations that may receive deductible contributions under section 170(c).				1	\vdash
a	Did the organization provide goods or services in exchange for any quid pro quo contribution of more	than				
a	\$75?			7a	1	x
h	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b		<u> </u>
c		as		1.4		
·	required to file Form 8282?			7c		x
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d				
-	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a p		<u> </u>			
·	benefit contract?			7e	1	x
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contr	act?		7f	1	Х
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?			7g		х
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-0			<u> </u>	1	
	required?			7h	1	x
8	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and sec	tion				
	509(a)(3) supporting organizations. Did the supporting organization, or a fund maintained by a spor	soring				
	organization, have excess business holdings at any time during the year?	ŭ		8		X
9	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.					
а	Did the organization make any taxable distributions under section 4966?			9a		X
b	Did the organization make a distribution to a donor, donor advisor, or related person?			9b		Х
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					
а	Gross income from members or shareholders	11a				
b	Gross income from other sources (Do not net amounts due or paid to other sources against					
	amounts due or received from them)	11b				1
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	1041?		12a		<u> </u>
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b			1	<u> </u>

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

	to the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of th				T.,	
	*For each "You" regresses to lines 2. Thibeless, and for a "No" recognite to lines 2 or 0h below describe	tha			Yes	No
	For each "Yes" response to lines 2–7b below, and for a "No" response to lines 8 or 9b below, describe circumstances, processes, or changes in Schedule O. See instructions	i trie				
1a	Enter the number of voting members of the governing body	1a	15			
b	Enter the number of voting members of the governing body	1b	15			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship					
-	any other officer, director, trustee, or key employee?	WILLI		2	1	x
3	Did the organization delegate control over management duties customarily performed by or under the	direct		<u> </u>	\vdash	
•	supervision of officers, directors or trustees, or key employees to a management company or other pe			3		x
4	Did the organization make any significant changes to its organizational documents since the prior Fori		was filed?	4		X
5	Did the organization become aware during the year of a material diversion of the organization's assets		was mou	5		X
6	Does the organization have members or stockholders?	, -		6	\Box	X
7a	Does the organization have members, stockholders, or other persons who may elect one or more mer	nhers		<u> </u>		
	of the governing body?			7a		x
b	Are any decisions of the governing body subject to approval by members, stockholders, or other person	ns?		7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken di			<u> </u>		
_	the year by the following	9				
а	The governing body?			8a	x	1
b	Each committee with authority to act on behalf of the governing body?			8b	X	
9a	Does the organization have local chapters, branches, or affiliates?			9a		×
b	If "Yes," does the organization have written policies and procedures governing the activities of such ch	apters	.			
_	affiliates, and branches to ensure their operations are consistent with those of the organization?		•	96	; J	
10	Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organization	anızatı	ons			
	must describe in Schedule O the process, if any, the organization uses to review the Form 990			10		X
11	Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be re	ached	at			
	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O			11		X
Sec	tion B. Policies					
					Yes	No
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13			12a		X
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could	d give				
	rise to conflicts?	_		12b		
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Y	es,"				
	describe in Schedule O how this is done			12c		
13	Does the organization have a written whistleblower policy?			13		X
14	Does the organization have a written document retention and destruction policy?			14		X
15	Did the process for determining compensation of the following persons include a review and approval	by				
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and	decis	ion			
а	The organization's CEO, Executive Director, or top management official?			15a		<u> </u>
b	Other officers or key employees of the organization?			15b		<u>X</u>
	Describe the process in Schedule O (see instructions)					
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangem	ent				
	with a taxable entity during the year?			16a	<u> </u>	X
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate	ate				
	its participation in joint venture arrangements under applicable federal tax law, and taken steps to safe	guard				
	the organization's exempt status with respect to such arrangements?			16b		
Sec	tion C. Disclosure					
17	List the states with which a copy of this Form 990 is required to be filed None					
18	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 X Upon request					
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, co	nflict o	f interest			
	policy, and financial statements available to the public					
20	State the name, physical address, and telephone number of the person who possesses the books and	record	ds of the			
	organization: ► VIDA WILKINSON 300 W SINCLA					
G:	ULETTE W	Y 8	2718	307-68		
				E	nee .	(2000)

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

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

- 1a Complete this table for all persons required to be listed. Use Schedule J-2 if additional space is needed
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and current key employees. Enter -0- in columns (D), (E), and (F) if no compensation was paid
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons

(A)	(B)			(0	2)			trustee, or key employee (D)	(E)	(F)
Name and Title	Average hours per week	o or director		Officer		Highest compensated employee	E Former	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations
GREGG BLIKRE										
PRESIDENT	1	X		X	<u> </u>			0	0	0
MATT BURGESS										
CHAIR-BOOST	1	X				Ш		0	0	0
GREG SCHAEFE	R	İ								
DIRECTOR	1	X	<u> </u>		<u>L</u> .			0	0	0
NATHAN LOPEZ										
DIRECTOR	1	<u> </u>	<u> </u>		$ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ld}}}}}}$	\sqcup		0	0	0
DAN NEAL						i l		_		
TREASURER	1	X	<u> </u>	X	L	Ш		0	0	0
CYNTHIA SAUN										•
DIRECTOR	1	X			_			0	0	0
NICK KASPERI					l	1				•
VICE PRES	1	X	ļ	Х	<u> </u>	\sqcup		0	0	0
DEBBIE MCLEI								ام	o	0
SECRETARY	1	X	├	X		┢┈┤		0		
MARILYN MACK		٠,							o	0
DIRECTOR	1	<u> </u>	-			├─┤		0		
LELAND HOVE	4	x						ol	o	0
DIRECTOR GEORGE EMMON	1	 ^	╁	\vdash		╁─┤		- 0		
EMERITUS	1	x						o	o	0
CASEY PAINTE		┿	\vdash	\vdash	-	-	-	0		
DIRECTOR	1	$ \mathbf{x} $						ol	ol	0
PEG SMITH		+*	├─	_	-					<u>-</u> <u>-</u>
DIRECTOR	1	x						ol	o	0
GREG DOUGHER		-	╁┈		-	H				
DIRECTOR	1	x						ol	ol	0
CLIFF KIRK		<u></u>	t			П				
DIRECTOR	1	x						ol	o	0
VIDA WILKINS		1								<u> </u>
EXE DIRECTOR	40			x				o	0	0
					1	1				

Pa	rt VII Section A	. Officers, Directors, Tru	stees	s, Ke	y Er	nplo	yees	s, an	d Highest Compensated	Employees (continued)						
	(A)	(B)	Pos	tion ((checl	C)	hat a	nahu)	(D)	(E)		(F) Estima				
	Name and title	Average hours per week	or director	_	Officer	Key employee	Highest compensated employee		Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	cor or a	amount of other compensation from the organization and related organizations				
			_	ļ —	_						ļ 					
			_					_								
			_		ļ			-				<u> </u>				
			<u> </u>			<u> </u>										
			<u> </u>		_						ļ					
		-	<u> </u>	_			_				 -					
			<u></u>													
1b 2	Total Total number of ind	ividuals (including those in	1a)	who	rece	ived	mor	<u>►</u> e tha	an \$100,000 in reportable o	compensation from the	<u></u>					
	organization ▶ 0												Yes	No		
3	Did the organization	n list any former officer, dii	recto	rort	truste	ee, k	ey e	mplo	oyee, or highest compensa	ted	Γ		res			
4	employee on line 1a	a? If "Yes," complete Sche	dule	J for	rsuc	h inc	dividu	ıal	n and other compensation		F	3		X		
·	the organization and	d related organizations gre	ater	than	\$15	0,00	0? If	"Ye	s," complete Schedule J fo	r such	ŀ	4		x		
5	Did any person liste								y unrelated organization fo	or				х		
Sec	services rendered to tion B. Independent:	o the organization? If "Yes	<u>," coı</u>	mple	te S	chec	lule .	J for	such person			5				
1		for your five highest comp	ensa	ated	ınde	pend	lent (conti	ractors that received more							
		(A) Name and business address							Descrip	(B) otion of services			(C) mpensa	tton		
					_											
2	Total number of ind compensation from		udıng	g tho	se ir	1) \	who	rece	ived more than \$100,000 in	1 		0				
												Ear-	<u>, 990</u>	/200:		

	(2008) GILLETTE		GE FOUNDAT	LON	83-0284135		Page 9
art V	III Statement of Re	venue			<u></u>	······································	
	•			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
일 1a	Federated campaigns	1a			i i		
g b	Membership dues	1b					
E c	Fundraising events	1c					
<u>a</u>	Related organizations	1d					
Ē e	Government grants (contributions)	1e	50,000				
(O)	All other contributions, gifts, grants, and similar amounts not included above	e 1f	872,086				
9	Noncash contributions included in lines						
티	Total. Add lines 1a-1f		•	922,086			
	Total. Add lilled Tu 11	-	Busn. Code			 	
2a							
ь							
2a b c d e f							
					- "	W. V**	
e e							
5 f	All other program service re	WANIA					· · · · · · · · · · · · · · · · · · ·
2 '	Total. Add lines 2a–2f	venue					
3		na dividen	te interest and				† · · · · · · · · · · · · · · · · · · ·
"	other similar amounts)	ig divident	is, interest, and	19,024			19,024
	Income from investment of	tav avama	t hand proceeds				
5	Royalties	tax-exemp	bolia proceeds	1	-		
•	(i) Rei	al [(ii) Personal				
6-		=	(ii) i ersoriai				
	Gross Rents						
	Less rental exps	+					
	Rental inc or (loss)				{		
	Net rental income or (loss) Gross amount from (i) Securi	ntion T	(II) Other				
	sales of assets	7,972	1,932	ł			
1.		1,912	1,932	{			
b	Less cost or other	E 033					
	·	5,032	1,932				
	, ,	7,060	1,932	-15,128	-17,060		1,932
	Net gain or (loss)	Г		-13,120	-17,000		
	Gross income from fundraising	events					
[(not including \$,					
	of contributions reported on line		E1 770				
D C	See Part IV, line 18	a	51,779				`
<u> </u>	Less direct expenses	, P[38,809	12 070			12,970
- 1	Net income or (loss) from fi		events	12,970			12,31
9a	Gross income from gaming activ				İ		
	See Part IV, line 19	a					
	Less direct expenses	ρĹ					
	Net income or (loss) from g		vities				-
10a	Gross sales of inventory, le						
1	returns and allowances	a	- · · ·				
- 1	Less cost of goods sold	p					
<u>c</u>	Net income or (loss) from s						-
-	Miscellaneous Reve		Busn. Code		0 600		
11a	Administration Fee	3		8,670	8,670		
b			<u> </u>	<u> </u>			
C							
d	All other revenue		Ĺ	<u> </u>			
e	Total. Add lines 11a-11d		>	8,670			
12	Total Revenue. Add lines 1	lh, 2g, 3, 4	, 5, 6d, 7d, 8c,				
	9c, 10c, and 11e		•	947,622	-8,390		33,926

Form 990 (2008)

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

	All other organizations must of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of	· · · · · · · · · · · · · · · · · · ·			<u> </u>
	not include amounts reported on lines 6b, , 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			gonora	, , , , , , , , , , , , , , , , , , , ,
•	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	110,965	110,965		
3	Grants and other assistance to governments,		220/303		
J	organizations, and individuals outside the				
	U.S See Part IV, lines 15 and 16				
4	Benefits paid to or for members		-		
	Compensation of current officers, directors,				
5	•				
	trustees, and key employees			···	
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	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees)				
а	Management				
b	Legal				
С	Accounting	10,000		10,000	
d	Lobbying				
е	Professional fundraising services See Part IV, line 17				
f	Investment management fees				
g	Other				
12	Advertising and promotion	5,951		5,585	366
13	Office expenses	2,018		1,256	762
14	Information technology				
15	Royalties				_
16	Occupancy		-		
17	Travel	230		230	
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	1,839		1,839	
20	Interest	2,697		2,697	
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	754		754	
23	Insurance				······································
24	Other expenses Itemize expenses not				
-4	covered above (Expenses grouped together				
	and labeled miscellaneous may not exceed				
	5% of total expenses shown on line 25 below)				
а	PROFESSIONAL FEES	100,009			100,009
	PRINTING & REPRODUCTION	18,288		438	17,850
b	ADMINISTRATIVE FEE	4,941		4,941	
c d	BOARD EXPENSES	1,789		1,789	
e	DUES	1,404		1,404	
f		3,626		2,323	1,303
	Total functional expenses. Add lines 1 through 24f	264,511	110,965	33,256	120,290
25 26	Joint Costs. Check here If following	201/311		30,230	
40	SOP 98-2 Complete this line only if the				
	organization reported in column (B) joint costs				
	from a combined educational campaign and fundraising solicitation				

	art X	Balance Sheet							
					(A) Beginning of year		(B)		
_							End of		014
		Cash—non-interest bearing		-	14,668			35,	
		Savings and temporary cash investments		-	58,273	2		<u>17,</u>	5/2
	-	Pledges and grants receivable, net		-		3			
	1	Accounts receivable, net				4			
	5	Receivables from current and former officers, directors							
	_	employees, or other related parties Complete Part II o		F		5			
	6	Receivables from other disqualified persons (as define		i i					
	j	4958(f)(1)) and persons described in section 4958(c)(3	(B) Cor	nplete					
	l _	Part II of Schedule L		-	···	6			
şte		Notes and loans receivable, net		-		7			
Assets		Inventories for sale or use		-		8			
Ä	9	Prepaid expenses and deferred charges	1 1	110 511		9			
		Land, buildings, and equipment cost basis	10a	112,711					
	b	Less accumulated depreciation Complete	!!	554			4 -		0
		Part VI of Schedule D	10b	754	600 470	10c		11,	
	11	Investments—publicly traded securities		_	629,470	$\overline{}$	5.	19,	907
	12	Investments—other securities See Part IV, line 11		ļ	.4*	12			
	13	Investments—program-related See Part IV, line 1 i		}-		13			
	14	Intangible assets		-	445 010	14			700
	15	Other assets See Part IV, line 11		-	445,810	15		15,	
_	16	Total assets. Add lines 1 through 15 (must equal line	34)		1,148,221	16	1,9	<u> </u>	143
	2 3 4 5 6 7 8 9 10a b 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 29 30 31 32 33 34 Acc Well Well 1 As a the	Accounts payable and accrued expenses		-		17			
	18	Grants payable		_		18		-	
	19	Deferred revenue		-		19			
(0	20	Tax-exempt bond liabilities		_	21 114	20		20	721
<u>ë</u>	21	Escrow account liability Complete Part IV of Schedule		Ļ	31,114	21		28,	/ 3 1
Liabilities	22	Payables to current and former officers, directors, trus							
iat		employees, highest compensated employees, and disc	qualified						
		persons Complete Part II of Schedule L		-		22	1.0	02,	104
	i .	Secured mortgages and notes payable to unrelated the	ird parties	}		23		, 20	177
	1	Unsecured notes and loans payable		-	· · · · · · · · · · · · · · · · · · ·	24			
	i	Other liabilities Complete Part X of Schedule D		-	21 114	25	7 .	30,	925
	26	Total liabilities. Add lines 17 through 25	. .		31,114	26	Τ.	<u>, 0 , </u>	<u> </u>
nces	1	,	X and						
Ĕ		complete lines 27 through 29, and lines 33 and 34.			59,595			33,	727
Balaı	ı	Unrestricted net assets		-	647,321			34,	
8		Temporarily restricted net assets		-	410,191		1,1		
Fund	29	Permanently restricted net assets		n	410,191	29		<i>J L ₁</i>	102
丘		Organizations that do not follow SFAS 117, check h	ere ► _	_					
ō		and complete lines 30 through 34.		}		20			
Assets	1	Capital stock or trust principal, or current funds		-	V '	30			
386		Paid-in or capital surplus, or land, building, or equipme		, ,		31			
Ä		Retained earnings, endowment, accumulated income,	or other	runas	1,117,107	32	1,8	<u> </u>	218
Net		Total net assets or fund balances		-	1,148,221	33	1,9		
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	*****	Total liabilities and net assets/fund balances			1,140,221	34	1,9	<u>, , , , , , , , , , , , , , , , , , , </u>	143
	ail /	Financial Statements and Reporting			·			Yes	No
1	Ac	counting method used to prepare the Form 990	Cash	Accrual Oth	ner			.,.,	
2		ere the organization's financial statements compiled or r					2a		X
-		ere the organization's financial statements audited by ar					2b	X	
		Yes" to lines 2a or 2b, does the organization have a cor			for oversight of				
		e audit, review, or compilation of its financial statements					2c_		X
3		a result of a federal award, was the organization require							1
	the	Single Audit Act and OMB Circular A-133?					3a		X
!	o If"	Yes," did the organization undergo the required audit or	audits?				3b_		Щ.

Part I

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

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

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

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

OMB No 1545-0047

2008

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

GILLETTE COLLEGE FOUNDATION

Employer identification number 83 - 0284135

he	orga	nization is not	a private foundation because	se it is (Please check only one	organizati	on)							
1	Ш	A church, cor	nvention of churches, or ass	ociation of churches described	ın section	170(b)(1)(A)(i).						
2	Ш	A school des	cribed in section 170(b)(1)(A)(ii). (Attach Schedule E)									
3		A hospital or	a cooperative hospital servi	ce organization described in se	ction 170(b)(1)(A)(i	iii). (Atta	ch Sche	dule H)			
4		A medical res	search organization operate	d in conjunction with a hospital	described	ın sectio	n 170(b)	(1)(A)(ii	i). Ente	r the hos	spital's name,		
	_	city, and state											
5	X	An organizati	on operated for the benefit	of a college or university owned	or operate	ed by a go	overnme	ntal unit	descri	bed in			
	_	section 170(b)(1)(A)(iv). (Complete Part	11)									
6	\Box	A federal, sta	ite, or local government or g	overnmental unit described in s	ection 17	0(b)(1)(A)(v).						
7	П			substantial part of its support fr				rom the	genera	l public			
	_	=	section 170(b)(1)(A)(vi). (C		•								
8				170(b)(1)(A)(vi). (Complete Part	11.)								
9	Н	•		1) more than 33 1/3 % of its sup		contribut	ions me	mbersh	n fees.	and gro	SS		
3	نا			npt functions—subject to certain									
				nd unrelated business taxable ii				, 110111 0	usiness	563			
	\Box		_	0, 1975 See section 509(a)(2)				(:		>			
10	Н			exclusively to test for public saf									
11	Ш			exclusively for the benefit of, to									
				ted organizations described in s						section			
		509(a)(3). Ch	_	the type of supporting organizat									
	_	а 📙 Туре		c Type III–Function			d		e III–Ot				
е	By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified												
		persons othe	r than foundation managers	and other than one or more pu	blicly supp	orted org	anızatıo	ns desc	ribed in	section			
			section 509(a)(2)										
f		If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting											
		organization,	check this box										
g		Since August	t 17, 2006, has the organiza	ition accepted any gift or contrib	ution from	any of th	ne						
-		following per	rsons?										
		(i) A persor	n who directly or indirectly c	ontrols, either alone or together	with perso	ns descr	ibed in (II)				Yes	No
				of the supported organization?							11g(i)		
			member of a person descri								11g(ii)		
			•	described in (i) or (ii) above?							11g(iii)		
h				the organizations the organization	on support	ts							
			<u> </u>				63.54		6.01	- 41-	(vii) A m	unt of	
(1)		e of supported	(ii) EIN	(iii) Type of organization (described on lines 1–9	1 ' '	organization sted in your		rou notify แzation in	organizat	s the	(viı) Amo supp		
	org	janization		above or IRC section	1 ''	document?		of your		zed in the			
				(see instructions))			sup	port?	U	S?			
					Yes	No	Yes	No	Yes	No			
					-								
					<u> </u>				<u> </u>				
								ŀ					
				1									
					1				<u> </u>	$\vdash \vdash$			
												-	
Tota	ıl												
	·		<u> </u>	···········		·····	*	•	***************************************	•			

Schedule A (Form 990 or 990-EZ) 2008 GILLETTE COLLEGE FOUNDATION 83-0284135 Page 2 Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I) Section A. Public Support Calendar year (or fiscal year beginning in) ▶ (e) 2008 (a) 2004 (b) 2005 (c) 2006 (d) 2007 (f) Total Gifts, grants, contributions, and membership fees received (Do not 189,427 101,963 111,061 924,146 1,518,126 include any "unusual grants") 191,529 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge 189,427 101,963 924,146 1,518,126 191,529 111,061 4 Total. Add lines 1-3 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount 709,668 shown on line 11, column (f) Public support. Subtract line 5 from line 4 808,458 Section B. Total Support (e) 2008 (f) Total Calendar year (or fiscal year beginning in) (d) 2007 (a) 2004 (b) 2005 (c) 2006111,061 189,427 101,963 924,146 1,518,126 191,529 Amounts from line 4

8	payments received on securities loans, rents, royalties and income from similar sources	16,663	3,698	21,596	33,497	19,024	94,478
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)			5,076	8,578	6,610	20,264
11	Total support. Add lines 7 through 10						1,632,868
12	Gross receipts from related activities, etc	(see instructions)		-		12	166,240
12	Gross receipts from related activities, etc	(see ilistructions)				<u> </u>	

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

	0.000 /000/pts //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //out //o		
13	First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3)		. \square
	organization, check this box and stop here		<u> </u>
Sec	tion C. Computation of Public Support Percentage		
14	Public support percentage for 2008 (line 6, column (f) divided by line 11, column (f))	14	49.5115 %
15	Public support percentage from 2007 Schedule A, Part IV-A, line 26f	15	70.1202 %

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

- 33 1/3 % support test—2007. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3 % or more, check this box and stop here. The organization qualifies as a publicly supported organization
- 10%-facts-and-circumstances test—2008. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization
- 10%-facts-and-circumstances test—2007. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

•	

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

Schedule A (Form 990 or 990-EZ) 2008

DAA

Schedule A (Form 990 or 990-EZ) 2008

Dago	3

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

Sec	tion A. Public Support						
Cal	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	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1-5					ļ	
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the total of lines 9, 10c, 11, and 12 for the year or \$5,000						
	Add lines 7a and 7b						
8	Public support (Subtract line 7c from line 6)		-				
	tion B. Total Support					T	
Ca	lendar year (or fiscal year beginning in) ▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
9	Amounts from line 6		-			 	···
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						<u></u>
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
C	Add lines 10a and 10b				<u></u>		
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on		,-				
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
13	Total support. (Add lines 9, 10c, 11,						
	and 12)						
14	First five years. If the Form 990 is for the organization, check this box and stop here	_	, second, third, fo	urth, or fifth tax ye	ar as a section 50	1(c)(3)	▶ [
Sec	tion C. Computation of Public Su		tage				
15	Public support percentage for 2008 (line 8,	column (f) divided	by line 13, colun	nn (f))		15	%
16	Public support percentage from 2007 Sche	dule A, Part IV-A,	line 27g			16	%
Sec	tion D. Computation of Investme	nt Income Per	centage				
17	Investment income percentage for 2008 (li			3, column (f))		17	%
18	Investment income percentage from 2007	Schedule A, Part I	IV-A, line 27h			18	%
19a	33 1/3 % support tests—2008. If the orga						
	17 is not more than 33 1/3 %, check this b						▶ ∟
b	33 1/3 % support tests—2007. If the organ						, _
	line 18 is not more than 33 1/3 %, check the						▶ }
20	Private foundation. If the organization did	not check a box of	n line 14, 19a or	19b, check this box	cand see instructi	ons	🗩 📙

Schedule A (Form 990 or 990-EZ) 2008 GILLETTE COLLEGE FOUNDATION

83-0284135

Page 4

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

Part II, Line 10 - Other Income Detail

ADMINISTRATIVE FEES

\$ 20,264

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

OMB No 1545-0047

Inspection

tame	me of the organization			Employer identification number							
G							83-0284135				
	organizations Maintaining Donor Advised Furthe organization answered "Yes" to Form 990, F	nds o	or (Other Similar Funds or A	\cco	unt	s. Co	mple	te if		
	the organization answered Tes to Form 550, i	<u> </u>	•,	(a) Donor advised funds		(b)	Funds a	and othe	r acco	unts	
4	Total number at end of year			(a) Beller davised falles			-				
1	ř										
2	Aggregate contributions to (during year)					-					
3	Aggregate grants from (during year)	 -									
4	Aggregate value at end of year			to bold in donor advisord							
5	Did the organization inform all donors and donor advisors in writing that						Г	٦ ٧	_	П	
_	funds are the organization's property, subject to the organization's excli		_				L	Yes	•	∐ No	
6	Did the organization inform all grantees, donors, and donor advisors in	_		•							
	used only for charitable purposes and not for the benefit of the donor of	r dono	r ac	visor or other			Г	٦.,		\Box	
_	impermissible private benefit?		•		0/			Yes		No	
Pa	conservation Easements. Complete if the organization				<u>n 98</u>	3 0, 1	Zan i	√, iine	<u> </u>		
1	Purpose(s) of conservation easements held by the organization (check	all the									
	Preservation of land for public use (e.g., recreation or pleasure)	<u> </u>	1	reservation of an historically imp			nd area				
	Protection of natural habitat	L	J P	reservation of certified historic s	struct	ure					
	Preservation of open space										
2	Complete lines 2a-2d if the organization held a qualified conservation of	contrib	utic	n in the form of a conservation	ease	ment	•				
	on the last day of the tax year				-						
					L.		Held a	at the E	<u>∃nd o</u>	f the Year	
а	Total number of conservation easements				L	2a					
b	Total acreage restricted by conservation easements				Ļ	2b					
С	Number of conservation easements on a certified historic structure incl	uded 1	n (a)		2c					
d	Number of conservation easements included in (c) acquired after 8/17/	06			L	2d	L				
3	Number of conservation easements modified, transferred, released, ex	tınguıs	she	i, or terminated by the organizat	tion d	Juring	}				
	the taxable year										
4	Number of states where property subject to conservation easement is I	ocated	đ	>							
5	Does the organization have a written policy regarding the periodic mon	itoring	, ins	spection, violations, and			_	_			
	enforcement of the conservation easements it holds?						L	Yes	3	∐ No	
6	Staff or volunteer hours devoted to monitoring, inspecting, and enforcing	ng eas	em	ents during the year $lacktriangle$ $lacktriangle$ _ $lacktriangle$. <u></u> -	_			
7	Amount of expenses incurred in monitoring, inspecting, and enforcing e	easem	ent	s during the year $ black * _ _$				_			
8	Does each conservation easement reported on line 2(d) above satisfy t	the rec	quire	ements of section			_	_			
	170(h)(4)(B)(ı) and section 170(h)(4)(B)(ıı)?						L	Yes	è	∐ No	
9	In Part XIV, describe how the organization reports conservation easem	ents ir	n its	revenue and expense statemer	nt, an	ıd					
	balance sheet, and include, if applicable, the text of the footnote to the	organ	ızat	ion's financial statements that d	escri	bes					
	the organization's accounting for conservation easements										
Pa	Organizations Maintaining Collections of Art, Complete if the organization answered "Yes" to	History Fore	ori m (cal Treasures, or Other \$ 990. Part IV. line 8.	Simi	ilar .	Asset	is.			
	Complete it the organization anomored Tes to		•••	,,,					-		
_	If the organization elected, as permitted under SFAS 116, not to report		FA	anua statement and halance abo	oot w	orks	of				
ıa	art, historical treasures, or other similar assets held for public exhibition										
	provide, in Part XIV, the text of the footnote to its financial statements t				, pub.		77,00,				
	provide, in Part XIV, the text of the foothole to its imancial statements t	illat ue	:SCI	bes these items							
L	If the organization elected, as permitted under SFAS 116, to report in it	te revo	mu	s statement and halance sheet w	worke	s of a	rt				
D											
	historical treasures, or other similar assets held for public exhibition, ed	uudliC	/11, ¹	a research in futulerance of put	JIIC 31	J. VIU	٠,				
	provide the following amounts relating to these items						. e				
	(i) Revenues included in Form 990, Part VIII, line 1						. * –		- –		
_	(ii) Assets included in Form 990, Part X	41: -	_	ulan annaha fan firansaral marra sarr	al -	46.5	⊸ —		- –		
2	~				ovide	(n e					
	following amounts required to be reported under SFAS 116 relating to t	inese	iten	IS			•				
а	Revenues included in Form 990, Part VIII, line 1						* —		- –		
b	Assets included in Form 990, Part X						» —		- —		

Sche	dule D (Form 990) 2008 GILLETTE	COLLEGE FOUND	ATION_	<u>83-0:</u>	284135	Page 2
Pa	art III Organizations Maintaining	Collections of Art,	Historical Trea	sures, or Other	r Similar Asset	s (continued)
3	3 Using the organization's accession and other records, check any of the following that are a significant use of its collection items (check all that apply)					
а	Public exhibition	d Loan o	r exchange prograr	ns		
p,		e Other	ccgo program			
c	Preservation for future generations					
4	Provide a description of the organization's co	ollections and explain how t	hey further the orga	inization's exempt p	ourpose in	
5	During the year, did the organization solicit of assets to be sold to raise funds rather than to	or receive donations of art, h	nistorical treasures,	or other similar	٢	Yes No
Pa	art IV Trust, Escrow and Custoo	lial Arrangements C	omplete if orga	nization answe	red "Yes" to Fo	
1. 4	Part IV, line 9, or reported					,,,,,
12	Is the organization an agent, trustee, custod	±				
ıa	included on Form 990, Part X?	ian or other intermediary to	COMMIDATIONS OF OU	ner assets not	Γ	Yes X No
h	If "Yes," explain the arrangement in Part XIV	and complete the following	ı tahle		_	
U	in res, explain the arrangement in ratt XIV	and complete the following	, table			Amount
_	Beginning balance				1c	
	Additions during the year				1d	
	Distributions during the year			•	ie	
f	Ending balance				1f	
	Did the organization include an amount on F	form 990 Part Y line 212			\ <u>-</u>	Yes No
	If "Yes," explain the arrangement in Part XIV				=	<u> </u>
*********	ert V Endowment Funds. Comp	lete if organization a	nswered "Yes"	to Form 990. P	art IV. line 10.	
	Endownent Funds. Comp	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years ba	ck (e) Four years back
1a	Beginning of year balance	689,188				
b		46,701				
c		-86,886				
d		35,883				
-	Other expenditures for facilities					
·	and programs	141,817				
f	Administrative expenses					
g	End of year balance	471,303	·································			
2	Provide the estimated percentage of the year					
		5.00%				
b	. 04 00					
	Are there endowment funds not in the posse	ssion of the organization th	at are held and adn	ninistered for the		
-	organization by					Yes No
	(i) unrelated organizations					3a(i) X
	(ii) related organizations					3a(ii) X
b	If "Yes" to 3a(ii), are the related organization	s listed as required on Sch	edule R?			3b X
4	Describe in Part XIV the intended uses of the					
	art VI Investments—Land, Build			0, Part X, line	10.	
	Description of investment	(a) Cost or other basis	(b) Cost or ot		epreciation	(d) Book value
	·	(investment)	basis (other)		
	Land		102	,160		102,160
	Buildings					
	Leasehold improvements					
	Equipment		10	,551	754	9,797
	Other					
$\overline{}$	I. Add lines 1a-1e (Column (d) should equal	Form 990, Part X, column (B), line 10(c))		•	111,957

Total. (Column (b) should equal Form 990, Part X, col (B) line 25) In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48

 \blacktriangleright

SCHEDULE G (Form 990 or 990-EZ) Supplemental Information Regarding Fundraising or Gaming Activities

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.

OMB No 1545-0047 **2008**

Open To Public

Department of the Treasury Internal Revenue Service

Name of the organization

GILLETTE COLLEGE FOUNDATION

Employer identification number 83 - 0284135

Part I Fundraising Activities. Complete i	f the organizat	ion ansv	vered "Yes" to For	m 990, Part IV, li	ne 17.
1 Indicate whether the organization raised funds through	any of the following	activities	Check all that apply		
a Mail solicitations	e Solicitation	of non-go	vernment grants		
b Email solicitations	f Solicitation	of govern	ment grants		
c Phone solicitations	g Special fur	idraising e	vents		
d In-person solicitations					
2a Did the organization have a written or oral agreement w or key employees listed in Form 990, Part VII) or entity	vith any individual (in connection with	including o	officers, directors, truste nal fundraising services	ees ?	Yes No
b If "Yes," list the ten highest paid individuals or entities (to be compensated at least \$5,000 by the organization	fundraisers) pursua Form 990-EZ filers	ant to agre s are not r	ements under which the equired to complete the	e fundraiser is s table	
(i) Name of individual or entity (fundraiser)	(ii) Activity	(iii) Did fund raiser have custody or control of contributions	from activity	(v) Amount paid to (or retained by) fundraiser listed in col (i)	(vi) Amount paid to (or retained by) organization
		Yes No			
				· · · · · · · · · · · · · · · · · · ·	-
					_
			 		
			 		
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

		e G (Form 990 or 990-EZ)		OLLEGE FOUNDATION	83-02		
P	art i			anization answered "Yes" t			J
	,	more than \$15	(a) Event #1 GOLF TOURNAMENT	(b) Event #2 MURDER MYSTERY	(c) Other Events	(d) Total Events (Add col (a) through	
a			(event type)	(event type)	(total number)	col (c))	
Revenue	1 2	Gross receipts Less Charitable	29,295	11,960	7,436	48,69	<u>)1</u>
	3	contributions Gross revenue (line 1 minus line 2)	29,295	11,960	7,436	48,69	91
	4	Cash prizes					
enses	5	Non-cash prizes					
Direct Expenses	6	Rent/facility costs					
	7	Other direct expenses	23,484	10,110	2,096	35,69	<u>) 0</u>
	8	·	y Add lines 4 through 7 in column		>	35,69 13,00) 0 ₎
P	art l	Gaming. Com	ombine lines 3 and 8 in column (d) plete if the organization an	swered "Yes" to Form 990,	Part IV, line 19, or rep		<u>-</u>
_	ſ		on Form 990-EZ, line 6a.	r		r-··	
Revenue			(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (Add col (a) through col (c))
Re	1	Gross revenue					
·/n	2	Cash prizes					
Direct Expenses		·		-			
¥ Exp	3	Non-cash prizes		· · · · · · · · · · · · · · · · · · ·			
Direc	4	Rent/facility costs					
_	5	Other direct expenses	N 0/		Yes %		
	6	Volunteer labor	Yes %	Yes %	Yes %		
	7	Direct expense summar	y Add lines 2 through 5 in column	(d)	•		;
	8	Net gaming income sum	mary Combine lines 1 and 7 in co	olumn (d)			
						Yes N	10
9 a	ls 1	the organization licensed	ne organization operates gaming activities in each			9a	
b	If "	No," Explain					
10a		* =	n's gaming licenses revoked, suspe	ended or terminated during the tax	year?	10a	
b	If "	Yes," Explain					`
11	Do	es the organization opera	te gaming activities with nonmemb	pers?		11	
12		the organization a grantor med to administer charita	·	a member of a partnership or other	er entity	12	
					Schedule G (F	Form 990 or 990-EZ) 20	008

Sche	dule G (Form 990 or 990-EZ) 2008 GILLETTE COLLEGE FOUNDATION	83-028413	5_	Р	age 3
				Yes	No
13	Indicate the percentage of gaming activity operated in				
а	The organization's facility	13a%			
b	An outside facility	13b %]		
14	Provide the name and address of the person who prepares the organization's gaming/special events books				
	and records				
	Name ▶				
	Address ▶				
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?		15a		
b	If "Yes," enter the amount of gaming revenue received by the organization ▶ \$	and the	100		
U	amount of gaming revenue retained by the third party > \$				
С	If "Yes," enter name and address				
•					
	Name ▶				
	Address ▶		ĺ	ĺ	İ
16	Gaming manager information.				
	Name ▶				
	Gaming manager compensation ▶ \$				
	<u>.</u>			1	
	Description of services provided ▶				
	☐ Director/officer ☐ Employee ☐ Independent contractor				
17	Mandatory distributions				
'' a	Is the organization required under state law to make charitable distributions from the gaming proceeds to				
a	retain the state gaming license?		17a	1	
ь	Enter the amount of distributions required under state law distributed to other exempt organizations or spent				
-	in the organization's own exempt activities during the tax year ▶ \$			<u> </u>	<u> </u>

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(Form 990)

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

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

1545-0047	80
OMB No	20

Open to Public Inspection

٤			§.	🙀		'					
Inspection	٠		X Yes	ered "Yes" on e than \$5,000. Use ▶	(h) Purpose of grant or assistance					:	•
	Employer identification number 83 – 0284135		P	anization answ nt received mor	(g) Description of						
	Employer 83-02		s or assistance, an	plete if the org no one recipie	(f) Method of valuation (book, FMV, appraisal, other)						
990.			eligibility for the grants	ited States. Com Check this box if	(e) Amount of non-cash						
gaiiizatioii answered Tes, oii r ▼ Attach to Form 990.			istance, the grantees' in the United States	zations in the Un ore than \$5,000. eeded	(d) Amount of cash grant (e) Amount of non-cash						
gamzanor			ants or assi	l Organi: eived ma	(c) IRC (section						
	UNDATION	Assistance	e amount of the grace?	vernments and cipient that recificational spirits	(p) EIN						organizations
•	GILLETTE COLLEGE FOUNDATION	General Information on Grants and Assistance	Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States	Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Part IV and Schedule I-1 (Form 990) if additional space is needed	(a) Name and address of organization						Enter total number of section 501(c)(3) and government organizations
Department of the Treasury Internal Revenue Service	_	Part General In	1 Does the organization or the selection criteria us: 2 Describe in Part IV the	art II	1 (a) Name and ac						2 Enter total number of s

3 Enter total number of other organizations

ш.	t IV, line 22.
•	s in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.
	m 990, F
	" on For
	red "Yes
	n answe
	anization
34135	f the org
83-0284135	mplete ii
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7	nited Sta
DATION	in the U
FOUN	/iduals
COLLEGE	tance to Indiv
TE CO	sistance
GILLETTE COLLEGE FOUNI	d Other As
2008 G.	Grants and C
-orm 990)	Gran
chedule I (Forn	Part III
ഗ്	

Page 2

Use Schedule I-1 (Form 990) if additional space is	if additional space is	needed.	•		
(a) Type of grant or assistance	(b) Number of	(c) Amount of	(d) Amount of	(e) Method of valuation (book,	(e) Method of valuation (book, (f) Description of non-cash assistance
	recipients	cash grant	non-cash assistance	FMV, appraisal, other)	•
STUDENT SCHOLARSHIPS	30	35,883			
GILLETTE CAMPUS ATHLETICS		17,716			
DIESEL TECH EQPMNT & SUPP		11,153			
GILLETTE CAMPUS DEPTS		40,494			
GILLETTE CAMPUS SIGN		5,719			
Part IV Supplemental Information. Complete this part to provide the information required in Part I. line 2, and any other additional information.	complete this part to p	provide the information	on required in Part I.	line 2, and any other additi	onal information.

Part I, Line 2 - Procedures for Monitoring the Use of Grant Funds

DISBURSEMENTS MADE IN ACCORDANCE WITH DONOR RESTRICTIONS.

Schedule I (Form 990) 2008 *

SCHEDULE M (Form 990)

NonCash Contributions

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

► Attach to Form 990.

OMB No 1545-0047

Open To Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

GILLETTE COLLEGE FOUNDATION

Employer identification number 83 - 0284135

Pa	rt I Types of Property		·							
		(a)	(b)	(c)		Mariha	(d)			
		Check if applicable	Number of Contributions	Revenues reported on Form 990, Part VIII, line 1g			d of determining revenues			
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 9	Intellectual property				 					
10	Securities—Publicly traded Securities—Closely held stock				 					
11	Securities—Partnership, LLC,					-				
* '	or trust interests									
12	Securities—Miscellaneous									
13	Qualified conservation									
10	contribution (historic									
	structures)	1								
14	Qualified conservation									
	contribution (other)									
15	Real estate—Residential									
16	Real estate—Commercial	X	1							
17	Real estate—Other			-						
18	Collectibles									
19	Food inventory									
20	Drugs and medical supplies									
21	Taxidermy									
22	Historical artifacts									
23	Scientific specimens					_				
24	Archeological artifacts									
25	Other ▶ (RODEO EQPMNT)	X	1							
26	Other ▶(PIANO)	X	1							
27	Other ▶(TREADMILL)	Х	1		<u></u>					
28	Other ▶(MISC)	X	1							
29	Number of Forms 8283 received by	the organiz	zation during the tax yea	r for contributions for						
	which the organization completed Fe	orm 8283,	Part IV, Donee Acknowl	edgement	29	<u> </u>		<u>_</u>		
							_	4	Yes	No
30a										
	it must hold for at least three years t	from the da	ate of the initial contribut	on, and which is not requir	red to	be			1	
	used for exempt purposes for the er	ntire holding	g period?				30	<u>a</u>		Х
b	If "Yes," describe the arrangement in									
31	Does the organization have a gift ac	ceptance p	policy that requires the re	eview of any non-standard				-		
	contributions?						3	Ц.		X
32a	Does the organization hire or use th	ird parties	or related organizations	to solicit, process, or sell n	ол-са	sh				٠
	contributions?						32	:a		X
b	If "Yes," describe in Part II									
33	If the organization did not report rev	enues in co	olumn (c) for a type of pr	operty for which column (a	ı) ıs ch	iecked,				
	describe in Part II							丄		<u> </u>

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.

Part I, Line 33 - Explanation for Not Reporting Revenue
NONCASH CONTRIBUTIONS ARE NOT REPORTED ON A CASH BASIS OF FILING THE FORM
990. AUDITED FINANCIAL STATEMENTS REPORT \$700,000 AS THE VALUE OF THE LAND
CONTRIBUTED AND \$8,840 AS THE VALUE OF THE OTHER NONCASH CONTRIBUTIONS.

SCHEDULE O

Supplemental Information to Form 990

(Form 990)

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

OMB No 1545-0047

2008
Open to Public

inspection

Internal Revenue Service

Name of the organization

GILLETTE COLLEGE FOUNDATION

Employer identification number 83 - 0284135

Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation UPON REQUEST, ARRANGEMENTS ARE MADE

Schedule O - Additional Information

FORM 990, PART V, LINE 7g AND 7h: NO CONTRIBUTIONS OF ITEMS LISTED

FORM 990, PART VI, LINE 10: NO FORMAL REVIEW PROCESS

Form 4562

Department of the Treasury Internal Revenue Service

Depreciation and Amortization

(Including Information on Listed Property)

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

OMB No 1545-0172

Identifying number Name(s) shown on return GILLETTE COLLEGE FOUNDATION 83-0284135 Business or activity to which this form relates Indirect Depreciation **Election To Expense Certain Property Under Section 179** Part I Note: If you have any listed property, complete Part V before you complete Part I. 250,000 Maximum amount. See the instructions for a higher limit for certain businesses 2 2 Total cost of section 179 property placed in service (see instructions) 800,000 Threshold cost of section 179 property before reduction in limitation (see instructions) 3 3 4 Reduction in limitation Subtract line 3 from line 2 If zero or less, enter -0-Dollar limitation for tax year Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions 5 (c) Elected cost (a) Description of property (b) Cost (business use only) 6 7 7 Listed property Enter the amount from line 29 8 8 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7 9 9 Tentative deduction Enter the smaller of line 5 or line 8 10 10 Carryover of disallowed deduction from line 13 of your 2007 Form 4562 11 Business income limitation Enter the smaller of business income (not less than zero) or line 5 (see instructions) 11 12 12 Section 179 expense deduction Add lines 9 and 10, but do not enter more than line 11 13 Carryover of disallowed deduction to 2009 Add lines 9 and 10, less line 12 13 Note: Do not use Part II or Part III below for listed property. Instead, use Part V Special Depreciation Allowance and Other Depreciation (Do not include listed property.) (See instructions) 14 Special depreciation allowance for qualified property (other than listed property) placed in service 14 during the tax year (see instructions) 15 15 Property subject to section 168(f)(1) election 754 16 Other depreciation (including ACRS) MACRS Depreciation (Do not include listed property.) (See instructions.) 17 MACRS deductions for assets placed in service in tax years beginning before 2008 17 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here Section B—Assets Placed in Service During 2008 Tax Year Using the General Depreciation System (b) Month and (c) Basis for depreciation (d) Recovery (g) Depreciation deduction (e) Convention (f) Method (business/investment use (a) Classification of property year placed in period only-see instructions) service 19a 3-year property b 5-year property 7-year property C d 10-year property e 15-year property 20-year property S/L 25 yrs g 25-year property 27 <u>5 yrs</u> MM S/L Residential rental property MM S/L 27 5 yrs MM S/L Nonresidential real 39 yrs property MM S/L Section C—Assets Placed in Service During 2008 Tax Year Using the Alternative Depreciation System 20a Class life S/L 12 yrs S/L b 12-year ММ S/L 40-year 40 yrs Part IV Summary (See instructions.) 21 21 Listed property Enter amount from line 28 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21 754 Enter here and on the appropriate lines of your return Partnerships and S corporations—see instr For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs

Form 4562 (2008)

		tagage and Oth	or Notes Payable		···	
Forms 990 / 990-PF	ivior	tgages and Oth	er Notes Payable		1	2008
330 / 330-1 1	For calendar year 2008,	or tax year beginning	7/01/08 _, and ending	6/	30/09	2000
Name .					Employer Identi	fication Numbe
GILLETTE COLL	EGE FOUNDATION	1			83-02841	35
					<u> </u>	
Form 990, Par	t X, Line 23 -	- Additional	Information			
	Name of lender		Relationship	to disq	ualified person	
	E - FIRST NAT	CONAL BANK				
2)						
					·	
						
· C\						
7)			······································			
0)			 			
0/						
(10)						
			T			
Original amount borrowed	Date of loan	Maturity date	Repayment ter	rms		Interest rate
1) 102,19		12/31/09	LUMP SUM OF P&I		12/31/09	5.00
(2)						
3)						
4)						
5)						
6)						
7)						
(8)						
9)						
(10)		·			<u> </u>	
Se (1) PROPERTY	curity provided by borrower		Purchase PROPERT	ose of	loan	-
(2)	-		1 Olicinists 1 Hol Silva	•		·
(3)				· · · · · ·		
(4)						
(5)		-			***	
(6)	.,					
(7)						
[8]						
(9)						
(10)						
Consider	ration furnished by lender		Balance due at beginning of year			ce due at of year
Consider	auon lumished by lender		Deginning or year	-+		102.194

Consideration furnished by lender	Balance due at beginning of year	Balance due at end of year
(1)		102,194
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		100 104
Totals		102,194

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