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Form 990

Change of Accounting Period 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)

2009

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

| | For the | 2009 calend | lar year, o | r tax year beginn | ing 7/01 | , 20 | 009, and endin | g 8/ | 31 | , | 2009 |
|--------------------------------|---------------|--|--------------------------------|---|---|---|---------------------------------------|-------------------------------|--|---------------------------------------|---|
| | Check if a | | | C | | | | | D Employ | er identifi | ication Number |
| | $\overline{}$ | ess change | Please use IRS label | Yeshivas M | leor HaTorah | of Chicac | 10 | | 20~1 | 0510 |)51 |
| | \vdash | Name change or print or type. 3050 W Touhy Avenue E Telephone number | | | | | | | | | |
| | \vdash | | See | Chicago, I | | 773- | -465- | -0419 | | | |
| | \vdash | l return | specific Instruc- | | | | | | | | <u> </u> |
| | \vdash | nination | tions. | | | | | | | | 149,247. |
| | HI | nded return | F | L | · · · · · · · · · · · · · · · · · · · | hu Millon | | H(n) le thie | a group retur | | |
| | Appli | ication pending | 1 | and address of principa | alouncer EIIA | hu Millen | | | affiliates incl | | Yes No |
| | | | | As C Above | | 1404777 3713 | T 503 | | attach a list | | |
| <u> </u> | | xempt statu | | (c) (3) <u></u> ◄ | (insert no.) | 4947(a)(1) or | 527 | - | | _ | |
| <u>J</u> | Webs | | | | ····· | | I- | | exemption no | | |
| K | | f organization | X Corpora | ation Trust | Association Of | her ► | L Year of Forma | tion 200 | 4 Ms | tate of le | egal domicile IL |
| P | ert I | Summ | | | | | | | | | |
| | | | | | | | | | | th, | 10th and 11th |
| Co. | <u> </u> | <u>grade p</u> a | <u>rochia</u> | <u>l/religiou</u> | <u>s_school</u> _ | | | - | | | |
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| € 0 | | | | | n discontinued its | | isposed of mo | re man za | 0% OI ILS a | 3 | 5 |
| C, | | | | | s of the governing | | line 1b) | | | 4 | 3 |
| ڠِ⊲ | | | • | yees (Part V, lin | - | , 55dy (1 dit 11, 1 | | | | 5 | 31 |
| | | | | eers (estimate if | | | | | | 6 | 50 |
| O SCHUIT GENNADS | | | | | from Part VIII, co | olumn (C), line 1 | 2 | | | 7a | 0. |
| | b N | let unrelated | d business | taxable income | from Form 990-T, | line 34 | | | | 7b | 0. |
| ა | | | | | | | | 1 | Prior Year | | Current Year |
| UbUC Revenue | 8 C | Contributions | s and gran | ts (Part VIII, line | THE CELL OF | | | | 480,3 | 306. | 126,419. |
| ٦į | 9 P | Program ser | vice reven | ue (Part VIII, <u>I</u> in | を あ し 上 I ソ 上 | | | | 411,1 | | 11,768. |
| 9,6 | | | | | A), lines 3, 4, and | | | | 2 | 26. | 67. |
| Œ | 11 C | Other revenu | ie (Part V | III, columhα(Α), li | ngs 5, 6d,28c, 9c, | 10c, ard 11e) | • | | | | -16,747. |
| _ | 12 T | otal revenu | e – add li | nes 8 through 11 | (must equal Part | VIII column (A) |), line 12) | | 891,7 | 14. | 121,507. |
| | | | | | IX, column (A), lir | | | | | | |
| | 14 B | Benefits paid | to or for | members (Parti) | XJSDIVIET (A), (In | = [47) | | | | | · |
| ø | 15 S | Salaries, oth | er comper | nsation, employe | e benefits (Part I) | (, colunt n (A), lir | nes 5-10) | | 481,7 | 71. | 156,008. |
| 138 | 16a P | Professional | fundraisin | ng fees (Part IX, | column (A), line 1 | 1e) . | | | | | |
| Expenses | b T | otal fundra: | sına expei | nses (Part IX. co | lumn (D), line 25) | > | | | | \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ | |
| ũ | 17 C | | • | • | nes 11a-11d, 11f- | | | | 439,9 | 147 | 39,856. |
| | | | | | equal Part IX, col | | 1 | | 921,7 | | 195,864. |
| | 1 | | | s. Subtract line 1 | | umm (A), mic 23 | , | | -30,0 | | -74,357. |
| * S | | to vorido ios. | o cyberiae | 3. Subtract line | 0 110111 11116 12 | | | | | · · · · · · · · · · · · · · · · · · · | |
| Net Assets or Fund Balancos | 20 T | atal assets | (David V. I. | 16) | | | | Begi | inning of Y | | End of Year |
| \$ B | 20 T | otal assets otal liabilitie | • | • | | | | | 93,8 140,5 | | 2,088,570. 2,209,588. |
| ž | 20 1 | | ` ' | • | | ••• | | · | | | |
| | 22 N | | r fund bala | | ine 21 from line 20 |) | • | | -46,6 | 62. | -121,018. |
| | 58 S 48 | T | | | | | | | | | - |
| | | true, correct, | es of perjury, and complete | I declare that I have a Declaration of prepa | examined this return, in irer (other than officer) | cluding accompanyin is based on all inform | g schedules and sination of which pre | tatements, ar parer has an | nd to the best ly knowledge | of my kr | nowledge and belief, it is |
| Sig | nn | • | 4) | (Nh ~ | 71// | | | 1 | | | |
| He | re | Signature | of officer | y , , | / · · | | | | nto . | | |
| | ••• | | liyahu | Millen - | Principal | | | ≼¤ | า /เ | 4/ | 10 |
| | | | rint name an | | Trincipal | | | | ' / ' | 7/ | |
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| Pa | id | | - 1 | (>X | | | Date | | theck if self- | (se | eparer's identifying number ee instructions) |
| Pn | | Preparer's signature | | | CAA ? | | 1/12/1 | ာ မြိ | mployed | | |
| | rer's | <u> </u> | <u>- w</u> | were. | / 1/2 | | | | | N | <u>/A</u> |
| Üs | e | Firm's name (| | sler, Orle | | & Co. PC | | | | | |
| Or | ıly | employed), address, and | | | k Road, Sui | te C | | E | | /A | |
| | | ZP + 4 | | | 60015-5233 | | | P | hone no | (847 | 7) 580-4100 |
| Ma | y the IRS | S discuss th | is return v | with the preparer | shown above? (s | ee instructions) | <u></u> | | | | X Yes No |

| orm | 990 (2009) Yeshivas Meor HaTorah of Chicago | 20-1051051 Page 2 |
|----------|---|----------------------------------|
| Par | | |
| ***** | Briefly describe the organization's mission | |
| | Dieny describe the organizations incision | school |
| | To operate an 8th, 9th, 10th and 11th grade parochial/religious | |
| | | |
| | | |
| | | |
| 2 | Did the organization undertake any significant program services during the year which were not listed on the | e prior |
| | Form 990 or 990-EZ? | Yes X No |
| | If 'Yes,' describe these new services on Schedule O. | |
| 3 | Did the organization cease conducting, or make significant changes in how it conducts, any program service | es? Yes X No |
| 3 | If 'Yes,' describe these changes on Schedule O | |
| | Describe the exempt purpose achievements for each of the organization's three largest program services by | expenses Section 501(c)(3) |
| 4 | and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and a | illocations to others, the total |
| | expenses, and revenue, if any, for each program service reported. | |
| | | |
| | 474 400 | D 6 11 769 \ |
| 48 | a (Code:) (Expenses \$171,480. Including grants of \$) | (Revenue \$1, 700.) |
| | Provide schooling to 8th, 9th, 10th, and 11th grade students. | |
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| 4 | d Other program services (Describe in Schedule O.) | |
| | (Expenses \$ including grants of \$) (Revenue | \$ |
| 4 | e Total program service expenses ► 171, 480. | · |
| <u>_</u> | | |

Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III

Did the organization operate one or more hospitals? If 'Yes,' complete Schedule H.

column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I

lines 1c and 8a? If 'Yes,' complete Schedule G, Part II

Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,

Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII,

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X

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X

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Page 4 Checklist of Required Schedules (continued) Yes No Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II 21 Х Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If 'Yes,' complete Schedule I, Parts I and III X 22 Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? *If 'Yes,' complete* 23 X Schedule J 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, and that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No, 'go to line 25 Х 24a 24b b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease 24c any tax-exempt bonds? 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 X 25a b is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990 EZ? If 'Yes,' complete 25b Х Schedule L, Part I Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or X disqualified person outstanding as of the end of the organization's tax year? If 'Yes,' complete Schedule L, Part II 26 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection comittee member, or to a person related to such an individual? If 'Yes,' complete Schedule L, Part III X 27 Was the organization a party to a business transation with one of the following parties (see Schedule L, Part IV ź¥ instructions for applicable filing thresholds, conditions, and exceptions): a A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L. Part IV 28a X **b** A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L. Part IV 28b X c An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or direct or indirect owner? If 'Yes,' complete Schedule L, Part IV 28c X Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation 30 X contributions? If 'Yes,' complete Schedule M. X 31 Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I 31 32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II X 32 33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If 'Yes,' complete Schedule R, Part I 33 Х Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts II, III, IV, and V, 34 Х 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 Х 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 Х 36 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is 37 treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI X

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Form 990 (2009)

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Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?

Note. All Form 990 filers are required to complete Schedule O

20-1051051 Yeshivas Meor HaTorah of Chicago Page 5 Statements Regarding Other IRS Filings and Tax Compliance Yes No 1a Enter the number reported in Box 3 of form 1096, Annual Summary and Transmittal of U.S. n Information Returns. Enter -0- if not applicable 1a 0 1 b b Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable > c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the 31 calendar year ending with or within the year covered by this return X 2b 2b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions) Э; ...زم 3a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by Х this return? 3b b If 'Yes' has it filed a Form 990-T for this year? If 'No.' provide an explanation in Schedule O 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a X financial account in a foreign country (such as a bank account, securities account, or other financial account)? 4a **b** If 'Yes,' enter the name of the foreign country. See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and ×× Financial Accounts 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5 X 5b b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction? 5c 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization X solicit any contributions that were not tax deductible? 6а b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not 6ь deductible? Organizations that may receive deductible contributions under section 170(c).

| a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? | 7a | | 1 |
|---|----|--|---|
| b If 'Yes,' did the organization notify the donor of the value of the goods or services provided? | 7b | | Ī |
| c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file | 7. | | I |

d If 'Yes,' indicate the number of Forms 8282 filed during the year 7d e Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?

f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? g For all contributions of qualified intellectual property, did the organization file Form 8899 as required? h For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?

Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?

9 Sponsoring organizations maintaining donor advised funds. a Did the organization make any taxable distributions under section 4966? **b** Did the organization make any distribution to a donor, donor advisor, or related person?

10 Section 501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on Part VIII, line 12 b Gross Receipts, included on Form 990, Part VIII, line 12, for public use of club facilities

11 Section 501(c)(12) organizations. Enter: a Gross income from other members or shareholders

| amounts due or received from them.). | . Outer | Sources | · ayamsı | L |
|--|----------|---------|-----------|-----|
| 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization | filing F | orm 990 | in lieu d | f F |

| ncome from other sources (Do not net amounts due or paid to other sources against is due or received from them.) | 11 b | |
|--|------|---|
| 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of F | | |
| enter the amount of tax-exempt interest received or accrued during the year | 12h | ı |

| 10b | /- \$ } | | |
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| 11a | | | |
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| 11b | \$ 6 | 3.40 | |
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b If 'Yes,

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Part VI Governance, Management and Disclosure For each 'Yes' response to lines 2 through 7b below, and for a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

| Section A. | Governing Body and Management | | | | |
|--------------------------------|---|---|-----------|------------|--------------|
| | | | F.T | Yes | No |
| | number of voting members of the governing body | 1a 5 | | | |
| | number of voting members that are independent | [1b] 3 | | <u>.</u> 4 | |
| 2 Did any of officer, d | officer, director, trustee, or key employee have a family relationship or a business relirector, trustee or key employee? See Schedule 0 | ationship with any other | 2 | X | |
| 3 Did the o | rganization delegate control over management duties customarily performed by or u s, directors or trustees, or key employees to a management company or other perso | nder the direct supervision no | 3 | | <u>X</u> |
| | rganization make any significant changes to its organizational documents | | 4 | | X |
| | prior Form 990 was filed? rganization become aware during the year of a material diversion of the organization | n'e accete? | 5 | | Х |
| | organization have members or stockholders? | 13 03500. | 6 | | X |
| 7a Does the | organization have members, stockholders, or other persons who may elect one or r | nore members of the | | | X |
| governin b Are any | g body? decisions of the governing body subject to approval by members, stockholders, or ot | her persons?. | 7a 7b | | X |
| 8 Did the o | rganization contemporaneously document the meetings held or written actions under ving: | rtaken during the year by | | | |
| a The gove | erning body? | | 8a | | X |
| b Each cor | nmittee with authority to act on behalf of the governing body? | | 8b | | X |
| 9 Is there organiza | any officer, director or trustee, or key employee listed in Part VII, Section A, who car tion's mailing address? If 'Yes,' provide the names and addresses in Schedule O | nnot be reached at the | 9 | | Х |
| Section B. | Policies (This Section B requests information about policies no | t required by the Interna | al | | |
| Revenue Code | 2) | | | . , | |
| | | | | Yes | No |
| | organization have local chapters, branches, or affiliates? | | 10a | | <u>X</u> |
| b If 'Yes,' and brar | does the organization have written policies and procedures governing the activities o iches to ensure their operations are consistent with those of the organization? | f such chapters, affiliates, | 10 ь | | |
| | organization provided a copy of this Form 990 to all members of its governing body t | _ ` | 11 | | X |
| | in Schedule O the process, if any, used by the organization to review this Form 990 | . See Schedule O | -277 | | |
| | organization have a written conflict of interest policy? If 'No,' go to line 13 | | 12a | | Х |
| to conflic | | • | 12b | | |
| c Does the Schedul | organization regularly and consistently monitor and enforce compliance with the pole O how this is done | icy? If 'Yes,' describe in | 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 persons, | process for determining compensation of the following persons include a review and a comparability data, and contemporaneous substantiation of the deliberation and dec | approval by independent cision? | | | |
| a The orga | inization's CEO, Executive Director, or top management official | | 15a | | <u>X</u> |
| | icers of key employees of the organization | | 15 b | . K. 1567. | X |
| If 'Yes' t | o line 15a or 15b, describe the process in Schedule O. (See instructions.) | | | | |
| 16a Did the dentity du | organization invest in, contribute assets to, or participate in a joint venture or similar ring the year? | arrangement with a taxable | 16 a | erena | X |
| in joint v | nas the organization adopted a written policy or procedure requiring the organization enture arrangements under applicable federal tax law, and taken steps to safeguard th respect to such arrangements? | to evaluate its participation the organization's exempt | 16b | | * · 3 & · |
| | Disclosures | | | | |
| 17 List the : | states with which a copy of this Form 990 is required to be filed IL | | | | |
| Inspection | 5104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, ar in. Indicate how you make these available. Check all that apply. | id 990-T (501(c)(3)s only) avai | ilable fo | or put | olic |
| | website Another's website X Upon request | | | | |
| | in Schedule O whether (and if so, how) the organization makes its governing docum its available to the public. See Schedule 0 | | | | cial |
| | name, physical address, and telephone number of the person who possesses the b | | nızatıor | n: | |
| ► <u>Kabbi</u> | Eliyahu Millen 3050 W Touhy Avenue Chicago 60645 | 113-465-0419 | | | - |

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

- 1 a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organizations's tax year. 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. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees. See instructions for definition of 'key employees'
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

| Check this box if the organization did no | t compens | sate ar | ту с | urre | nt o | fficer, | dire | ctor, or trustee. | | |
|---|--|--------------------------------|-----------------------|----------|--------------|--|-----------------|--|---|--|
| (A) | (B) | | | | c) | | | (D) | (E) | (F) |
| Name and Title | Average hours | | | | _ | hat app | | Reportable | Reportable compensation from | Estimated amount of other |
| | per week | Individual trustee or director | Institutional trustee | Officer | Key employee | Highest compensated employee | Former | Reportable compensation from the organization (W-2/1099-MISC) | Reportable compensation from related organizations (W-2/1099-MISC) | compensation from the organization and related organizations |
| Norman T Finkel | | | | | | | | | | |
| Director | 5 | | | | | | | 0. | 0. | 0. |
| Eliyahu Millen | 1 | | | | | | | | | _ |
| Director | 40 | Х | <u> </u> | X | X | | | 6,490. | 0. | 0. |
| Henoch Millen | _ | ,, | | | | | | | | • |
| Director | 5 | X | _ | <u> </u> | | | | 0. | 0. | 0. |
| Asher Kohn Director | 5 | v | | | | | | | | • |
| Yishai Broner | 3 | Х | ├- | <u> </u> | ļ | | _ | 0. | 0. | 0. |
| Director | 5 | Х | | | | ļ | | 0. | 0. | 0. |
| 2110001 | | ^ | ┢╌ | | | | - | | | <u></u> |
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| Part VII Section A. Officers, Directors, Trus | tees, l | ⟨еу | En | npl | oye | es, | an | | | |
|--|----------------------------------|---------------------------------------|----------------------|----------------|----------------|-------------|---------------|---|---|--|
| ` (A) | (B) | (B) (c) erage Position (check all the | | | | | | (D) | (E) | (F) |
| Name and Title | Average hours per week | | | Officer | _ | | Former | Reportable compensation from the organization (W-2/1099-MISC) | Reportable compensation from related organization (W-2/1099-MISC) | Estimated amount of other compensation from the organization and related organizations |
| | | | | | | | | | | |
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| | | | | | | | | | | |
| 1 b Total | | | | _ | | | <u> </u> | 6,490. | <u> </u> | 0. 0 |
| 2 Total number of individuals (including but not limited from the organization ► 0 | to thos | se lis | ted | abo | ve) | who | rec | eived more than S | 100,000 in repor | Yes No |
| 3 Did the organization list any former officer, director on line 1a? If 'Yes,' complete Schedule J for such if 4 For any individual listed on line 1a, is the sum of repetite organization and related organizations greater the individual | ndividua portable nan \$15 | com 0,000 | nper 0? <i>I</i> | nsati f 'Ye | ion a | and comp | othe olete | er compensation for s | rom uch | 3 X |
| 5 Did any person listed on line 1a receive or accrue or rendered to the organization? If 'Yes,' complete Sci Section B. Independent Contractors | ompens nedule J | ation for | n fro <i>sucl</i> | m a h pe | iny i Irsol | ınrel | lated | d organization for | services | 5 X |
| Complete this table for your five highest compensation from the organization. | ed indep | end | ent | con | trac | tors | that | received more th | an \$100,000 of | |
| (A) Name and business addres | ss | | | | | | | Description | of Services | (C) Compensation |
| | | | | | | | | | | |
| | | | | | | | | | | |
| 2 Total number of independent contractors (including l \$100,000 in compensation from the organization ► | but not i | imite | ed to | o the | ose | liste | d ab | L pove) who receive | d more than | |

| Pal | t VI | II Statement of Re | venue | | | | | |
|---|-----------------------|--|--|-------------------------|-----------------------------|---|--|---|
| | | | | | (A) Total revenue | (B) Related or exempt function revenue | (C) Unrelated business revenue | (D) Revenue excluded from tax under sections 512, 513, or 514 |
| CONTRIBUTIONS, GIFTS, GRANTS AND OTHER SIMILAR AMOUNTS | b c d e f | Federated campaigns Membership dues Fundraising events Related organizations Government grants (contribution All other contributions, gifts, gainslar amounts not included in Noncash contribus included in Total. Add lines 1a-1f | rants, and above 1 f | 126,419. | 126,419. | | | |
| PROGRAM SERVICE REVENUE | | Tuition | | Business Code 611600 | 11,768. | 11,768. | | |
| ROGR | f | All other program service | e revenue | L | 11 760 | | 7.24.2. | |
| 14 | 3 4 5 | Investment income (includer similar amounts) Income from investmen Royalties | _ | • | 11,768. | 67. | | |
| | 6a b | Gross Rents Less. rental expenses Rental income or (loss) Net rental income or (lo | (i) Real | (ii) Personal | | | | |
| | 7a b c | Gross amount from sales of assets other than inventory Less: cost or other basis and sales expenses Gain or (loss) Net gain or (loss) | (i) Securities | (ii) Other | | | | |
| OTHER REVENUE | b | Gross income from fund (not including \$ | d on line 1c). | 10,993. b 27,740. | -16,747. | | | -16,747. |
| | b | Gross income from gam See Part IV, line 19 Less: direct expenses. Net income or (loss) from | | a b | | | | |
| i | 10 a b | Gross sales of inventory and allowances Less: cost of goods solo Net income or (loss) from | , less returns I m sales of inve | a b ntory ▶ | | | | |
| | 11 a b c | | | Business Code | | | | |
| | | All other revenue Total. Add lines 11a-11d | . | <u> </u> | | \$ << \(\psi_{\pi_{\psi_{\pi_{\psi_{\psi_{\pi_{\psi_{\pi_{\psi_{\psi_{\psi_{\psi_{\psi_{\psi_{\psi_{\psi_{\psi_{\psi_{\psi_{\psi_{\psi_{\psi_{\psi_{\pi_{\psii}}\pi_{\psi_{\psi_{\psi_{\psi_{\psi_{\psi_{\psi_{\psi_{\psi_{\psi_{\psi_{\psi_{\psi_{\psi_{\psi_{\psi_{\psi_{\psi_{\pi_{\pi_{\pi_{\pi_{\psi_{\psi_{\psi_{\psi_{\psi_{\psi_{\psi_{\psi_{\psi_{\psi_{\psi_{\pii}\psi_{\psi_{\psi_{\psi_{\psi_{\psi_{\psi_{\psi_{\psi_{\psi_{\psi_{\psi_{\psi_{\pii}}\psi_{\psi_{\psi_{\psi_{\psii}\psi_{\psi_{\psi_{\psii}\psi_{\pii}\psi_{\psi_{\psi_{\pii}\psi_{\pii}\psi_{\pii\psi_{\pii}\psi_{\pii}\psi_{\pii}\psi_{\pii}\psi_{\pii}\psi_{\pii}\psi_{\pii}\psi_{\pii}\psi_{\pii\psi_{\pii}\pii\psii\pii\pii\psi_{\pii}\psi_{\pii}\pii\pii\psii\pii\pii\psi_{\ | \$4.75°° (-5778-4338 | 2 de 80 a de 19 a Ma |
| | | Total revenue. See instri | | . ▶ | 121,507. | 11,835. | 0 | -16.747 |

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Part X Statement of Functional Expenses

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

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D). (D) Fundraising Program service Do not include amounts reported on lines Management and Total expenses 6b, 7b, 8b, 9b, and 10b of Part VIII. expenses general expenses expenses Grants and other assistance to governments and organizations in the U.S. See Part IV, â. Grants and other assistance to individuals in the U.S. See Part IV, line 22 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 Compensation of current officers, directors, 6,490. 0 6,490 0. trustees, and key employees Compensation not included above, to disqualified persons (as defined under section 4958(f)(1) and persons described in 0 0 0 0. section 4958(c)(3)(B) 10,307 7 Other salaries and wages 124,445. 114,138 Pension plan contributions (include section 401(k) and section 403(b) employer contributions) Other employee benefits. 25,073. 25,073 10 Payroll taxes 11 Fees for services (non-employees) a Management **b** Legal 1,875 1,875 c Accounting **d** Lobbyina e Prof fundraising svcs. See Part IV, In 17 f Investment management fees g Other 2,427. 2,427. 6,205. 6,205. 12 Advertising and promotion 2,302. 2,302 Office expenses 13 Information technology 15 Royalties 16 Occupancy 17 Travel Payments of travel or entertainment expenses for any federal, state, or local public officials 19 Conferences, conventions, and meetings 20 Interest 21 Payments to affiliates Depreciation, depletion, and amortization 22 830 830 23 Insurance Other expenses. Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.) a Insurance 11,474 9,989 **b** Food 9,424. 9,424 c_Books/Supplies 1,833 1,833 d Miscellaneous 958. 958 e Bank Charges 913 913. f All other expenses 1,615 728 887. 25 Total functional expenses. Add lines 1 through 24f 195,864. 171,480 24,384 0. Joint costs. Check here ► | If following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational

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campaign and fundraising solicitation

Page 11

Total net assets or fund balances.

Total liabilities and net assets/fund balances.

Part X Balance Sheet 1 Cash - non-interest-bearing 2 Savings and temporary cash investments 3 Pledges and grants receivable, net Accounts receivable, net Receivables from current and former officers, directors, trustees, k and highest compensated employees. Complete Part II of Schedul Receivables from other disqualified persons (as defined under sec and persons described in section 4958(c)(3)(B). Complete Part II of 7 Notes and loans receivable, net Inventories for sale or use Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D **b** Less: accumulated depreciation. 11 Investments – publicly-traded securities 12 Investments - other securities See Part IV, line 11 13 Investments - program-related See Part IV, line 11 14 Intangible assets 15 Other assets. See Part IV, line 11 16 Total assets Add lines 1 through 15 (must equal line 34) 17 Accounts payable and accrued expenses 18 Grants payable 19 Deferred revenue 20 Tax-exempt bond liabilities Escrow or custodial account liability. Complete Part IV of Schedul 21 Payables to current and former officers, directors, trustees, key er highest compensated employees, and disqualified persons. Compl of Schedule L 23 Secured mortgages and notes payable to unrelated third parties . 24 Unsecured notes and loans payable to unrelated third parties 25 Other liabilities. Complete Part X of Schedule D 26 Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117, check here ▶ 27 through 29 and lines 33 and 34. 27 Unrestricted net assets 28 Temporarily restricted net assets. Permanently restricted net assets Organizations that do not follow SFAS 117, check here lines 30 through 34. Capital stock or trust principal, or current funds

| Dalance Sheet | | | | | | | |
|---|---|--------------------------|-------------|---|--|--|--|
| | | (A) Beginning of year | İ | (8) End of year | | | |
| Cash - non-interest-bearing | | 80,117. | 1 | 74,346. | | | |
| Savings and temporary cash investments | | | 2 | | | | |
| Pledges and grants receivable, net | | | 3 | | | | |
| Accounts receivable, net | | · | 4 | | | | |
| Receivables from current and former officers, directors and highest compensated employees. Complete Part II | Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L | | | | | | |
| Receivables from other disqualified persons (as defined | d under section 4958(f)(1)) | | <u></u> | 33.48225 | | | |
| and persons described in section 4958(c)(3)(B). Compl | ete Part II of Schedule L | | 6 | | | | |
| Notes and loans receivable, net | | | 7 | | | | |
| Inventories for sale or use | | | 8 | | | | |
| Prepaid expenses and deferred charges | | | 9 | | | | |
| a Land, buildings, and equipment: cost or other basis. | 10a 2,031,485. | | () ··· () | \$\display \display \d | | | |
| Complete Part VI of Schedule D | | | | | | | |
| b Less: accumulated depreciation. | 10b 17,261. | 13,777. | 10c | 2,014,224 | | | |
| Investments – publicly-traded securities | | | 11 | | | | |
| Investments - other securities See Part IV, line 11 | | | 12 | | | | |
| Investments - program-related See Part IV, line 11 | | · | 13 | | | | |
| Intangible assets | | | 14 | | | | |
| Other assets. See Part IV, line 11 | | | 15 | | | | |
| Total assets Add lines 1 through 15 (must equal line 3 | 34) | 93,894. | 16 | 2,088,570 | | | |
| Accounts payable and accrued expenses | | | 17 | | | | |
| Grants payable | | | 18 | | | | |
| Deferred revenue | | | 19 | | | | |
| Tax-exempt bond liabilities | | | 20 | | | | |
| Escrow or custodial account liability. Complete Part IV | of Schedule D | | 21 | | | | |
| Payables to current and former officers, directors, trus highest compensated employees, and disqualified pers | tees, key employees, sons. Complete Part II | | | | | | |
| of Schedule L | | | 22 | | | | |
| Secured mortgages and notes payable to unrelated thi | rd parties . | | 23 | | | | |
| Unsecured notes and loans payable to unrelated third | parties . / | | 24 | | | | |
| Other liabilities. Complete Part X of Schedule D . | | 140,556. | 25 | 2,209,588 | | | |
| Total liabilities. Add lines 17 through 25 | | 140,556. | 26 | 2,209,588 | | | |
| Organizations that follow SFAS 117, check here ▶ | and complete lines | | 1 28 | | | | |
| 27 through 29 and lines 33 and 34. | | | | | | | |
| Unrestricted net assets | • | | 27 | | | | |
| Temporarily restricted net assets | | | 28 | | | | |
| Permanently restricted net assets . | | | 29 | | | | |
| Organizations that do not follow SFAS 117, check here | e ► X and complete | | | | | | |
| lines 30 through 34. | | | | | | | |
| Capital stock or trust principal, or current funds | | | 30 | | | | |
| Paid-in or capital surplus, or land, building, and equipm | | | 31 | | | | |
| Retained earnings, endowment, accumulated income, | or other funds . | -46,662. | 32 | -121,018. | | | |
| Total net assets or fund halances | | -16 662 | 22 | -121 010 | | | |

-46,662.| 33

93,894

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31

33

34

2,088,570. Form 990 (2009)

-121,018.

| Form 990 (2009) Yeshivas Meor HaTorah of Chicago | 20-1051051 | P | age 12 |
|--|-------------------|------------|--------|
| Part XI Financial Statements and Reporting | | | · |
| , | | Yes | No |
| 1 Accounting method used to prepare the Form 990: $[X]$ Cash $[X]$ Accrual $[X]$ Other | | | |
| If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O. | | | |
| 2a Were the organization's financial statements compiled or reviewed by an independent accountant? | 2 | a | X _ |
| b Were the organization's financial statements audited by an independent accountant? | _2 | 2 b | X |
| c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversig review, or compilation of its financial statements and selection of an independent accountant? | ht of the audit, | 2c | |
| If the organization changed either its oversight process or selection process during the tax year, explair in Schedule O. | າ ເຂົ້າ | | |
| d If 'Yes' to line 2a or 2b, check a box below to indicate whether the financial statements for the year wer consolidated basis, separate basis, or both: | re issued on a | | |
| Separate basis Consolidated basis Both consolidated and separate basis | a s | * ! | |
| 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth Audit Act and OMB Circular A-133? | | Ba | x |
| b If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo to or audits, explain why in Schedule O and describe any steps taken to undergo such audits. | ne required audit | ВЬ | |

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Form 990 (2009)

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Total

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

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

OMB No 1545-0047

Open to Public Inspection

| Vame o | f the | organı | zation | | | | | | | Employe | r Identificati | on number | | |
|--------|---------------|-----------------|---|--|--|--------------------------------------|---|----------------------------|------------------------------|-----------------------|--|--------------------------|-----------------|-------------|
| Yes: | hiv | ras | Meor HaT | orah of Chicag | 0 | | | | | 20-10 | 051051 | | | |
| Parl | | Rea | son for Pu | ıblic Charity Statu | s (All organizations | must | compl | ete thi: | s part | .)`Se <u>e</u> | ınstruc | tions | | |
| The c | rgar | nızatıd | on is not a pri | vate foundation because | se it is: (For lines 1 throu | gh 11, cl | heck on | ly one b | ox.) | | | | | |
| 1 | П | A chi | urch, conventi | ion of churches or asso | ociation of churches desc | ribed in | section | 170(b)(1 | χΑχi). | | | | | |
| 2 | X | A sch | nool described | d in section 170(b)(1)(A |)(ii). (Attach Schedule E |) | | | | | | | | |
| 3 | $\overline{}$ | | | | organization described i | | n 170(b) | (1)(A)(iii | i). | | | | | |
| 4 | \vdash | | | · • | d in conjunction with a ho | | | | • | b <u>x</u> 1xA) | (iii). Ente | r the hosp | ntal's | |
| | $\overline{}$ | | e, city, and sta | - | , | | | | ` | | • | | | |
| 5 | | An o | ganization op | | of a college or university | owned o | or opera | ted by a | govern | mental | unit desc | ribed in se | ction | |
| 6 7 | П | An o | ganization th | | jovernmental unit describ substantial part of its sup rt II.) | | | | | or from | the gene | ral public o | descrit | oed |
| 8 | | | | | 70(b)(1)(A)(vi). (Complete | e Part II. |) | | | | | | | |
| 9 | _ | from | activities rela | ted to its éxempt functi | more than 33-1/3 % of ons — subject to certain ss taxable income (less s mplete Part III.) | exception | ns, and | (2) no r | nore th | an 33-1/ | '3 % of its | s support f | rom gi | ross |
| 10 | П | An o | ganızatıon or | ganized and operated | exclusively to test for put | blic safet | ty. See | section ! | 509(a)(4 | l). | | | | |
| 11 | | An or more desc | rganization or publicly supp ribes the type | ganized and operated ported organizations de of supporting organiz | exclusively for the benefi escribed in section 509(a ation and complete lines | it of, to p)(1) or s 11e thro | erform ection 5 ough 11h | the func 09(a)(2) 1. | tions of . See s e | , or carr ection 5 | y out the 09(a)(3) . | purposes Check the | of one box t | e or hat |
| | | a | Туре І | b ☐Type II | c Type II | I - Fund | tionally | integrate | ed | | d 🗍 | Type III- | Other | r |
| е | _ | By cl | necking this b foundation ma | ox, I certify that the organizers and other than | ganization is not controlled one or more publicly su | ed direct ipported | ly or ind organiz | irectly by ations d | y one o escribe | r more o d in sec | disqualifie tion 509(a | ed person a)(1) or se | s othe ction | r |
| f | | If the | | received a written dete | ermination from the IRS t | that is a | Type I, | Type II o | or Type | III supp | orting or | ganızatıon | , | |
| g | | Since | e August 17, 2 | 2006, has the organizat | tion accepted any gift or | contribu | ition froi | m any of | f the fol | lowing p | ersons? | | | |
| | | | | | | | | | | | | | Yes | No |
| | | (i) | below, the go | overning body of the su | • • | ogether | with per | sons de | scribed | ın (ıı) aı | nd (III) | 11 g (i) | <u> </u> | |
| | | (ii) | - | nber of a person desci | ** | | | | | | • • | 11 g (ii) | <u> </u> | |
| | | (iii) | | | described in (i) or (ii) ab | | | | | | | 11 g (iii) | <u>/</u> | L |
| h | | Prov | de the follow | ng information about the | ne supported organization | ns. | | | | | | | | |
| | (I) | Name Org | of Supported anization | (ii) EIN | (iii) Type of organization (described on lines 1-9 above or IRC section (see instructions)) | organizat (i) listed gove | s the ion in col I in your ming ment? | | nzation in (i) of | organizat | Is the tion in col ized in the S? | (vii) Amou | nt of Sup | pport |
| | | | | | | Yes | No | Yes | No | Yes | No | | | |
| | | | | | | | | | | | | | | |
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| | | | | <u> </u> | | 1 | I | 1 | | 1 | 1 | | | |

BAA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule A (Form 990 or 990-EZ) 2009

Schedule A (Form 990 or 990-EZ) 2009 Part # 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) ► (d) 2008 (a) 2005 (b) 2006 (c) 2007 Gifts, grants, contributions and membership fees received. (Do not include 'unusual grants.') 2 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf 3 The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge Total. Add lines 1-through 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 shown on line 11, column (f) **Public support.** Subtract line 5 from line 4 Section B. Total Support Calendar year (or fiscal year beginning in) ► (c) 2007 (a) 2005 (b) 2006 (d) 2008 7 Amounts from line 4 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form sımılar sources 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.) Total support. Add lines 7 through 10 12 Gross receipts from related activities, etc. (see instructions) First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage 14 Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f) 14 % 15 Public support percentage from 2008 Schedule A, Part II, line 14 15 % 16a 33-1/3 support test - 2009. If the organization did not check the box on line 13, and the line 14 is 33-1/3 % or more, check this box and stop here. The organization qualifies as a publicly supported organization. b 33-1/3 support test - 2008. If the organization did not check a box on line 13, or 16a, and line 15 is 33-1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization. 17a 10%-facts-and-circumstances test - 2009 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. b 10%-facts-and-circumstances test - 2008. 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

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

organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization.

Page 3

Schedule A (Form 990 or 990-EZ) 2009 Yeshivas Meor HaTorah of Chicago

Part III Support Schedule for Organizations Described in Section 509(a)(2)

| | ' (Complete only if you chec | THE WITE BOX OF THE | ic 5 off art i.) | | | | |
|---|--|--|--|--|--|---|----------------------------|
| <u>Sect</u> | tion A. Public Support | | | | | , | |
| | ndar year (or fiscal yr beginning in) 🕨 | (a) 2005 | (b) 2006 | (c) 2007 | (d) 2008 | (e) 2009 | (f) Total |
| 1 | Gifts, grants, contributions and membership fees received. (Do not include 'unusual grants') | | | | | | |
| 2 | Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in a 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 | | | | | | |
| | Total. Add lines 1 through 5 Amounts included on lines 1, 2, 3 received from disqualified persons | | | | | | |
| b | Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the amount on line 13 for the year | | | | | | |
| C | Add lines 7a and 7b | | | | | | |
| 8 | Public support (Subtract line | | | | 77.2 | | |
| | 7c from line 6.) | | | | | | |
| Sec | tion B. Total Support | | | | | | |
| - - | | | | | | 4 3 0000 | 1 |
| Cale | ndar year (or fiscal yr beginning in) 🕨 | (a) 2005 | (b) 2006 | (c) 2007 | (d) 2008 | (e) 2009 | (f) Total |
| 9 | Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources | (a) 2005 | (b) 2006 | (c) 2007 | (d) 2008 | (e) 2009 | (t) Total |
| 9 10 a | Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form | (a) 2005 | (b) 2006 | (c) 2007 | (d) 2008 | (e) 2009 | (t) Total |
| 9 10 a b | Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources Unrelated business taxable income (less section 511 taxes) from businesses | (a) 2005 | (b) 2006 | (c) 2007 | (d) 2008 | (e) 2009 | (f) Total |
| 9 10 a b | Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) | | (b) 2006 | (c) 2007 | (d) 2008 | (e) 2009 | (f) Total |
| 9 10 a b c 11 | Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) Total support. (add ins 9, 10c, 11, and 12) First five years. If the Form 990 | s for the organize | | | Can A | | |
| 9 10 a b 11 12 | Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) Total support. (add ins 9, 10c, 11, and 12) First five years. If the Form 990 organization, check this box and | s for the organiza | ation's first, secon | | Can A | | |
| 9 10 a b c 11 12 13 14 Sec | Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) Total support. (add Ins 9, 10c, 11, and 12) First five years. If the Form 990 organization, check this box and tion C. Computation of Put | is for the organizatop here. | ation's first, secon | d, third, fourth, o | Can A | a section 501(c)(3 | 3) |
| 9 10 a b c 11 12 13 14 Sec 15 | Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) Total support. (add lins 9, 10c, 11, and 12) First five years. If the Form 990 organization, check this box and tion C. Computation of Pu | s for the organize stop here. blic Support 09 (line 8, column | ation's first, secon Percentage (f) divided by lin | d, third, fourth, o | Can A | a section 501(c)(3 | 3) - 1 |
| 9 10 a b c 11 12 13 14 Sec 15 16 | Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) Total support. (add lins 9, 10c, 11, and 12) First five years. If the Form 990 organization, check this box and tion C. Computation of PuPublic support percentage from 20 | s for the organizastop here. 1blic Support 09 (line 8, column 2008 Schedule A, | ation's first, secon Percentage (f) divided by lin Part III, line 15 | d, third, fourth, o | Can A | a section 501(c)(3 | 3) |
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| 9 10 a b c 11 12 13 14 Sec 15 16 Sec 17 18 | Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) Total support. (add Ins 9, 10c, 11, and 12) First five years. If the Form 990 in organization, check this box and tion C. Computation of Public support percentage for 20 Public support percentage from 2 Tion D. Computation of Investment income percentage from 2 | is for the organizastop here. 1blic Support 109 (line 8, column 1008 Schedule A, 1000 vestment Inco 1000 cor 2009 (line 10c, 1000 cor 2008 Schedule | Percentage (f) divided by lin Part III, line 15 Percentage column (f) divided le A, Part III, line | d, third, fourth, o | r fifth tax year as | a section 501(c)(3 | % % |
| 9 10 a b c 11 12 13 14 Sec 15 16 Sec 17 18 19 a | Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) Total support. (add Ins 9, 10c, 11, and 12) First five years. If the Form 990 in organization, check this box and tion C. Computation of Public support percentage for 20 Public support percentage from 2 Tion D. Computation of Investment income percentage from 33-1/3 support tests — 2009. If the more than 33-1/3%, check this box | is for the organizatop here. Sublic Support 99 (line 8, column 2008 Schedule A, vestment Inco or 2009 (line 10c, rom 2008 Schedule de organization did ox and stop here. | Percentage (f) divided by lin Part III, line 15 Percentage column (f) divided le A, Part III, line d not check the bo | d, third, fourth, one 13, column (f)) ge the by line 13, column 17 ox on line 14, and qualifies as a put | r fifth tax year as | a section 501(c)(3 15 16 17 18 han 33-1/3%, and rganization | % % % Inne 17 is not |
| 9 10 a b c 11 12 13 14 Sec 17 18 19 a b | Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) Total support. (add Ins 9, 10c, 11, and 12) First five years. If the Form 990 organization, check this box and tion C. Computation of Public support percentage from 2 tion D. Computation of Investment income percentage from 33-1/3 support tests — 2009. If the | is for the organizatop here. Sublic Support 99 (line 8, column 2008 Schedule A, vestment Inco or 2009 (line 10c, rom 2008 Schedule de organization did ox and stop here. de organization did this box and stop | Percentage (f) divided by lin Part III, line 15 Percentage column (f) divided de A, Part III, line de not check the bear the organization de not check a box bear The organication | d, third, fourth, of third, fourth, of third, fourth, of the third, fourth, of the third, and the third thir | r fifth tax year as Inn (f)) I line 15 is more to blicly supported or and line 16 is more to be a publicly supported or a pu | a section 501(c)(3 15 16 17 18 han 33-1/3%, and rganization ore than 33-1/3%, rted organization | % % % Inne 17 is not |

| Schedule A | (Form | 990 | or 99 | 90-EZ |) 200 | 9 | Yes | shiva | as | Meor | На | Tora | ah | of | Chic | cag | jo | | 20-10 | 5105 | 51 | Р | age 4 |
|----------------|--------------|-------|--------------|-------|--------------|------------------|----------------|-----------|------------------|--------------|------|-------------|--------------|------|----------------|------------|----------------------------|-------|--------------|--------------|------------|-------|--------------|
| Part IV | Sup | pler | nent | al In | fort | natio | n. | Com | ple | te this | s pa | art to | pro | vide | e the | ex | planations additional i | requ | ured l | оу Ра | rt II, Iır | ne 10 | ; |
| | Part | II, I | ine | 17a (| or 1 | 7b; a | ınd | Part | ÌIII, | line 1 | 12. | Prov | ide | any | othe | er a | additional i | nforn | nation | ı. See | instru | ction | S |
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SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

Supplemental Financial Statements

► Complete if the organization answered 'Yes,' to Form 990, Part IV, lines 6, 7, 8, 9, 10, 11, or 12. ► Attach to Form 990. ► See separate instructions

OMB No 1545-0047

Open to Public Inspection Employer identification number

Yeshivas Meor HaTorah of Chicago

| | vaboraroza or oroago | | 20-1051051 |
|-----|--|--|--|
| Par | Organizations Maintaining Dono | r Advised Funds or Other Similar F | unds or Accounts Complete if |
| | the organization answered 'Yes' t | to Form 990. Part IV. line 6. | |
| | | (a) Donor advised funds | (b) Funds and other accounts |
| 1 | Total number at end of year | (a) Bollot davious tarias | |
| , | Aggregate contributions to (during year) | | |
| 3 | Aggregate contributions to (during year) Aggregate grants from (during year) | · · · · · · · · · · · · · · · · · · · | |
| J | Aggregate value at end of year | | |
| - | | | |
| 5 | Did the organization inform all donors and don funds are the organization's property, subject to | or advisors in writing that the assets held in c to the organization's exclusive legal control? | donor advised Yes No |
| | Did the organization inform all grantees, donor used only for charitable purposes and not for t purpose conferring impermissible private bene | he benefit of the donor or donor advisor or fo fit?? | r any other Yes No |
| Pat | Till Conservation Easements Compl | ete if the organization answered 'Ye | es' to Form 990, Part IV, line 7. |
| 1 | Purpose(s) of conservation easements held by | the organization (check all that apply). | |
| | Preservation of land for public use (e.g., re | ecreation or pleasure) Preservation | n of an historically important land area |
| | Protection of natural habitat | Preservation | n of certified historic structure |
| | Preservation of open space | - | |
| 2 | Complete lines 2a through 2d if the organization | on held a qualified conservation contribution in | n the form of a conservation easement on the |
| | last day of the tax year. | | Hald addle Food of the Veen |
| | Table 1 | | Held at the End of the Year |
| | Total number of conservation easements | | 2a |
| | Total acreage restricted by conservation easer | | 2b |
| | Number of conservation easements on a certif | | 2c |
| | Number of conservation easements included in | | |
| 3 | Number of conservation easements modified, | transferred, released, extinguished, or termin | nated by the organization during the tax |
| | year ► | | |
| 4 | Number of states where property subject to co | nservation easement is located | |
| 5 | Does the organization have a written policy reand enforcement of the conservation easement | | |
| 6 | Staff and volunteer hours devoted to monitoring the year | | |
| , | Amount of expenses incurred in monitoring, in during the year ▶ | specting, and enforcing conservation easeme | ents \$ |
| 8 | Does each conservation easement reported or 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)? | n line 2(d) above satisfy the requirements of s | Section Yes No |
| 9 | In Part XIV, describe how the organization rep include, if applicable, the text of the footnote to conservation easements. | orts conservation easements in its revenue a o the organization's financial statements that | and expense statement, and balance sheet, and describes the organization's accounting for |
| Pai | 🕈 🎹 Organizations Maintaining Colle | ections of Art, Historical Treasures | , or Other Similar Assets |
| | Complete if the organization ans | swered 'Yes' to Form 990, Part IV, li | ne 8. |
| 1 a | If the organization elected, as permitted under treasures, or other similar assets held for publi the text of the footnote to its financial statemen | ic exhibition, education, or research in further | ment and balance sheet works of art, historical rance of public service, provide, in Part XIV, |
| t | If the organization elected, as permitted under treasures, or other similar assets held for publ amounts relating to these items: | SFAS 116, to report in its revenue statement ic exhibition, education, or research in further | t and balance sheet works of art, historical rance of public service, provide the following |
| | (i) Revenues included in Form 990, Part VIII, | line 1 | ► \$ |
| | (ii) Assets included in Form 990, Part X | | ► \$ |
| 2 | If the organization received or held works of a amounts required to be reported under SFAS | rt, historical treasures, or other similar assets | for financial gain, provide the following |
| а | Revenues included in Form 990, Part VIII, line | | . ⊳ \$ |
| | Assets included in Form 990, Part X | | . ►\$ ►\$ |
| | | | т |

| Schedule D (Form 990) 2009 Yeshi | vas Meor F | laTorah of Chi | .cago | 20-105 | | | Page 2 |
|--|--|---|--|------------------------------|------------|-----------------|--|
| Part III Organizations Mainta | ining Collect | ions of Art, Histo | orical Treasures, c | or Other Similar As | sets (| contin | ued) |
| Using the organization's acquisition items (check all that apply) | on accession and | d other records, check | k any of the following th | nat are a significant use | of its co | llection | ı |
| a Public exhibition | | d Loan o | or exchange programs | | | | |
| b Scholarly research | | e Other | | | | | |
| c Preservation for future genera | ations | ٠ ب | | | | | |
| 4 Provide a description of the organ Part XIV. | | ions and explain how | they further the organization | zation's exempt purpose | ın | | |
| 5 During the year, did the organizat assets to be sold to raise funds ra | ion solicit or rec ather than to be | eive donations of art, maintained as part of | historical treasures, or the organization's coll | other similar ection? | Yes | Γ | No |
| Part IV Escrow and Custodia 9, or reported an amo | l Arrangeme | nts Complete if o | organization answe | | 990, P | art IV | , line |
| 1a Is the organization an agent, trus included on Form 990, Part X? | tee, custodian, | or other intermediary | for contributions or other | er assets not | Yes | | No |
| b If 'Yes,' explain the arrangement | | | | | _ | | |
| | | | | | Amoun | t | |
| c Beginning balance | | | | 1c | | | |
| d Additions during the year | | | | 1d | | | |
| e Distributions during the year | | | | 1 e | | | |
| f Ending balance | | | | 1f | | | |
| 2a Did the organization include an ai | mount on Form | 990, Part X, line 21? | | - | Yes | | No |
| b If 'Yes,' explain the arrangement | ın Part XIV. | | | | | | |
| Part V Endowment Funds Co | mplete if org | janization answei | red 'Yes' to Form 9 | 990, Part IV, line 10 |). | | |
| | (a) Current yea | ar (b) Prior year | (c) Two years bac | k (d) Three years back | (e) | Four year | s back |
| 1 a Beginning of year balance | | | | | Y <u>.</u> | ** * }:: | ************************************** |
| b Contributions | | | | | 4 4488 | Y~~ (3 | 8 X23 |
| c Net Investment earnings, gains, and losses | | | | | | | . |
| d Grants or scholarships | | | 7// 9/// 9/// 3/// | | | ··········· | |
| Other expenditures for facilities and programs | | | | | | | |
| f Administrative expenses | | | | | | ** *** | |
| g End of year balance | | | 2 2.72.22.383 | ** (| 3 | *** | |
| 2 Provide the estimated percentage | e of the vear en | d balance held as: | 1000 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | | <u> </u> | <u>2:</u> 2 | |
| a Board designated or quasi-endov | - | 8 | | | | | |
| b Permanent endowment ► | * | | | | | | |
| c Term endowment ► | 8 | | | | | | |
| 2s Are there endeament funds not u | | 4 46 | W | | | | |
| 3a Are there endowment funds not in organization by | n the possession | n of the organization t | nat are neid and admir | nistered for the | [| Yes | No |
| (i) unrelated organizations | | | | | 3a(i) | | |
| (ii) related organizations | | | | | 3a(ii) | | |
| b If 'Yes' to 3a(ıı), are the related o | rganizations list | ed as required on Sch | nedule R?. | | 3b | | |
| 4 Describe in Part XIV the intended | | | | | | | |
| Part VI Investments-Land, B | | | | X. line 10. | | | |
| Description of investment | | Cost or other basis (investment) | (b) Cost or other basis (other) | (c) Accumulated Depreciation | (d) [| Book Va | alue |
| 1 a Land. | | | 200,000. | | | 200 | ,000. |
| b Buildings | | | 1,800,000. | | 1 | | ,000. |
| c Leasehold improvements | | | | | | | |
| d Equipment | | | | | | | |
| e Other | | | 31,485. | 17,261. | , | 14 | ,224. |
| Total. Add lines 1a through 1e (Column | ı (d) must equal | Form 990, Part X. co | | , <u>,</u> | 2 | | ,224. |
| BAA | | | | Sche | | • | 90) 2009 |

| Schedule D (Form 990) 2009 Yeshivas Meor HaTo | orah of Chicago |) | 20-1051051 Page 3 |
|--|----------------------|---|---|
| Part VII Investments-Other Securities See Fo | orm 990, Part X, III | ne 12. N/A | |
| (a) Description of security or category (including name of security) | (b) Book value | (c) Metho | od of valuation if-year market value |
| Financial derivatives | | | |
| Closely-held equity interests. | | | |
| Other | | | |
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| Total. (Column (b) must equal Form 990 Part X, col. (B) line 12) ► | | 21. * W 1 (C) | |
| Part VIII Investments-Program Related (See | Form 990, Part X. | | |
| (a) Description of investment type | (b) Book value | | od of valuation |
| (a) boostiption of invocations type | (b) Book value | Cost or end-c | of-year market value |
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| Total. (Column (b) must equal Form 990, Part X, Col. (B) line 13.) | | 7. 2. 77. 78. 78. 44. F. Levin, S. | 8: 7 f: 8 |
| Part IX Other Assets (See Form 990, Part X, | line 15) N/I | 1 111 111111 | |
| | escription | | (b) Book value |
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| Total. (Column (b) must equal Form 990, Part X, col (B), III | ne 15) | | . ▶ |
| Part X Other Liabilities (See Form 990, Part | | · | |
| (a) Description of Liability | (b) Amount | 700 70 70 70 70 70 70 70 70 70 70 70 70 | \$\(\frac{1}{2}\) \(\frac{1}{2}\) \(\frac{1}2\) \(\frac{1}{2}\) \(\frac{1}2\) \(\frac{1}2\) \(\frac{1}2\) \(\frac{1}2\) \(\frac{1}2\) \(\frac{1}2\) \(\frac{1}2 |
| Federal Income Taxes | (b) Amount | | |
| Loan | 2,209,5 | 90 | |
| 20411 | 2,203,3 | 00. | |
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| Total. (Column (b) must equal Form 990, Part X, col. (B) line 25) | 2,209,5 | 88. | |
| 2. FIN 48 Footnote. In Part XIV, provide the text of the footn | | | |

20-1051051

Page 3

| Schedule D (Form 990) 2009 Yeshivas Meor HaTorah of Chicago | | 20-1051051 | Page 4 |
|--|-------------------------|------------------|-----------------|
| Part XI Reconciliation of Change in Net Assets from Form 990 t | to Financial Statements | s N/A | |
| 1 Total revenue (Form 990, Part VIII,column (A), line 12) | | | |
| 2 Total expenses (Form 990, Part IX, column (A), line 25) | • | | |
| 3 Excess or (deficit) for the year. Subtract line 2 from line 1 | | | |
| 4 Net unrealized gains (losses) on investments | | | |
| 5 Donated services and use of facilities | | | |
| 6 Investment expenses | | | |
| 7 Prior period adjustments | | | |
| 8 Other (Describe in Part XIV). | | | |
| 9 Total adjustments (net). Add lines 4 through 8 | | | |
| 10 Excess or (deficit) for the year per audited financial statements. Combine lines | s 3 and 9 | | |
| Part XII Reconciliation of Revenue per Audited Financial Staten | | r Return N/A | |
| Total revenue, gains, and other support per audited financial statements | | 1 | |
| 2 Amounts included on line 1 but not on Form 990, Part VIII, line 12: | | | |
| a Net unrealized gains on investments | 2a | | |
| b Donated services and use of facilities | 2b | - 1 | |
| c Recoveries of prior year grants | 2c | | |
| d Other (Describe in Part XIV). | 2d | | |
| e Add lines 2a through 2d | 20 | | |
| 3 Subtract line 2e from line 1 | | 3 | |
| | 1 1 | 3 | |
| 4 Amounts included on Form 990, Part VIII, line 12, but not on line 1: | | | |
| a Investments expenses not included on Form 990, Part VIII, line 7b | 4a | ⊢ ,∰ | |
| b Other (Describe in Part XIV) | 4b | idadda | |
| c Add lines 4a and 4b | | 4c | |
| 5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12. | | 5 | |
| Part XIII Reconciliation of Expenses per Audited Financial Stateme | nts with Expenses per K | | |
| 1 Total expenses and losses per audited financial statements | | 1 | |
| 2 Amounts included on line 1 but not on Form 990, Part IX, line 25 | 1 - 1 | [4.44] [4.44] | |
| a Donated services and use of facilities. | 2a | | |
| b Prior year adjustments . | 2b | | |
| c Other losses. | 2c | 48 | |
| d Other (Describe in Part XIV) | 2d | ;;;;; | |
| e Add lines 2a through 2d | | 2 e | |
| 3 Subtract line 2e from line 1. | , . , | 3 | |
| 4 Amounts included on Form 990, Part IX, line 25, but not on line 1: | | 1.30 m | |
| a Investments expenses not included on Form 990, Part VIII, line 7b | 4a | | |
| b Other (Describe in Part XIV) | 4b | | |
| c Add lines 4a and 4b . | | 4c | |
| 5 Total expenses Add lines 3 and 4c (This must equal Form 990, Part I, line 18 | 3.) . | 5 | |
| Part XIV Supplemental Information | | | |
| Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9; line 4; Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d information. | | - | t V, itional |
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| Schedule D (Form 990) 2009 Yeshivas Meor HaTorah of Chicago | 20-1051051 | Page 5 |
|--|------------|-------------|
| Part XIV Supplemental Information (continued) | | |
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SCHEDULE E (Form 990 or 990-EZ)

Schools

OMB No 1545-0047

2009

Open to Public inspection

Department of the Treasury Internal Revenue Service Complete if the organization answered 'Yes' to Form 990, Part IV, line 13, or Form 990-EZ, Part VI, line 48.
 ► Attach to Form 990 or Form 990-EZ.

Name of the organization
Yeshivas Meor HaTorah of Chicago

Employer Identification number 20–1051051

| | milyas medi natotan di chicago | | | |
|----|--|-------------|----------|-------------------------|
| | | | YES | NO |
| 1 | Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body? | 1 | Х | X'72 |
| 2 | Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships? | 2 | X | |
| 3 | Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it had 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. If you need more space, use Schedule O (Form 990) | 3 | X | ; 4.2° ; 4.2° 4.7 |
| | A resolution of the Board has been adopted. Publication of non-discriminatory policy is currently being done. Such policy has been and will continue to be included in all brochures, catalogues and other | | | |
| | written communications. | - | | |
| | Does the organization maintain the following? Records indicating the racial composition of the student body, faculty, and administrative staff? | 4a | X | |
| t | Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis? | 4b | Х | |
| (| c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships? | 4c | | |
| (| d Copies of all material used by the organization or on its behalf to solicit contributions? | 4d | X | |
| | If you answered 'No,' to any of the above, please explain. If you need more space, use Schedule O (Form 990). | 30000 | · ; | |
| | | -[*** | | |
| 5 | Does the organization discriminate by race in any way with respect to: | -∖ | | P.W. |
| | a Students' rights or privileges? | 5a | ******* | Х |
| ŧ | b Admissions policies? | 5b | | Х |
| • | c Employment of faculty or administrative staff? | 5 c | | Х |
| (| d Scholarships or other financial assistance? | 5d | | Х |
| • | e Educational policies? | 5e | | Х |
| f | f Use of facilities? . | 5f | | X |
| ç | g Athletic programs? | 5g | | Х |
| ł | h Other extracurricular activities? | 5h | | Х |
| | If you answered 'Yes,' to any of the above, please explain. If you need more space, use Schedule O (Form 990). | - - - | | |
| 6: | a Does the organization receive any financial aid or assistance from a governmental agency? | | المسترة | iii. |
| | b Has the organization's right to such aid ever been revoked or suspended? | 6a Sh | <u> </u> | X |
| • | If you answered 'Yes,' to either line 6a or line 6b, please explain on Schedule O (Form 990) | 6b | | ^ |
| 7 | Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If 'No,' explain on Schedule O (Form 990) | 7 | Ž. | |

SCHEDULE O (Form 990)

Supplemental Information to Form 990

OMB No 1545-0047

2009

Open to Public

Department of the Treasury Internal Revenue Service

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

► Attach to Form 990.

| Yeshivas Meor HaTorah of Chicago | 20-1051051 |
|---|----------------|
| <u>Form 990, Part VI, Line 2 - Business or Family Relationship of Officers, Directo</u> | <u>rs, Etc</u> |
| A. Eliyahu Millen and Henoch Millen are son and father. | |
| B. Norman T Finkel's law firm renders legal services to the tax | payer. |
| Form 990, Part VI, Line 11 - Form 990 Review Process | · |
| A review of the return will be conducted. | |
| Form 990, Part VI, Line 19 - Other Organization Documents Publicly Available | · |
| Available upon request | |
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| Schedule O (F | orm 990) 2009 | Page 2 |
|-------------------|-------------------------|--------------------------------|
| Name of the organ | ızabon | Employer Identification number |
| Yeshivas | Meor HaTorah of Chicago | 20-1051051 |
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| 8/31/09 | | 7 | 309 Fe | dera | l Boo | ok Dep | 2009 Federal Book Depreciation Schedule | on Sc | hedu | <u>=</u> | | | | | Page 1 |
|------------------------------|------------------|--------------|----------------|------------|---------------------|----------------------------|---|----------------------------|------------------------------|---------------|----------------|------------------|----------|--------|-----------------------------|
| Client 4440 | | | | Yesh | ivas M | leor HaT | Yeshivas Meor HaTorah of Chicago | hicago | | | | | i | 8 | 20-1051051 |
| 7/12/10 Na. Description | Date Acquired | Date Sold | Cost/ Basis | Bus Pet | Cur 179 Bonus | Special Depr. Allow. | Prior 179/ Bonus/ Sp. Depr. | Prior Dec. Bal Depr. | Salvage /Basis Reductn | Depr Basis | Prior Depr. | Method Life Rate | - Life | Rate | 11:15AM Current Depr. |
| Farm 990/990-PF | | | | | | | | | | | | | | | |
| Buildings | | | | | | | | | | | | | | | |
| 6 Building (not in service) | 8/31/09 | · | 1,800,000 | e : | | İ | | | | 1,800,000 | | S/L MM | N 39 | 02247 | 0 |
| Total Buildings | | | 1,800,000 | | 0 | 0 | 0 | 0 | 0 | 1,800,000 | 0 | | | | 0 |
| Furniture and Fixtures | | | | | | | | | | | | | | | |
| 1 Furniture | 7/01/04 | | 400 | 0 | | | | | | 400 | 400 | | | | 0 |
| 2 Furniture & Fixtures | 1/01/05 | | 11,794 | ** | | | | | | 11,794 | 6,274 | | | 40000 | 368 |
| 3 Furniture & Fixtures | 1/01/05 | | 4,403 | ee | | | | | | 4,403 | 2,342 | | / | 4000 | 137 |
| 4 Furniture | 8/01/02 | | 13,612 | 2 | | | | | | 13,612 | 7,415 | | | .28571 | 55. |
| 5 Computer | 8/10/09 | · | 1,277 | | | | | | | 1,277 | | 200DB HY - | / | 785/1 | 30 |
| Total Furniture and Fixtures | | | 31,486 | တ | 0 | 0 | 0 | 0 | 0 | 31,486 | 16,431 | | | | 830 |
| Land | | | | | | | | | | | | | | | |
| | 8/31/09 | | 200,000 | 0 | | | | | | 200,000 | | | | 1 | 0 |
| Total Land | | • | 200,000 | . 0 | 0 | 0 | 0 | 0 | 0 | 200,000 | 0 | 6 | | | 0 |
| Total Depreciation | | | 2,031,486 | ı wı | 0 | 0 | 0 | 0 | 0 | 2,031,486 | 16,431 | ı —" | | 1 0 | 830 |
| Grand Total Depreciation | | " | 2,031,486 | ωlt | 0 | 0 | 0 | 0 | 0 | 2,031,486 | 16,431 | n | | li | 830 |
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