



See a Social Security Number? Say Something!
Report Privacy Problems to <https://public.resource.org/privacy>
Or call the IRS Identity Theft Hotline at 1-800-908-4490



Form

990

Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

OMB No 1545-0047

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

2009

Open to Public Inspection

A For the 2009 calendar year, or tax year beginning 01-01-2009 and ending 12-31-2009

B Check if applicable:
☐ Address change
☐ Name change
☐ Initial return
☐ Terminated
☐ Amended return
☐ Application pending

C Name of organization
ARMENIAN GENERAL BENEVOLENT UNION

Doing Business As

Number and street (or P O box if mail is not delivered to street address) Room/suite
55 EAST 59TH STREET

City or town, state or country, and ZIP + 4
NEW YORK, NY 10022

D Employer identification number
13-5600421

E Telephone number
(212) 319-6383

G Gross receipts \$ 83,140,204

F Name and address of principal officer
BERGE SETRAKIAN
55 EAST 59TH STREET
NEW YORK, NY 10022

H(a) Is this a group return for affiliates? ☐ Yes ☒ No

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

H(c) Group exemption number ▶

I Tax-exempt status ☒ 501(c) (3) ◀(insert no) ☐ 4947(a)(1) or ☐ 527

J Website: ▶ www.agbu.org

K Form of organization ☒ Corporation ☐ Trust ☐ Association ☐ Other ▶

L Year of formation 1959

M State of legal domicile NY

Part I Summary

Activities & Governance

1 Briefly describe the organization's mission or most significant activities
PRESERVE AND PROMOTE THE ARMENIAN IDENTITY AND HERITAGE

2 Check this box ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets

3 Number of voting members of the governing body (Part VI, line 1a) 3 _____ 19

4 Number of independent voting members of the governing body (Part VI, line 1b) 4 _____ 19

5 Total number of employees (Part V, line 2a) 5 _____ 72

6 Total number of volunteers (estimate if necessary) 6 _____ 38

7a Total gross unrelated business revenue from Part VIII, column (C), line 12 . . . 7a _____ 0

7b Net unrelated business taxable income from Form 990-T, line 34 . . . 7b _____ 0

Revenue

8 Contributions and grants (Part VIII, line 1h) 12,449,892 15,455,333

9 Program service revenue (Part VIII, line 2g) 463,550 416,336

10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) -6,986,966 -5,112,961

11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 91,978 50,256

12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) 6,018,454 10,808,964

Expenses

13 Grants and similar amounts paid (Part IX, column (A), lines 1–3) 11,221,050 10,467,094

14 Benefits paid to or for members (Part IX, column (A), line 4) 0

15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10) 3,132,971 2,967,844

16a Professional fundraising fees (Part IX, column (A), line 11e) 0

b Total fundraising expenses (Part IX, column (D), line 25) ▶304,930

17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24f) 4,413,204 4,225,076

18 Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25) 18,767,225 17,660,014

19 Revenue less expenses Subtract line 18 from line 12 -12,748,771 -6,851,050

Net Assets or Fund Balances

20 Total assets (Part X, line 16) Beginning of Current Year 206,936,648 End of Year 184,883,157

21 Total liabilities (Part X, line 26) 1,135,996 1,076,619

22 Net assets or fund balances Subtract line 21 from line 20 205,800,652 183,806,538

Part II Signature Block

Sign Here

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

Signature of officer yervant demirjian ASSISTANT TREASURER Date 2010-11-15

Paid Preparer's Use Only

Preparer's signature BARRY ECKENTHAL Date Preparer's identifying number (see instructions)

Firm's name (or yours if self-employed), address, and ZIP + 4 EIN ▶ Phone no ▶ (973) 929-3500

Part III

Statement of Program Service Accomplishments

1

Briefly describe the organization's mission

TO PROMOTE THE EDUCATIONAL, CULTURAL, PHYSICAL, SPIRITUAL AND MORAL DEVELOPMENT OF THE ARMENIAN PEOPLE, EVERYWHERE TO AID NEEDY ARMENIANS EVERYWHERE AND PROMOTE THEIR GENERAL WELFARE TO PROMOTE WORKS AND PUBLICATIONS AND ESTABLISH KINDERGARTENS, ELEMENTARY SCHOOLS, HIGH SCHOOLS AND COLLEGES TO ASSIST HUMANITARIAN ENDEAVORS WHICH ARE CONSISTENT WITH THESE PURPOSES

2

Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?

Yes

✓

No

If "Yes," describe these new services on Schedule O

3

Did the organization cease conducting, or make significant changes in how it conducts, any program services?

Yes

✓

No

If "Yes," describe these changes on Schedule O

4

Describe the exempt purpose achievements for each of the organization's three largest program services by expenses

Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

4a

(Code) (Expenses \$ 4,863,740 including grants of \$ 2,377,522) (Revenue \$ 416,336)

EDUCATIONAL PROGRAMS CONSIST OF 17 SCHOOLS THAT PROVIDE AN ARMENIAN EDUCATION TO APPROXIMATELY 5,500 STUDENTS AND SCHOLARSHIPS AND GRANTS TO APPROXIMATELY 400 QUALIFIED STUDENTS

4b

(Code) (Expenses \$ 4,517,569 including grants of \$ 2,233,917) (Revenue \$ 18,960)

CULTURAL PROGRAMS INCLUDE THE OPERATION OF VARIOUS CULTURAL CENTERS THROUGHOUT THE WORLD THESE CENTERS PROVIDE PLACES FOR CULTURAL, EDUCATIONAL AND OTHER ACTIVITIES THE ORGANIZATION ALSO SUPPORTS YOUTH ORGANIZATIONS, CAMPS AND SPORTS ACTIVITIES WHOSE OBJECTIVE IS TO PROVIDE THE ARMENIAN HERIGAGE TO THE CHILDREN NEWSLETTERS THAT PROVIDE EDUCATIONAL AND CULTURAL INFORMATION ARE PUBLISHED ON A PERIODIC BASIS

4c

(Code) (Expenses \$ 2,523,494 including grants of \$ 2,398,252) (Revenue \$)

HUMANITARIAN PROGRAMS INCLUDES SUPPORT FOR NEEDY PEOPLE THROUGHOUT THE ARMENIAN WORLD COMMUNITY

4d

Other program services (Describe in Schedule O) **See also Additional Data for Description**

(Expenses \$ 2,015,188 including grants of \$ 2,095,667) (Revenue \$)

4e

Total program service expenses \$ 13,919,991

Part IV

Checklist of Required Schedules

		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A 	1	Yes
2	Is the organization required to complete Schedule B, Schedule of Contributors? 	2	Yes
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3	No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4	No
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5	
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I 	6	No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," complete Schedule D, Part II 	7	No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 	8	No
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV 	9	No
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V 	10	Yes
11	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable. 	11	Yes
	• Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI.		
	• Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.		
	• Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.		
	• Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.		
	• Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.		
	• Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X.		
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII 	12	Yes
12A	Was the organization included in consolidated, independent audited financial statements for the tax year?	Yes	No
	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional 	12A	Yes
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	Yes
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I 	14b	Yes
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the U S ? If "Yes," complete Schedule F, Part II 	15	Yes
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the U S ? If "Yes," complete Schedule F, Part III 	16	Yes
17	Did the organization report a total of more than \$15,000, of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17	No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19	No
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20	No

Part IV

Checklist of Required Schedules (continued)

21	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? <i>If "Yes," complete Schedule I, Parts I and II</i>	21	Yes	
22	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? <i>If "Yes," complete Schedule I, Parts I and III</i>	22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer questions 24b–24d and complete Schedule K. If "No," go to line 25</i>	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>	25a		No
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? <i>If "Yes," complete Schedule L, Part I</i>	25b		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? <i>If "Yes," complete Schedule L, Part II</i>	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? <i>If "Yes," complete Schedule L, Part III</i>	27		No
28	Was the organization a party to a business transaction with one of the following parties? (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
a	A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28b		No
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 owner? <i>If "Yes," complete Schedule L, Part IV</i>	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32		No
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? <i>If "Yes," complete Schedule R, Part I</i>	33		No
34	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1</i>	34	Yes	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	35		No
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36		No
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? <i>If "Yes," complete Schedule R, Part VI</i>	37		No
38	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	38	Yes	

Part V

Statements Regarding Other IRS Filings and Tax Compliance

			Yes	No	
1a	Enter the number reported in Box 3 of Form 1096, <i>Annual Summary and Transmittal of U.S. Information Returns</i> . Enter -0- if not applicable	1a	38		
	b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b		0
c		Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?		1c	
2a	Enter the number of employees reported on Form W-3, <i>Transmittal of Wage and Tax Statements</i> filed for the calendar year ending with or within the year covered by this return	2a	72		
	b		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)		2b
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?		3a		No
b		If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O		3b	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?		4a	Yes	
	b		If "Yes," enter the name of the foreign country: EG, LE, CY, ET, FR, SW, AM, CA, BD See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5a		No
b		Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		5b	No
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 solicit any contributions that were not tax deductible?		6a		No
b		If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		6b	
7 Organizations that may receive deductible contributions under section 170(c).					
a		Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?		7a	No
b		If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b	
c		Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		7c	No
d		If "Yes," indicate the number of Forms 8282 filed during the year		7d	
e		Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		7e	No
f		Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		7f	No
g		For all contributions of qualified intellectual property, did the organization file Form 8899 as required?		7g	
h		For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?		7h	
8 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?				8	
9 Sponsoring organizations maintaining donor advised funds.					
a		Did the organization make any taxable distributions under section 4966?		9a	
b		Did the organization make a distribution to a donor, donor advisor, or related person?		9b	
10 Section 501(c)(7) organizations. Enter					
a		Initiation fees and capital contributions included on Part VIII, line 12		10a	
b		Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities		10b	
11 Section 501(c)(12) organizations. Enter					
a		Gross income from members or shareholders		11a	
b		Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)		11b	
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?				12a	
b		If "Yes," enter the amount of tax-exempt interest received or accrued during the year		12b	

Part VI

Governance, Management, and Disclosure

For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Section A. Governing Body and Management

			Yes	No
1a	Enter the number of voting members of the governing body	1a	19	
b	Enter the number of voting members that are independent	1b	19	
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2	Yes	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		No
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		No
6	Does the organization have members or stockholders?	6	Yes	
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a	Yes	
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
a	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No

Section B. Policies

(This Section B requests information about policies not required by the Internal Revenue Code.)

			Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a	Yes	
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?	10b	Yes	
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11	Yes	
11A	Describe in Schedule O the process, if any, used by the organization to review the Form 990			
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a		No
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c		
13	Does the organization have a written whistleblower policy?	13		No
14	Does the organization have a written document retention and destruction policy?	14		No
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
a	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b	Yes	
	If "Yes" to line a or b, 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 arrangement with a taxable entity during the year?	16a		No
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?	16b		

Section C. Disclosure

17	List the States with which a copy of this Form 990 is required to be filed▶NJ , NY , IL , MA , MI , CA
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 ☐ Upon request
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public. See Additional Data Table.
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization ▶ VAHE KILJIAN 55 EAST 59TH STREET NEW YORK NY NEW YORK, NY 100221112 (212) 319-6383

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

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

Form **990** (2009)

1b	Total	493,403	0	11,326
-----------	------------------------	---------	---	--------

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization **▶** **3**

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

Section B. Independent Contractors

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

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

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization **▶** **0**

Part VIII

Statement of Revenue

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514	
Contributions, gifts, grants and other similar amounts	1a	Federated campaigns . . .	1a					
	b	Membership dues	1b	93,361				
	c	Fundraising events	1c					
	d	Related organizations	1d					
	e	Government grants (contributions)	1e	217,252				
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	15,144,720				
	g	Noncash contributions included in lines 1a-1f \$ 426,436						
	h	Total. Add lines 1a-1f		15,455,333				
Program Service Revenue			Business Code					
	2a	Program Service Revenue	611,600	416,336	416,336			
	b							
	c							
	d							
	e							
	f	All other program service revenue						
	g	Total. Add lines 2a-2f		416,336				
Other Revenue	3	Investment income (including dividends, interest and other similar amounts)		5,110,524			5,110,524	
	4	Income from investment of tax-exempt bond proceeds . .						
	5	Royalties		4,996			4,996	
	6a	Gross Rents	(i) Real	(ii) Personal				
			26,300					
			26,300					
	d	Net rental income or (loss)		26,300			26,300	
	7a	Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other				
			62,091,563					
			72,315,048					
			-10,223,485					
	d	Net gain or (loss)		-10,223,485			-10,223,485	
	8a	Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c) See Part IV, line 18	a					
	b	Less direct expenses	b					
	c	Net income or (loss) from fundraising events . .						
	9a	Gross income from gaming activities See Part IV, line 19	a					
b	Less direct expenses	b						
c	Net income or (loss) from gaming activities . .							
10a	Gross sales of inventory, less returns and allowances	a	35,152					
b	Less cost of goods sold	b	16,192					
c	Net income or (loss) from sales of inventory . .		18,960	18,960				
Miscellaneous Revenue		Business Code						
11a								
b								
c								
d	All other revenue							
e	Total. Add lines 11a-11d							
12	Total revenue. See Instructions		10,808,964	435,296	0	-5,081,665		

Part IX

Statement of Functional Expenses

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

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.		(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the U S See Part IV, line 21	1,348,236	1,348,236		
2	Grants and other assistance to individuals in the U S See Part IV, line 22	13,500	13,500		
3	Grants and other assistance to governments, organizations, and individuals outside the U S See Part IV, lines 15 and 16	9,105,358	9,105,358		
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	493,403		493,403	
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	1,892,204	525,354	1,136,850	230,000
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	90,998		90,998	
9	Other employee benefits	309,027	44,493	264,534	
10	Payroll taxes	182,212	41,214	140,998	
11	Fees for services (non-employees)				
a	Management				
b	Legal	8,706		8,706	
c	Accounting	105,916		105,916	
d	Lobbying				
e	Professional fundraising See Part IV, line 17				
f	Investment management fees	545,049		545,049	
g	Other	81,696	74,634	7,062	
12	Advertising and promotion	19,254	16,192	3,062	
13	Office expenses	154,484	80,352	74,132	
14	Information technology				
15	Royalties				
16	Occupancy	455,808	222,330	233,478	
17	Travel	108,272	60,262	48,010	
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	19,796		19,796	
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	1,054,124	808,184	145,251	100,689
23	Insurance	81,664	81,498	83	83
24	Other expenses Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below)				
a	ACTIVITY EXPENSES	1,096,410	1,096,410		
b	PUBLICATIONS	215,237	210,813	4,424	
c	CAMP FOOD & MEALS	134,636	120,929	13,707	
d	MISCELLANEOUS EXPENSE	79,474	42,170	63,146	-25,842
e	INTERNET, TELEPHONE, UT	64,550	28,062	36,488	
f	All other expenses				
25	Total functional expenses. Add lines 1 through 24f	17,660,014	13,919,991	3,435,093	304,930
26	Joint costs. Check here ☐ if following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X

Balance Sheet

					(A)		(B)
					Beginning of year		End of year
Assets	1	Cash—non-interest-bearing			4,450,508	1	3,724,300
	2	Savings and temporary cash investments				2	
	3	Pledges and grants receivable, net				3	
	4	Accounts receivable, net			1,129,301	4	14,665,762
	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L				5	
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete Part II of Schedule L				6	
	7	Notes and loans receivable, net				7	
	8	Inventories for sale or use				8	
	9	Prepaid expenses and deferred charges				9	
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a	42,621,624	40,101,743	10c	22,906,742
	b	Less accumulated depreciation	10b	19,714,882			
	11	Investments—publicly traded securities				11	
	12	Investments—other securities See Part IV, line 11			159,441,109	12	142,956,224
	13	Investments—program-related See Part IV, line 11				13	
	14	Intangible assets				14	
	15	Other assets See Part IV, line 11			1,813,987	15	630,129
	16	Total assets. Add lines 1 through 15 (must equal line 34)			206,936,648	16	184,883,157
Liabilities	17	Accounts payable and accrued expenses			1,135,996	17	1,076,619
	18	Grants payable				18	
	19	Deferred revenue				19	
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability Complete Part IV of Schedule D				21	
	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L				22	
	23	Secured mortgages and notes payable to unrelated third parties				23	
	24	Unsecured notes and loans payable to unrelated third parties				24	
	25	Other liabilities Complete Part X of Schedule D				25	
	26	Total liabilities. Add lines 17 through 25			1,135,996	26	1,076,619
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here ☒ and complete lines 27 through 29, and lines 33 and 34.						
	27	Unrestricted net assets			21,490,737	27	-3,400,239
	28	Temporarily restricted net assets			34,498,326	28	31,710,071
	29	Permanently restricted net assets			149,811,589	29	155,496,706
	Organizations that do not follow SFAS 117, check here ☐ and complete lines 30 through 34.						
	30	Capital stock or trust principal, or current funds				30	
	31	Paid-in or capital surplus, or land, building or equipment fund				31	
	32	Retained earnings, endowment, accumulated income, or other funds				32	
	33	Total net assets or fund balances			205,800,652	33	183,806,538
	34	Total liabilities and net assets/fund balances			206,936,648	34	184,883,157

Part XI Financial Statements and Reporting

	Yes	No
1 Accounting method used to prepare the Form 990 ☐ Cash ☒ Accrual ☐ 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? . . .	Yes	
b Were the organization's financial statements audited by an independent accountant?	Yes	
c If "Yes," to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	Yes	
d If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both ☐ Separate basis ☐ Consolidated basis ☒ Both consolidated and separated basis		
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		No
b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits . . .		

SCHEDULE A
(Form 990 or 990EZ)

Department of the Treasury
Internal Revenue Service

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

2009

Open to Public Inspection

Name of the organization
ARMENIAN GENERAL BENEVOLENT UNION

Employer identification number
13-5600421

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

The organization is not a private foundation because it is (For lines 1 through 11, check only one box)

1

☐

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

2

☐

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

3

☐

A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**

4

☐

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

5

☐

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

6

☐

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

7

☒

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

8

☐

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

9

☐

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

10

☐

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

11

☐

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

a

☐

Type I

b

☐

Type II

c

☐

Type III - Functionally integrated

d

☐

Type III - Other

e

☐

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

f

☐

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

g

☐

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

(i)

a person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the the supported organization?

(ii)

a family member of a person described in (i) above?

(iii)

a 35% controlled entity of a person described in (i) or (ii) above?

h

☐

Provide the following information about the supported organization(s)

	Yes	No
11g(i)		
11g(ii)		
11g(iii)		

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

Part II

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

Section A. Public Support

Calendar year (or fiscal year 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 any "unusual grants.")	17,265,669	31,210,375	28,353,751	14,375,634	15,455,333	106,660,762
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	17,265,669	31,210,375	28,353,751	14,375,634	15,455,333	106,660,762
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						9,826,877
6 Public Support. Subtract line 5 from line 4						96,833,885

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7 Amounts from line 4	17,265,669	5,027,429	28,353,751	14,375,634	15,455,333	106,660,762
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	5,797,928	5,027,429	6,986,496	4,183,930	5,110,524	27,106,307
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income (Explain in Part IV) Do not include gain or loss from the sale of capital assets						
11 Total support (Add lines 7 through 10)						133,767,069

12

Gross receipts from related activities, etc (See instructions)

12

28,454,896

13

First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here

Section C. Computation of Public Support Percentage

14	Public Support Percentage for 2009 (line 6 column (f) divided by line 11 column (f))	14	72 390 %
15	Public Support Percentage for 2008 Schedule A, Part II, line 14	15	69 410 %

- 16a 33 1/3% support test—2009. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization
- b 33 1/3% support test—2008. If the organization did not check the 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 organization meets the "facts and circumstances" test The organization qualifies as a publicly supported organization
- 18 Private Foundation If the organization did not check a box on line 13, 16a, 16b, 17a or 17b, check this box and see instructions

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

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
2Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3Gross receipts from activities that are not an unrelated trade or business under section 513						
4Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5The value of services or facilities furnished by a governmental unit to the organization without charge						
6Total. Add lines 1 through 5						
7aAmounts included on lines 1, 2, and 3 received from disqualified persons						
bAmounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
cAdd lines 7a and 7b						
8Public Support (Subtract line 7c from line 6)						

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9Amounts from line 6						
10aGross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
bUnrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
cAdd lines 10a and 10b						
11Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13Total support (Add lines 9, 10c, 11 and 12.)						
14First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here						

Section C. Computation of Public Support Percentage

15Public Support Percentage for 2009 (line 8 column (f) divided by line 13 column (f))	15	
16Public support percentage from 2008 Schedule A, Part III, line 15	16	

Section D. Computation of Investment Income Percentage

17Investment income percentage for 2009 (line 10c column (f) divided by line 13 column (f))	17	
18Investment income percentage from 2008 Schedule A, Part III, line 17	18	
19a33 1/3% support tests—2009. If the organization did not check the box on line 14, and line 15 is more than 33 1/3% and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization		
b33 1/3% support tests—2008. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization		
20Private Foundation If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions		

Part IV

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

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

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

OMB No 1545-0047

2009

Open to Public
Inspection

Name of the organization
ARMENIAN GENERAL BENEVOLENT UNION

Employer identification number
13-5600421

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

	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	
2	Aggregate contributions to (during year)	
3	Aggregate grants from (during year)	
4	Aggregate value at end of year	
5	Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No	
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit ☐ Yes ☐ No	

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

1

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

☐ Preservation of land for public use (e g , recreation or pleasure)

☐ Preservation of an historically importantly land area

☐ Protection of natural habitat

☐ Preservation of a certified historic structure

☐ Preservation of open space

2

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

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

3

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

4

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

5

Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?

☐ Yes ☐ No

6

Staff and volunteer hours devoted to monitoring, inspecting and enforcing conservation easements during the year ▶ _____

7

Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ \$ _____

8

Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)?

☐ Yes ☐ No

9

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

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

1a

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

b

If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items

(i) Revenues included in Form 990, Part VIII, line 1

▶ \$ _____

(ii) Assets included in Form 990, Part X

▶ \$ _____

2

If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items

a

Revenues included in Form 990, Part VIII, line 1

▶ \$ _____

b

Assets included in Form 990, Part X

▶ \$ _____

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

Cat No 52283D

Schedule D (Form 990) 2009

Part III

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

3

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

a

☐

Public exhibition

b

☐

Scholarly research

c

☐

Preservation for future generations

d

☐

Loan or exchange programs

e

☐

Other

4

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

5

During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?

☐ Yes

☐ No

Part IV

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

1a

Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?

☐ Yes

☐ No

b

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

c

Beginning balance

d

Additions during the year

e

Distributions during the year

f

Ending balance

	Amount
1c	
1d	
1e	
1f	

2a

Did the organization include an amount on Form 990, Part X, line 21?

☐ Yes

☐ No

b

If "Yes," explain the arrangement in Part XIV

Part V

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

	(a)Current Year	(b)Prior Year	(c)Two Years Back	(d)Three Years Back	(e)Four Years Back
1a Beginning of year balance	177,031,678	175,071,693			
b Contributions	4,172,397	2,583,987			
c Investment earnings or losses	-13,170,758	2,618,950			
d Grants or scholarships					
e Other expenditures for facilities and programs	2,304,408	2,806,077			
f Administrative expenses	501,077	436,875			
g End of year balance	165,227,832	177,031,678			

2

Provide the estimated percentage of the year end balance held as

a

Board designated or quasi-endowment ▶ %

b

Permanent endowment ▶ %

c

Term endowment ▶ %

3a

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

(i) unrelated organizations

3a(i)

No

(ii) related organizations

3a(ii)

No

b

If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?

3b

4

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

Part VI

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

Description of investment	(a) Cost or other basis (investment)	(b)Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		10,672,315		10,672,315
b Buildings		29,054,320	17,532,585	11,521,735
c Leasehold improvements				
d Equipment				
e Other		2,894,989	2,182,297	712,692
Total. Add lines 1a-1e (Column (d) should equal Form 990, Part X, column (B), line 10(c).)				22,906,742

Part XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements		
1	Total revenue (Form 990, Part VIII, column (A), line 12)	110,808,964
2	Total expenses (Form 990, Part IX, column (A), line 25)	217,660,014
3	Excess or (deficit) for the year Subtract line 2 from line 1	3-6,851,050
4	Net unrealized gains (losses) on investments	425,797,747
5	Donated services and use of facilities	5
6	Investment expenses	6
7	Prior period adjustments	7
8	Other (Describe in Part XIV)	8-40,940,811
9	Total adjustments (net) Add lines 4 - 8	9-15,143,064
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10-21,994,114

Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return		
1	Total revenue, gains, and other support per audited financial statements	136,077,854
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12	
a	Net unrealized gains on investments2a25,797,747	
b	Donated services and use of facilities2b	
c	Recoveries of prior year grants2c	
d	Other (Describe in Part XIV)2d-528,857	
e	Add lines 2a through 2d2e25,268,890	
3	Subtract line 2e from line 1310,808,964	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1	
a	Investment expenses not included on Form 990, Part VIII, line 7b4a	
b	Other (Describe in Part XIV)4b	
c	Add lines 4a and 4b4c0	
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)510,808,964	

Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return		
1	Total expenses and losses per audited financial statements	117,131,157
2	Amounts included on line 1 but not on Form 990, Part IX, line 25	
a	Donated services and use of facilities2a	
b	Prior year adjustments2b0	
c	Other losses2c	
d	Other (Describe in Part XIV)2d-528,857	
e	Add lines 2a through 2d2e-528,857	
3	Subtract line 2e from line 1317,660,014	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	
a	Investment expenses not included on Form 990, Part VIII, line 7b4a	
b	Other (Describe in Part XIV)4b	
c	Add lines 4a and 4b4c0	
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)517,660,014	

Part XIV Supplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information.

Identifier	Return Reference	Explanation
Part V, Line 4	Description of Intended Use of Endowment Funds	EARNINGS FROM ENDOWMENT FUNDS ARE EXPENDED TO FUND THE ORGANIZATION'S PROGRAMS IN ACCORDANCE WITH THE ENDOWMENT'S PURPOSE
Part XI, Line 8 - Other Adjustments		PRIOR PERIOD ADJUSTMENT - UNREALIZED LOSS ON INVESTMENTS -24147624 PRIOR YEARS' DEPRECIATION ON REAL ESTATE -16793187
		SCHEDULE D PART XII LINE 2D AMOUNT REPRESENTS EXPENSES REPORTED ON FORM 990 PAGE 9, LINE 10B COST OF GOODS SOLD \$(16,192) PAGE 10, LINE 11F PORTFOLIO MANAGEMNT FEE 545,049
		SCHEDULE D PART XIII LINE 2D AMOUNT REPRESENTS EXPENSES REPORTED ON FORM 990 PAGE 9, LINE 10B COST OF GOODS SOLD \$(16,192) PAGE 10, LINE 11F PORTFOLIO MANAGEMNT FEE 545,049

OMB No 1545-0047

Open to Public Inspection

13-5600421

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

Schedule F (Form 990) 2009

[illegible]**Schedule F (Form 990) 2009**

Part III

Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16.
Use Schedule F-1 (Form 990) if additional space is needed.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
CULTURAL	RUSSIA AND NEWLY INDEPENDENT STATES	2	27,870				
HUMANITARIAN	SOUTH AMERICA	1	26,000				
CULTURAL	EUROPE	1	15,820				

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

[illegible]

Schedule I
(Form 990)

Department of the Treasury
Internal Revenue Service

Name of the organization
ARMENIAN GENERAL BENEVOLENT UNION

Grants and Other Assistance to Organizations,
Governments and Individuals in the United States

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

OMB No 1545-0047

2009

Open to Public
Inspection

Employer identification number
13-5600421

Part I

General Information on Grants and Assistance

- 1

Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?

☒ Yes ☐ No
- 2

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

Part II

Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to 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 or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
See Additional Data Table							

2

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

12

3

Enter total number of other organizations

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

(a)Type of grant or assistance	(b)Number of recipients	(c)Amount of cash grant	(d)Amount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
EDUCATIONAL SCHOLARSHIPS		13,500			
See Additional Data Table					

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

[illegible]

Schedule J
(Form 990)

Compensation Information

OMB No 1545-0047

2009

Open to Public Inspection

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

▶ Complete if the organization answered "Yes" to Form 990, Part IV, question 23.

▶ Attach to Form 990. ▶ See separate instructions.

Name of the organization ARMENIAN GENERAL BENEVOLENT UNION	Employer identification number 13-5600421
---	--

Part I

Questions Regarding Compensation

		Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items		
	☐ First-class or charter travel ☐ Travel for companions ☐ Tax idemnification and gross-up payments ☐ Discretionary spending account ☐ Housing allowance or residence for personal use ☐ Payments for business use of personal residence ☐ Health or social club dues or initiation fees ☐ Personal services (e g , maid, chauffeur, chef)		
b	If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all the expenses described above? If "No," complete Part III to explain	1b	
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	2	
3	Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director Check all that apply		
	☐ Compensation committee ☐ Independent compensation consultant ☐ Form 990 of other organizations ☐ Written employment contract ☐ Compensation survey or study ☐ Approval by the board or compensation committee		
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization		
a	Receive a severance payment or change-of-control payment?	4a	No
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b	No
c	Participate in, or receive payment from, an equity-based compensation arrangement?	4c	No
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III		
	Only 501(c)(3) and 501(c)(4) organizations only must complete lines 5-9.		
5	For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of		
a	The organization?	5a	No
b	Any related organization?	5b	No
	If "Yes," to line 5a or 5b, describe in Part III		
6	For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of		
a	The organization?	6a	No
b	Any related organization?	6b	No
	If "Yes," to line 6a or 6b, describe in Part III		
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III	7	No
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regs section 53 4958-4(a)(3)? If "Yes," describe in Part III	8	No
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?	9	

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

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

[illegible]

Part III **Supplemental Information**

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

Identifier	Return Reference	Explanation
------------	------------------	-------------

SCHEDULE M
(Form 990)

NonCash Contributions

OMB No 1545-0047

2009

Open to Public Inspection

►Complete if the organization answered "Yes" on Form 990, Part IV, lines 29 or 30.
► Attach to Form 990.

Name of the organization
ARMENIAN GENERAL BENEVOLENT UNION

Employer identification number
13-5600421

Part I

Types of Property

	(a) Check if applicable	(b) Number of Contributions	(c) Revenues reported on Form 990, Part VIII, line 1g	(d) Method 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 Intellectual property				
9 Securities—Publicly traded	X	6	426,436	FAIR MARKET VALUE
10 Securities—Closely held stock				
11 Securities—Partnership, LLC, or trust interests				
12 Securities—Miscellaneous				
13 Qualified conservation contribution—Historic structures				
14 Qualified conservation contribution—Other				
15 Real estate—Residential				
16 Real estate—Commercial				
17 Real estate—Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ► ()				
26 Other ► ()				
27 Other ► ()				
28 Other ► ()				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement29

30a During the year, did the organization receive by contribution any property reported in Part I, lines 1-28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?

30a

Yes

No

b If "Yes," describe the arrangement in Part II

31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?

31

Yes

No

32a Does the organization hire or use third parties or related organizations to solicit, process, or sell non-cash contributions?

32a

Yes

No

b If "Yes," describe in Part II

33 If the organization did not report revenues in column (c) for a type of property for which column (a) is checked, describe in Part II

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

Cat No 51227J

Schedule M (Form 990) 2009

Part II

Supplemental Information. Complete this part to provide the information required by Part I, lines 30b, 32b, and 33. Also complete this part for any additional information.

Identifier	Return Reference	Explanation
------------	------------------	-------------

SCHEDULE O
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990

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

OMB No 1545-0047

2009

Open to Public
Inspection

Name of the organization
ARMENIAN GENERAL BENEVOLENT UNION

Employer identification number
13-5600421

Identifier	Return Reference	Explanation
Form 990, Part VI, Section A, line 2		MEMBERS OF THE BOARD ARE RELATED AS FOLLOWS, TRUSTEES DO NOT HAVE VOTING RIGHTS VASKEN YACOUBIAN (DIRECTOR) - NEPHEW AND KARNIG YACOUBIAN (TRUSTEE)- UNCLE YERVANT DEMIRJIAN (DIRECTOR) - SON AND SARKIS DEMIRDJIAN (TRUSTEE) - FATHER RICHARD MANOOGIAN (TRUSTEE) AND LOUISE SIMONE (TRUSTEE) - SIBLINGS LEVON NAZARIAN (DIRECTOR) - SON AND NAZAR NAZARIAN (TRUSTEE) - FATHER
Form 990, Part VI, Section A, line 6		ANY PERSON OF ARMENIAN EXTRACTION IN ANY PART OF THE WORLD WHO SUBSCRIBES TO THE PURPOSES OF THE ORGANIZATION, AGREES TO ABIDE BY THE CERTIFICATE OF INCORPORATION AND BY- LAWS IS ELIGIBLE TO BECOME A MEMBER
Form 990, Part VI, Section A, line 7a		A MEMBER WHO PAYS MEMBERSHIP DUES AND HAS BEEN A MEMBER FOR A PERIOD OF AT LEAST ONE YEAR IS ENTITLED TO VOTE AT ANY MEETING OF THE CHAPTER TO WHICH HE BELONGS AND TO HOLD OFFICE THEREIN
Form 990, Part VI, Section B, line 11		THE OFFICERS OF THE ORGANIZATION REVIEWED A DRAFT OF THE 990 PRIOR TO FILING
Form 990, Part VI, Section B, line 12		THE ORGANIZATION IS CURRENTLY DEVELOPING A CONFLICT OF INTEREST POLICY, WHISTLEBLOWER POLICY AND DOCUMENT RETENTION AND DESTRUCTION POLICY FOR IMPLEMENTATION
Form 990, Part VI, Section B, line 15		MEMBERS OF THE ORGANIZATION'S EXECUTIVE COMMITTEE ARE NOT COMPENSATED COMPENSATION FOR TOP MANAGEMENT OFFICIALS IS DETERMINED BY THE EXECUTIVE COMMITTEE MEETINGS TO DISCUSS THE DETERMINATION OF COMPENSATION ARE DOCUMENTED
Form 990, Part VI, Section C, line 18		THE ORGANIZATION MAKES ITS 990 AVAILABLE FOR PUBLIC INSPECTION ON THE GUIDESTAR WEBSITE
Form 990, Part VI, Section C, line 19		THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST

Identifier	Return Reference	Explanation
	AGBU WORLD WIDE ACTIVITIES	Background The Armenian General Benevolent Union (AGBU) was founded in 1906 It is the oldest and largest Armenian non-profit organization in the world Headquartered in New York City, it maintains operations in 26 countries, spanning 6 continents It concentrates its activities in educational, cultural, humanitarian and youth programs and serves 400,000 Armenian worldwide annually with its outreach programs Programs AGBU educational programs encompass schools in 12 countries These programs include Saturday language schools, fully accredited programs in the U S for grades pre-K through High School and schools abroad, and the American University of Armenia It has active scholarship programs for college and graduate students worldwide Its cultural programs include support of orchestras, dance ensembles, theater, art, literary and music groups and events throughout the world Its humanitarian programs include dining centers, medical facilities, children centers and support of religious programs and education Its youth programs encompass a diverse range of activities It has 39 Young Professional groups worldwide AGBU supports summer internship programs (New York, Paris and Yerevan) where international youth work in selected professions The AGBU Generation Next program provides mentoring to youth in southern California There are summer camps in the U S and Europe, a chess program in Armenia, sports teams, athletic competitions, and scouting programs around the world Oversight by AGBU Central Board AGBU encompasses a broad scope of operations The AGBU Central Board reviews and monitors its districts, chapters and schools to insure their programs and operations remain relevant and properly service the needs of the local community while adhering to the well-established ideals and principals of conduct of AGBU Financial The basic Form 990 is not required to report revenues, expenses and assets of the non-U S AGBU entities Therefore, additional information is provided herein to present a more complete financial overview of the entire AGBU (U S and non-U S) operations on a consolidated basis Many of the AGBU districts, chapters and schools outside of the U S generate revenue to sustain their local operations by local fundraising, donations, grants, tuitions, fees and other income On a consolidated basis, in 2009 the AGBU worldwide Total Revenues, Total Expenses, Total Assets and Total Net Assets would be represented as follows U S FORM 990 NON U S CONSOLIDATED TOTAL TOTAL REVENUES \$ 10,808,964 \$ 53,185,045 \$ 63,994,009 TOTAL EXPENSES \$ 17,660,014 \$ 18,057,760 \$ 35,717,774 TOTAL ASSETS \$ 184,883,157 \$ 147,149,012 \$ 332,032,169 TOTAL NET ASSETS \$ 183,806,538 \$ 142,342,006 \$ 326,148,544

Related Organizations and Unrelated Partnerships

2009

Open to Public Inspection

▶ **Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.**
▶ **Attach to Form 990.** ▶ **See separate instructions.**

Employer identification number

13-5600421

Part I Identification of Disregarded Entities (Complete if the organization answered "Yes" on Form 990, Part IV, line 33.)

(f)
Direct controlling
entity

Part II Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.)

(f)
Direct controlling
entity

See Additional Data Table

Part III

Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?	
							Yes	No		Yes	No

Part IV

Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership
---	-------------------------	---	-------------------------------------	--	---------------------------------	--	--------------------------------

Part V

Transactions With Related Organizations (Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35, or 36.)

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

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

a Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity

b Gift, grant, or capital contribution to other organization(s)

c Gift, grant, or capital contribution from other organization(s)

d Loans or loan guarantees to or for other organization(s)

e Loans or loan guarantees by other organization(s)

f Sale of assets to other organization(s)

g Purchase of assets from other organization(s)

h Exchange of assets

i Lease of facilities, equipment, or other assets to other organization(s)

j Lease of facilities, equipment, or other assets from other organization(s)

k Performance of services or membership or fundraising solicitations for other organization(s)

l Performance of services or membership or fundraising solicitations by other organization(s)

m Sharing of facilities, equipment, mailing lists, or other assets

n Sharing of paid employees

o Reimbursement paid to other organization for expenses

p Reimbursement paid by other organization for expenses

q Other transfer of cash or property to other organization(s)

r Other transfer of cash or property from other organization(s)

Yes

No

1a

1b

1c

1d

1e

1f

1g

1h

1i

1j

1k

1l

1m

1n

1o

1p

1q

1r

No

No

No

No

No

No

No

No

No

No

No

No

No

No

No

No

No

No

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds

	(a) Name of other organization	(b) Transaction type(a-r)	(c) Amount involved
(1)	See Additional Data Table		
(2)			
(3)			
(4)			
(5)			
(6)			

Schedule R (Form 990) 2009

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

[illegible]

Software ID:

Software Version:

EIN: 13-5600421

Name: ARMENIAN GENERAL BENEVOLENT UNION

Form 990, Schedule R, Part II - Identification of Related Tax-Exempt Organizations

(a) Name, address, and EIN of related organization	(b) Primary Activity	(c) Legal Domicile (State or Foreign Country)	(d) Exempt Code section	(e) Public charity status (if 501(c)(3))	(f) Direct Controlling Entity
AGBU MANOOGIAN DEMIRDJIAN SCHOOL 6844 OAKDALE AVENUE CANOGA PARK, CA91306 95-3042495	EDUCATION, humanitarian, & cultural	CA	501(C)(3)	509(a)(2)	
agbu cordoba chapter ugab - avendia patria 921 5000 cordoba AR	EDUCATION, humanitarian, & cultural	AR			
union general armeNIA DE BENEFICENCIA ARMENIA 1322 1414 BUENOS AIRES, ARGENTINA AR	EDUCATION, humanitarian, & cultural	AR			
alexander primary school CORNER THUDDUNGRA AND NAMBA ROADS DUFYS FORESET, N S W 2084 AS	EDUCATION, humanitarian, & cultural	AS			
agbu parekordzagan plovdiv 158 6th ix blvd 4th flr apt 16 plovdiv BU	EDUCATION, humanitarian, & cultural	BU			
agbu sofia chapter 60 yarloslav vechin str bl 9 apt sofia 1407 BU	EDUCATION, humanitarian, & cultural	BU			
agbu armen ontariozaroukian school 903 progress ave scarborough, ontario m1g3t5 CA	EDUCATION, humanitarian, & cultural	CA			
agbu iraq al riad avenue 910 bldg 4 road baghdad IZ	EDUCATION, humanitarian, & cultural	IZ			
agbu district committee of lebanon demirdjian center autostrade dbaye naccash exit, antelias LE	EDUCATION, humanitarian, & cultural	LE			
colegio y liceo nubarian - alex manoogian 2850 avendia agraciada montevideo UY	EDUCATION, humanitarian, & cultural	UY			
AGBU OFFICE PROJECTS - YEREVAN 9 ALEX MANOOGIAN STREET YEREVAN AM	EDUCATION, humanitarian, & cultural	AM			
AGBU VATCHE & TAMAR MANOUKIAN HIGH SCHOOL 2495 E MOUNTAIN STREET PASADENA, CA91104	EDUCATION, humanitarian, & cultural	CA			
ARMENIAN GENERAL BENEVOLENT UNION LONDON TRUST 10-12 Russell Square LONDON GB	EDUCATION, humanitarian, & cultural	GB			
Ecole Armen Quebec de l'UGAB AGBU Armen Quebec-Alex Manoogian Sc Ville St Laurent, ontario CA	EDUCATION, humanitarian, & cultural	CA			
Union Generale Armenienne De Bienfaisance 11 Square Alboni PARIS FR	EDUCATION, humanitarian, & cultural	FR			

Form 990, Schedule R, Part V - Transactions With Related Organizations

(a) Name of other organization		(b) Transaction type(a-r)	(c) Amount Involved (\$)
(1)	AGBU Parekordzagan Plovdiv	B	14,000
(2)	AGBU Alexander Primary School	B	113,789
(3)	AGBU Iraq	B	6,000
(4)	AGBU Manoogian-Demirdjian School	B	471,699
(5)	AGBU Sofia Chapter	B	24,000
(6)	AGBU Vatche & Tamar Manoukian High School	B	321,677
(7)	AGBU-Armen Ontario	B	87,089
(8)	AGBU-Cordoba Chapter	B	14,000
(9)	AGBU-District Committee of Lebanon	B	749,327
(10)	Ecole Armen Quebec De L'UGAB	B	770,925
(11)	Nubarian Manoogian School Uruguay	B	460,668
(12)	Union General Armenia De Beneficencia	B	441,232
(13)	Union Generale Armenienne de Bienfaisance	B	423,961
(14)	agbu yerevan office	B	638,808

Additional Data

Software ID:
Software Version:
EIN: 13-5600421
Name: ARMENIAN GENERAL BENEVOLENT UNION

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)

4d. Other program services				
(Code RELIGIOUS	) (Expenses \$	2,015,188	including grants of \$	2,095,667) (Revenue \$)

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
HIS HOLINESS KAREKIN II HONORARY MEMBER	5 00	X						0	0	0
RUBEN KECHICHIAN MEMBER	5 00	X						0	0	0
ARIS ATAMIAN MEMBER	5 00	X						0	0	0
LEVON KEBABDJIAN MEMBER	5 00	X						0	0	0
VAHE GABRACHE MEMBER	5 00	X						0	0	0
VASKEN YACOUBIAN MEMBER	5 00	X						0	0	0
M MICHAEL ANSOUR MEMBER	5 00	X						0	0	0
CAROL BAGDASARIAN ASLANI MEMBER	5 00	X						0	0	0
JOSEPH BASRALIAN MEMBER	5 00	X						0	0	0
YERVANT DEMIRJIAN MEMBER	5 00	X						0	0	0
NAZERETH FESTEKGIAN MEMBER	5 00	X						0	0	0
ARDA NAZERIAN HARATUNIAN MEMBER	5 00	X						0	0	0
SARKIS JEBEJIAN MEMBER	5 00	X						0	0	0
LEVON NAZARIAN MEMBER	5 00	X						0	0	0
SINAN SINANIAN MEMBER	5 00	X						0	0	0
DICKRAN TEVRIZIAN MEMBER	5 00	X						0	0	0
YERVANT ZORIAN MEMBER	5 00	X						0	0	0
BARRY ZORTHIAN DIRECTOR EMERITUS	5 00	X						0	0	0
SARKIS DEMIRDJIAN TRUSTEE	5 00	X						0	0	0
RICHARD MANOOGIAN TRUSTEE	5 00	X						0	0	0
NAZAR NAZARIAN TRUSTEE	5 00	X						0	0	0
LOUISE MANOOGIAN SIMONE TRUSTEE	5 00	X						0	0	0
KARNIG YACOUBIAN TRUSTEE	5 00	X						0	0	0
JOHN CHERKEZIAN CHIEF OPERATING OFFICER	40 00			X		X		247,411	0	7,350
BERGE SETRAKIAN PRESIDENT	5 00			X				0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
ARSHAVIR GUNDJIAN VICE PRESIDENT	5 00			X				0	0	0
SAM SIMONIAN TREASURER	5 00			X				0	0	0
BERGE PAPA ZIAN SECRETARY	5 00			X				0	0	0
ANI ANSERIAN DIRECTOR	40 00					X		132,545	0	3,976
BEDROS PIANDARIAN MANAGER	40 00					X		113,447	0	0

Form 990, Part IX - Statement of Functional Expenses - 24a - 24e Other Expenses

<i>Do not include amounts reported on line 6b, 8b, 9b, and 10b of Part VIII.</i>	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
ACTIVITY EXPENSES	1,096,410	1,096,410		
PUBLICATIONS	215,237	210,813	4,424	
CAMP FOOD & MEALS	134,636	120,929	13,707	
MISCELLANEOUS EXPENSE	79,474	42,170	63,146	-25,842
INTERNET, TELEPHONE, UT	64,550	28,062	36,488	

Additional Data

Software ID:

Software Version:

EIN: 13-5600421

Name: ARMENIAN GENERAL BENEVOLENT UNION

Form 990 Schedule F Part II - Grants or Entities Outside The United States

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		East Asia & the Pacific	Educational	113,789				
		Europe	Cultural	14,000				
		Europe	Cultural	24,000				
		Europe	Educational	5,197				
		Europe	Humanitarian	18,041				
		Europe	Cultural	368,941				
		Europe	Educational	55,021				
		Middle East & North Africa	Cultural	472,971				
		Middle East & North Africa	Educational	233,470				
		Middle East & North Africa	General Purpose	5,150				
		Middle East & North Africa	Humanitarian	37,736				
		Middle East & North Africa	Cultural	6,000				
		Middle East & North Africa	Religious	18,682				
		Middle East & North Africa	Educational	20,000				
		North America	Cultural	6,085				
		North America	Educational	87,089				
		North America	Educational	770,925				
		Russia and Newly Independent States	Educational	15,278				
		Russia and Newly Independent States	Humanitarian	90,215				
		Russia and Newly Independent States	Cultural	520,082				
		Russia and Newly Independent States	Educational	13,232				
		Russia and Newly Independent States	Cultural	175,000				
		Russia and Newly Independent States	Cultural	525,000				
		Russia and Newly Independent States	Religious	2,076,985				
		Russia and Newly Independent States	Humanitarian	648,150				
		Russia and Newly Independent States	Humanitarian	15,760				
		South America	Cultural	14,000				
		South America	Educational	225,782				
		South America	Cultural	33,550				
		South America	Educational	407,682				

(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Russia and Newly Independent States	CULTURAL	30,598				
		Russia and Newly Independent States	EDUCATIONAL	410,000				
		Russia and Newly Independent States	HUMANITARIAN	1,562,350				

Software ID:

Software Version:

EIN: 13-5600421

Name: ARMENIAN GENERAL BENEVOLENT UNION

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Near East Foundation90 Broad Street 15th Floor New York, NY 10004	13-1624114		10,000				CULTURAL
Americans for ArtsakhNKR Office 1140 19th Str NW Washington, DC 20036	11-3708279		10,140				CULTURAL
Lebanese American Foundation Inc1800 Century Park East Suite 600 Los Angeles, CA 90067	95-4766317		25,000				CULTURAL
AGBU Manoogian-Demirdjian School6844 Oakdale Avenue Canoga Park, CA 91306	95-3042495		471,699				EDUCATIONAL
AGBU Vatche & Tamar Manoukian High School2495 E Mountain Street Pasadena, CA 91104	95-3042495		321,677				EDUCATIONAL
Yale University180 York Street New Haven, CT 06511	06-0646973		7,500				EDUCATIONAL
UC RegentsDavid Geffen School of Medecine at UCLA 12-109 CHS Box 957020 Los Angeles, CA 90095	95-6006143		9,000				EDUCATIONAL
Thomas Jefferson University Univ Office of Fin Aid 1025 Walnut St Philadelphia, PA 19107	23-1352651		10,000				EDUCATIONAL
Holy Martyrs Armenian Day School209-15 Horace Harding Blvd Bayside, NY 11364	11-2492685		10,100				EDUCATIONAL
Alfred & Marguerite Hovsepian School3325 N Glendale Burbank, CA 91504	95-2583160		17,000				EDUCATIONAL

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TCA Arshag Dickranian Armenian School1200 N Cahuenga Blvd Los Angeles, CA 90038	95-3671737		20,000				EDUCATIONAL
American University of Armenia Corporation Lakeside Dr 13th Floor Oakland, CA 94612	94-3140704		414,120				EDUCATIONAL
United Armenian Fund1101 N Pacific Ave Suite 204 Glendale, CA 91202	95-4485698		22,000				HUMANITARIAN