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Form 990

Return of Organization Exempt From Income Tax

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

OMB No. 1545-0047

2009

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

Form 990 header section containing organization name (BARNARD COLLEGE), address (3009 BROADWAY, NEW YORK, NY 10027), principal officer (Gregory N Brown), and other identifying information.

Part I Summary

Summary table with columns for Revenue, Expenses, and Net Assets or Fund Balances. Rows include mission statement, revenue breakdown, and expense breakdown for the current year and prior year.

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete.

Sign Here

Signature of officer: Gregory N Brown, Chief Operating Officer

Date: 13-23-12

Paid Preparer's Use Only

Preparer's information section including signature, date, identifying number, and firm's name.

May the IRS discuss this return with the preparer shown above? (see instructions) Yes No

For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.

Cat. No. 11282Y

Form 990 (2009)

Cis Image - Do Not Correspond for Signature

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**Part III Statement of Program Service Accomplishments**

**1** Briefly describe the organization's mission:

See Schedule O for Barnard College's mission statement.

**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 \$ 97,832,909 including grants of \$ 26,314,989 ) (Revenue \$ 88,140,358 )

Post-Secondary Education: A Barnard education provides women with the tools and techniques needed to think critically and act effectively in the world today. It fosters a respect for learning, an aptitude for analysis, and a competence in the demanding disciplines of the liberal arts and sciences. By virtue of its special mission and location, Barnard women strengthen their insight into interconnected worlds of knowledge and experience and bolster their confidence in forging ahead with their ideas, well-prepared and unafraid.

**4b** (Code: ) (Expenses \$ 27,751,606 including grants of \$ 0 ) (Revenue \$ 25,437,315 )

Auxiliary Enterprises - Provides services to students for a fee that is directly related to, although not necessarily equal to, the cost of the services. This category includes Housing, Dining Services, Health and Counseling Services, and Summer Program.

**4c** (Code: ) (Expenses \$ including grants of \$ ) (Revenue \$ )

**4d** Other program services. (Describe in Schedule O.)

(Expenses \$ 0 including grants of \$ 0 ) (Revenue \$ 0 )

**4e** Total program service expenses ▶ 125,584,515

**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	✓	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	✓	
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		✓
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II		✓
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		
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		✓
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		✓
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	✓	
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		✓
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	✓	
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	✓	
	• 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.	✓	
12A	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional.	Yes	No
			✓
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	✓	
14a	Did the organization maintain an office, employees, or agents outside of the United States?		✓
14b	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	✓	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Part II		✓
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Part III	✓	
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	✓	
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	✓	
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		✓
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H		✓

**Part IV Checklist of Required Schedules (continued)**

	Yes	No
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? If "Yes," complete Schedule I, Parts I and II. . . . .		✓
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? If "Yes," complete Schedule I, Parts I and III. . . . .	✓	
23 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 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, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25. . . . .	✓	
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 any tax-exempt bonds? . . . . .		✓
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? . . . . .		✓
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. . . . .		✓
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 Schedule L, Part I. . . . .		✓
26 Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II. . . . .		✓
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? If "Yes," complete Schedule L, Part III. . . . .		✓
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? If "Yes," complete Schedule L, Part IV. . . . .		✓
b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV. . . . .		✓
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. . . . .		✓
29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M. . . . .	✓	
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M. . . . .		✓
31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I. . . . .		✓
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II. . . . .		✓
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. . . . .		✓
34 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1. . . . .		✓
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. . . . .		✓
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2. . . . .		✓
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI. . . . .		✓
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. . . . .	✓	

**Part V Statements Regarding Other IRS Filings and Tax Compliance**

		Yes	No		
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable	1a	131925		
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, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a	2570		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? <i>Note.</i> 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	✓		
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	✓		
b	If "Yes," enter the name of the foreign country: <b>See Schedule O, Statement 1</b>				
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		✓	
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		✓	
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		✓	
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b			
<b>7 Organizations that may receive deductible contributions under section 170(c).</b>					
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	✓		
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		✓	
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		✓	
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		✓	
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			
<b>8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.</b> 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			
<b>9 Sponsoring organizations maintaining donor advised funds.</b>					
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			
<b>10 Section 501(c)(7) organizations.</b> 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			
<b>11 Section 501(c)(12) organizations.</b> 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			
<b>12a Section 4947(a)(1) non-exempt charitable trusts.</b> Is the organization filing Form 990 in lieu of Form 1041?					
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 line 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 . . . . .	27	
b	Enter the number of voting members that are independent . . . . .	26	
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? . . . . .	<input checked="" type="checkbox"/>	
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? . . . . .		<input checked="" type="checkbox"/>
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed? . . . . .		<input checked="" type="checkbox"/>
5	Did the organization become aware during the year of a material diversion of the organization's assets? . . . . .		<input checked="" type="checkbox"/>
6	Does the organization have members or stockholders? . . . . .		<input checked="" type="checkbox"/>
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body? . . . . .		<input checked="" type="checkbox"/>
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons? . . . . .		<input checked="" type="checkbox"/>
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a	The governing body? . . . . .	<input checked="" type="checkbox"/>	
b	Each committee with authority to act on behalf of the governing body? . . . . .	<input checked="" type="checkbox"/>	
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 . . . . .		<input checked="" type="checkbox"/>

**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? . . . . .		<input checked="" type="checkbox"/>
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? . . . . .		
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form? . . . . .	<input checked="" type="checkbox"/>	
11A	Describe in Schedule O the process, if any, used by the organization to review this Form 990.		
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13 . . . . .	<input checked="" type="checkbox"/>	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts? . . . . .	<input checked="" type="checkbox"/>	
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done . . . . .	<input checked="" type="checkbox"/>	
13	Does the organization have a written whistleblower policy? . . . . .	<input checked="" type="checkbox"/>	
14	Does the organization have a written document retention and destruction policy? . . . . .	<input checked="" type="checkbox"/>	
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 . . . . .	<input checked="" type="checkbox"/>	
b	Other officers or key employees of the organization . . . . .	<input checked="" type="checkbox"/>	
	If "Yes" to line 15a or 15b, 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? . . . . .		<input checked="" type="checkbox"/>
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? . . . . .		

**Section C. Disclosure**

17 List the states with which a copy of this Form 990 is required to be filed ▶

18 Section 6104 requires an organization to make its Forms 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.

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization: ▶ Eileen M DiBenedetto, (212)854-7732  
 3009 Broadway, New York, NY 10027

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

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization'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 employee."
- 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 not compensate any current officer, director, or trustee.

(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			
Rosa Alonso Trustee	5	✓					0	0	0	
Judith E Boies Trustee	5	✓					0	0	0	
Laura Jacobs Blankfein Trustee	5	✓					0	0	0	
Lee C Bollinger Ex-Officio	5	✓					0	0	0	
Jolyne Caruso Fitzgerald Chair	5	✓					0	0	0	
Lois G Champy Trustee	5	✓					0	0	0	
Dina Deluca Chartouni Trustee	5	✓					0	0	0	
Lisa S Cohen Trustee	5	✓					0	0	0	
James M Dow Trustee	5	✓					0	0	0	
Binta Niambi Brown Trustee	5	✓					0	0	0	
Joan Frellich Trustee	5	✓					0	0	0	
Nancy A Garvey Trustee	5	✓					0	0	0	
Alison Estabrook Trustee	5	✓					0	0	0	
Linda Fayne Levinson Trustee	5	✓					0	0	0	
Cheryl G Milstein Trustee	5	✓					0	0	0	
Jeanine Plottel Trustee	5	✓					0	0	0	

**Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)**

(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			
Anna Quindlen Trustee	5	<input checked="" type="checkbox"/>						0	0	0
William R Reid Trustee	5	<input checked="" type="checkbox"/>						0	0	0
Frances I Sadler Trustee	5	<input checked="" type="checkbox"/>						0	0	0
Ravi Singh Trustee	5	<input checked="" type="checkbox"/>						0	0	0
Cynthia Stivers Trustee	5	<input checked="" type="checkbox"/>						0	0	0
Maureen Strafford Trustee	5	<input checked="" type="checkbox"/>						0	0	0
Zahava B Straus Trustee	5	<input checked="" type="checkbox"/>						0	0	0
Diana T Vagelos Vice Chair	5	<input checked="" type="checkbox"/>						0	0	0
Ronald D Liebowitz Trustee	5	<input checked="" type="checkbox"/>						0	0	0
Eileen Lee Moy Trustee	5	<input checked="" type="checkbox"/>						0	0	0
Hilda Applbaum Trustee	5	<input checked="" type="checkbox"/>						0	0	0
Debora Spar Ex-Officio and President	40		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>				411,862	0	84,098
Continued On Schedule J2										
<b>1b Total</b>								<b>3,035,229</b>	<b>0</b>	<b>666,778</b>

**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 ▶ 113

	Yes	No
<b>3</b> Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>4</b> 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? If "Yes," complete Schedule J for such individual.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>5</b> Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? If "Yes," complete Schedule J for such person	<input type="checkbox"/>	<input checked="" type="checkbox"/>

**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
Weiss Manfredi Architects, 130 West 29th Street, New York, NY 10012	Architectural Service	874,380
KPMG LLP, Dept 0511, PO Box 120001, Dallas, TX 75312-0511	Auditing Service	179,100
Putney Twombly Hall & Hirson, 521 Fifth Avenue, New York, NY 10175	Legal Service	147,376
Rosenberg and Estlis PC, 733 Third Avenue, New York, NY 10017	Legal Service	107,680

**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 ▶ 4

Part VIII Statement of Revenue				(A)	(B)	(C)	(D)	
				Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512, 513, or 514	
Contributions, gifts, grants and other similar amounts	1a	Federated campaigns	1a	0				
	b	Membership dues	1b	0				
	c	Fundraising events	1c	1,694,098				
	d	Related organizations	1d	0				
	e	Government grants (contributions)	1e	4,908,011				
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	15,741,236				
	g	Noncash contributions included in lines 1a-1f: \$		1,595,971				
	h	Total. Add lines 1a-1f		22,343,345				
Program Service Revenue				Business Code				
	2a	Tuition and Fees		900099	87,863,651	87,863,651	0	
	b	Sales and Services Auxillary Enterprise		900099	25,437,315	25,437,315	0	
	c	Toddler Center		900099	276,707	276,707	0	
	d							
	e							
	f	All other program service revenue			0	0	0	
g	Total. Add lines 2a-2f			113,577,673				
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)			1,035,213	1,035,213	0	
	4	Income from investment of tax-exempt bond proceeds			28,734	28,734	0	
	5	Royalties			0	0	0	
	6a	Gross Rents	(i) Real	(ii) Personal				
					1,706,437	0		
					1,085,308	0		
	b	Less: rental expenses			621,129	0		
	c	Rental income or (loss)						
	d	Net rental income or (loss)			621,129	621,129	0	
	7a	Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other				
					52,890,238	0		
					50,743,644	0		
					2,146,594	0		
	b	Less: cost or other basis and sales expenses						
	c	Gain or (loss)			2,146,594	2,146,594	0	
d	Net gain or (loss)							
8a	Gross income from fundraising events (not including \$1,694,098 of contributions reported on line 1c). See Part IV, line 18	a		64,050				
b	Less: direct expenses	b		111,622				
c	Net income or (loss) from fundraising events			-47,572	-47,572	0		
9a	Gross income from gaming activities. See Part IV, line 19	a		0				
		b	Less: direct expenses	b		0		
		c	Net income or (loss) from gaming activities			0	0	0
10a	Gross sales of inventory, less returns and allowances	a		0				
		b	Less: cost of goods sold	b		0		
		c	Net income or (loss) from sales of inventory			0	0	0
Miscellaneous Revenue				Business Code				
11a	Alumnae Reunion		900099	116,630	116,630	0		
b	Admin. Cost Allowance		900099	46,534	46,534	0		
c	Legal/Insurance Settlements		900099	336,994	336,994	0		
d	All other revenue			335,410	335,410	0		
e	Total. Add lines 11a-11d			835,568				
12	Total revenue. See instructions.			140,540,684	116,197,339	0		

**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).

<i>Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.</i>		(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	0	0		
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22	25,983,869	25,983,869		
3	Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16	331,120	331,120		
4	Benefits paid to or for members	0	0		
5	Compensation of current officers, directors, trustees, and key employees	2,385,986	543,386	1,561,008	281,592
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0	0	0	0
7	Other salaries and wages	48,621,611	41,568,832	4,475,521	2,577,258
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	5,428,496	4,551,414	599,624	277,458
9	Other employee benefits	8,153,164	6,986,300	687,711	479,153
10	Payroll taxes	4,320,840	3,556,635	532,804	231,401
11	Fees for services (non-employees):				
a	Management	0	0	0	0
b	Legal	232,566	24,926	207,640	0
c	Accounting	252,440	0	252,440	0
d	Lobbying	0	0	0	0
e	Professional fundraising services. See Part IV, line 17	170,645			170,645
f	Investment management fees	671,429	0	671,429	0
g	Other	0	0	0	0
12	Advertising and promotion	0	0	0	0
13	Office expenses	4,878,143	3,136,913	1,495,373	245,857
14	Information technology	2,920,095	1,350,172	1,559,935	9,988
15	Royalties	0	0	0	0
16	Occupancy	12,838,430	11,597,861	1,169,858	70,711
17	Travel	795,371	649,694	130,936	14,741
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0	0	0	0
19	Conferences, conventions, and meetings	743,291	670,363	71,950	978
20	Interest	4,151,062	4,151,062	0	0
21	Payments to affiliates	0	0	0	0
22	Depreciation, depletion, and amortization	6,580,506	6,048,492	478,054	53,960
23	Insurance	471,076	357,993	113,083	0
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	Study Abroad	2,479,089	2,479,089	0	0
b	Student Board	4,535,917	4,535,917	0	0
c	Columbia Agreements	4,622,961	4,622,961	0	0
d	Catering	845,449	410,303	363,219	71,927
e	Consultant	1,011,161	385,750	517,782	107,629
f	All other expenses	1,745,906	1,641,463	94,235	10,208
25	Total functional expenses. Add lines 1 through 24f	145,170,623	125,584,515	14,982,602	4,603,506
26	Joint costs. Check here <input type="checkbox"/> 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) Beginning of year		(B) End of year	
<b>Assets</b>	1	Cash—non-interest-bearing . . . . .	30,358,076	1	28,290,655
	2	Savings and temporary cash investments . . . . .	0	2	0
	3	Pledges and grants receivable, net . . . . .	24,700,097	3	20,670,060
	4	Accounts receivable, net . . . . .	78,834	4	68,019
	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L . . . . .	0	5	0
	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 . . . . .	0	6	0
	7	Notes and loans receivable, net . . . . .	4,067,709	7	3,977,429
	8	Inventories for sale or use . . . . .	1,005,041	8	978,087
	9	Prepaid expenses and deferred charges . . . . .	3,110,458	9	3,024,822
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	273,324,892		
b	Less: accumulated depreciation . . . . .	121,977,093	10c	151,347,799	
<b>Liabilities</b>	11	Investments—publicly traded securities . . . . .	17,530,036	11	12,381,445
	12	Investments—other securities. See Part IV, line 11 . . . . .	155,124,686	12	179,504,792
	13	Investments—program-related. See Part IV, line 11 . . . . .	23,383,561	13	12,411,910
	14	Intangible assets . . . . .	0	14	0
	15	Other assets. See Part IV, line 11 . . . . .	2,149,713	15	3,493,442
	16	<b>Total assets.</b> Add lines 1 through 15 (must equal line 34) . . . . .	399,566,317	16	416,148,460
	17	Accounts payable and accrued expenses . . . . .	15,558,025	17	14,620,759
18	Grants payable . . . . .	2,255,229	18	2,237,949	
19	Deferred revenue . . . . .	3,738,441	19	3,868,468	
20	Tax-exempt bond liabilities . . . . .	105,447,833	20	103,265,132	
21	Escrow or custodial account liability. Complete Part IV of Schedule D . . . . .	0	21	0	
22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L . . . . .	0	22	0	
23	Secured mortgages and notes payable to unrelated third parties . . . . .	1,375,742	23	1,186,258	
24	Unsecured notes and loans payable to unrelated third parties . . . . .	0	24	0	
25	Other liabilities. Complete Part X of Schedule D . . . . .	17,683,248	25	19,437,857	
26	<b>Total liabilities.</b> Add lines 17 through 25 . . . . .	146,058,518	26	144,616,423	
<b>Net Assets or Fund Balances</b>	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.				
	27	Unrestricted net assets . . . . .	52,197,174	27	87,279,673
	28	Temporarily restricted net assets . . . . .	88,908,382	28	70,334,669
	29	Permanently restricted net assets . . . . .	112,402,243	29	113,917,695
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> 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	<b>Total net assets or fund balances . . . . .</b>	253,507,799	33	271,532,037	
34	<b>Total liabilities and net assets/fund balances . . . . .</b>	399,566,317	34	416,148,460	

**Part XI Financial Statements and Reporting**

- 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? . . .
- b Were the organization's financial statements audited by an independent accountant? . . . . .
- c If "Yes" to line 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.
- 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 separate 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? . . . . .
- 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.

	Yes	No
1		
2a		✓
2b	✓	
2c	✓	
2d		
3a	✓	
3b	✓	

**SCHEDULE A**  
**(Form 990 or 990-EZ)**

**Public Charity Status and Public Support**

OMB No. 1545-0047

**2009**

**Open to Public Inspection**

Department of the Treasury  
Internal Revenue Service

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.

Name of the organization

**BARNARD COLLEGE**

Employer identification number

**13 1628149**

**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 described in 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, 2008, 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 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?

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

h Provide the following information about the supported organization(s).

(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 US?		(vii) Amount of support
			Yes	No	Yes	No	Yes	No	
<b>Total</b>									

**Part II 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) ►	(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.") . . . . .						
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						
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) . . . . .						
6 Public support. Subtract line 5 from line 4.						

**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 . . . . .						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources . . . . .						
9 Net income from unrelated business activities, whether or not the business is regularly carried on . . . . .						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) . . . . .						
11 Total support. Add lines 7 through 10 . . . . .						
12 Gross receipts from related activities, etc. (see instructions) . . . . .					12	
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here . . . . .						<input type="checkbox"/>

**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 line 14 is 33 1/3 % or more, check this box and stop here. The organization qualifies as a publicly supported organization . . . . .		<input type="checkbox"/>
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 . . . . .		<input type="checkbox"/>
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 . . . . .		<input type="checkbox"/>
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 . . . . .		<input type="checkbox"/>
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 ►		<input type="checkbox"/>

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

**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.") . . . . .						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose . . . . .						
3 Gross receipts from activities that are not an unrelated trade or business under section 513 . . . . .						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf . . . . .						
5 The value of services or facilities furnished by a governmental unit to the organization without charge . . . . .						
6 Total. Add lines 1 through 5 . . . . .						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons . . . . .						
b Amounts 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 . . . . .						
c Add lines 7a and 7b . . . . .						
8 Public 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
9 Amounts from line 6 . . . . .						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources . . . . .						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 . . . . .						
c Add lines 10a and 10b . . . . .						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on . . . . .						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) . . . . .						
13 Total support. (Add lines 9, 10c, 11, and 12.) . . . . .						

14 First five years. If the Form 990 is for the 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**

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

**Section D. Computation of Investment Income Percentage**

17 Investment income percentage for 2009 (line 10c, column (f) divided by line 13, column (f)) . . . . .	17	%
18 Investment income percentage from 2008 Schedule A, Part III, line 17 . . . . .	18	%

19a 33 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 ▶

b 33 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 ▶

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and 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  
**BARNARD COLLEGE**

Employer identification number  
**13 : 1628149**

**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? . . . . .	<input type="checkbox"/> Yes <input type="checkbox"/> No	
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can 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? . . . . .	<input type="checkbox"/> Yes <input type="checkbox"/> 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 important land area

Protection of natural habitat       Preservation of a certified historic structure

Preservation of open space

2 Complete lines 2a through 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 Tax Year
a Total number of conservation easements . . . . .	2a
b Total acreage restricted by conservation easements . . . . .	2b
c Number of conservation easements on a certified historic structure included in (a) . . . . .	2c
d Number of conservation easements included in (c) acquired after 8/17/06 . . . . .	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax 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 section 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 . . . . . ▶ \$ . . . . . 0

b Assets included in Form 990, Part X . . . . . ▶ \$ . . . . . 0

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

- 3 Using the organization's acquisition, 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:
- |                                 | Amount |
|---------------------------------|--------|
| c Beginning balance             | 1c     |
| d Additions during the year     | 1d     |
| e Distributions during the year | 1e     |
| f Ending balance                | 1f     |
- 2a Did the organization include an amount on 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	165,305,949	212,711,700			
b Contributions	2,562,445	1,930,101			
c Net investment earnings, gains, and losses	25,699,698	-39,167,089			
d Grants or scholarships	3,297,095	5,113,537			
e Other expenditures for facilities and programs	5,584,906	4,235,462			
f Administrative expenses	671,429	819,764			
g End of year balance	184,014,662	165,305,949			

- 2 Provide the estimated percentage of the year end balance held as:
- a Board designated or quasi-endowment ▶ 24 %
  - b Permanent endowment ▶ 61 %
  - c Term endowment ▶ 15 %
- 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
- |                             | Yes | No |
|-----------------------------|-----|----|
| (i) unrelated organizations | ✓   |    |
| (ii) related organizations  |     | ✓  |
- 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	0	1,233,967		1,233,967
b Buildings	0	243,579,665	98,586,827	144,992,838
c Leasehold improvements	0	0	0	0
d Equipment	0	27,756,425	23,133,724	4,622,701
e Other	0	754,835	256,542	498,293
<b>Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).)</b>				<b>151,347,799</b>

**Part VII Investments—Other Securities.** See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
Financial derivatives	0	
Closely-held equity interests	0	
Other Private Equity / Real Estate	46,133,404	End-of-Year Market Value
Fixed Income	13,054,892	End-of-Year Market Value
Marketable Alternative (ie - Hedge Fund)	52,223,950	End-of-Year Market Value
Global Equity	50,389,957	End-of-Year Market Value
Mutual Fund	5,335,781	End-of-Year Market Value
Emerging Markets	12,366,808	End-of-Year Market Value
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 12.)	<b>179,504,792</b>	

**Part VIII Investments—Program Related.** See Form 990, Part X, line 13.

(a) Description of investment type	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
Deposit With Trustees	12,411,910	End-of-Year Market Value
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 13.)	<b>12,411,910</b>	

**Part IX Other Assets.** See Form 990, Part X, line 15.

(a) Description	(b) Book value
Accrued Interest Receivable	8,581
Other Miscellaneous Receivable	3,484,861
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 15.)	<b>3,493,442</b>

**Part X Other Liabilities.** See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Amount
Federal income taxes	0
Liability under split interest agreements	4,263,246
Postretirement benefits obligation	11,997,474
Asset retirement obligations	1,905,790
Change in value of obligation under derivative	1,271,347
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 25.)	<b>19,437,857</b>

2. FIN 48 Footnote. In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48.

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

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	140,540,684
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	145,170,623
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3	-4,629,939
4	Net unrealized gains (losses) on investments	4	22,654,177
5	Donated services and use of facilities	5	0
6	Investment expenses	6	0
7	Prior period adjustments	7	0
8	Other (Describe in Part XIV.)	8	0
9	Total adjustments (net). Add lines 4 through 8	9	22,654,177
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	10	18,024,238

**Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return**

1	Total revenue, gains, and other support per audited financial statements	1	118,081,872
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains on investments	2a	5,836,480
b	Donated services and use of facilities	2b	0
c	Recoveries of prior year grants	2c	0
d	Other (Describe in Part XIV.)	2d	0
e	Add lines 2a through 2d	2e	5,836,480
3	Subtract line 2e from line 1	3	112,245,392
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 7b	4a	0
b	Other (Describe in Part XIV.)	4b	28,295,292
c	Add lines 4a and 4b	4c	28,295,292
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	140,540,684

**Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return**

1	Total expenses and losses per audited financial statements	1	117,676,089
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	0
b	Prior year adjustments	2b	0
c	Other losses	2c	0
d	Other (Describe in Part XIV.)	2d	831,202
e	Add lines 2a through 2d	2e	831,202
3	Subtract line 2e from line 1	3	116,844,887
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 7b	4a	671,429
b	Other (Describe in Part XIV.)	4b	27,654,307
c	Add lines 4a and 4b	4c	28,325,736
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	145,170,623

**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, line 2; 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.

Schedule D, Part III, Line 1 - The College has elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art or historical treasures.

Schedule D, Part III, Line 4 - The art and historical treasures primarily consist of paintings and drawings maintained for the preservation for future generations. At June 30, 2010 the value of such assets of the College were \$101,000.

Schedule D, Part V, Line 4 - The College's endowment consists of 788 individual funds established for a variety of purposes, including both donor-restricted endowment funds and funds designated by the College to function as endowments (quasi-endowments). Annual spending from the endowment is set at 5% of the rolling three year average of the endowment's market value as of December 31st of the previous year and is approved annually by the Board of Trustees. The annual spending from the endowment for the fiscal year ended December 31, 2010 was \$8,882,001. This spending was used in accordance with donor or Board restrictions. The donor and Board

**Part XIV - Supplemental Information (Continued)**

restrictions include the financial aid, instructional support, student internships, faculty research and support, and general operations of the College. The endowment funds listed in 1a through 1g exclude perpetual trusts and pledges of \$1,308,046 at June 30, 2010. The perpetual trusts are held and administered for Barnard College by unrelated organizations.

Schedule D, Part X - The College follows the guidance of ASC 740-10, Accounting for Uncertainty in Income Taxes, which addresses the accounting for uncertainties in income taxes recognized in an enterprise's financial statements. The College utilizes a threshold for more-likely than-not for recognition and derecognition of tax positions taken or expected to be taken in a tax return. ASC 740-10 also provides related guidance on the measurement, classification, interest and penalties, and disclosures.

Schedule D, Part XII, Line 4b - Other consists of Contributions to endowment funds \$1,504,466, Contributions for plant improvements \$1,011,194, Change in value of split interest agreements \$295,845, Financial aid allowance \$26,314,989, interest income from tax exempt bonds \$28,734, Fundraising events expense (\$111,622), legal and insurance settlements \$336,994 and rental expense for non program service areas (\$1,085,308).

Schedule D, Part XIII, Line 2d - Other consists of the interest income from tax exempt bonds (\$28,734), fundraising event expense \$111,622, legal and insurance settlements of (\$336,994) and rental expense for non program services areas \$1,085,308.

Schedule D, Part XIII, Line 4b - Other consists of Financial aid allowance \$26,314,989, Change in value of obligation under derivative instrument \$157,671 and Postretirement benefit cost other than net periodic benefit cost \$1,181,647.

**SCHEDULE E  
(Form 990 or 990-EZ)**

Department of the Treasury  
Internal Revenue Service

**Schools**

▶ 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.

OMB No. 1545-0047

**2009**

Open to Public  
Inspection

Name of the organization

**BARNARD COLLEGE**

Employer identification number

**13 : 1628149**

	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? . . . . .	✓	
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? . . . . .	✓	
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 has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe. If "No," please explain. If you need more space, use Schedule O (Form 990) . . . . . Since Barnard College draws its students from a large geographic section (nationwide and worldwide), it does not publicize by newspaper or broadcast media, but includes its nondiscriminatory policy in all of its literature to students, schools and organizations.		✓
4 Does the organization maintain the following?		
a Records indicating the racial composition of the student body, faculty, and administrative staff? . . . . .	✓	
b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis? . . . . .	✓	
c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships? . . . . .	✓	
d Copies of all material used by the organization or on its behalf to solicit contributions? . . . . . If you answered "No" to any of the above, please explain. If you need more space, use Schedule O (Form 990).	✓	
5 Does the organization discriminate by race in any way with respect to:		
a Students' rights or privileges? . . . . .		✓
b Admissions policies? . . . . .		✓
c Employment of faculty or administrative staff? . . . . .		✓
d Scholarships or other financial assistance? . . . . .		✓
e Educational policies? . . . . .		✓
f Use of facilities? . . . . .		✓
g Athletic programs? . . . . .		✓
h Other extracurricular activities? . . . . . If you answered "Yes" to any of the above, please explain. If you need more space, use Schedule O (Form 990).		✓
6a Does the organization receive any financial aid or assistance from a governmental agency? . . . . .	✓	
b Has the organization's right to such aid ever been revoked or suspended? . . . . . If you answered "Yes" to either line 6a or line 6b, explain on Schedule O (Form 990). Sch O, Stmt 2		✓
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) . . . . .	✓	

Schedule F  
(Form 990)

**Statement of Activities Outside the United States**

OMB No. 1545-0047

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16.

**2009**

▶ Attach to Form 990. ▶ See separate instructions.

Open to Public Inspection

Department of the Treasury  
Internal Revenue Service

Name of the organization  
**BARNARD COLLEGE**

Employer identification number  
**13 1628149**

**Part I** General Information on Activities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 14b.

**1 For grantmakers.** 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 For grantmakers.** Describe in Part IV the organization's procedures for monitoring the use of grant funds outside the United States.

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

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
Sch F, Stmt 1					
<b>Totals</b>	<b>0</b>	<b>0</b>			<b>894,371</b>









**Part II Fundraising Events.** Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 on Form 990-EZ, line 6a. List events with gross receipts greater than \$5,000.

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
		Scholarship Gala (event type)	(event type)	(total number)	(add col. (a) through col. (c))
Revenue	<b>1</b> Gross receipts . . . . .	1,758,148			1,758,148
	<b>2</b> Less: Charitable contributions . . . . .	1,694,098			1,694,098
	<b>3</b> Gross income (line 1 minus line 2) . . . . .	64,050			64,050
Direct Expenses	<b>4</b> Cash prizes . . . . .	0			0
	<b>5</b> Noncash prizes . . . . .	0			0
	<b>6</b> Rent/facility costs . . . . .	0			0
	<b>7</b> Food and beverages . . . . .	88,126		0	88,126
	<b>8</b> Entertainment . . . . .	0		0	0
	<b>9</b> Other direct expenses . . . . .	23,496			23,496
	<b>10</b> Direct expense summary. Add lines 4 through 9 in column (d) . . . . . ▶				( 111,622 )
<b>11</b> Net income summary. Combine line 3, column (d), and line 10 . . . . . ▶				-47,572	

**Part III Gaming.** Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Revenue	<b>1</b> Gross revenue . . . . .				
Direct Expenses	<b>2</b> Cash prizes . . . . .				
	<b>3</b> Noncash prizes . . . . .				
	<b>4</b> Rent/facility costs . . . . .				
	<b>5</b> Other direct expenses . . . . .				
	<b>6</b> Volunteer labor . . . . .	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	
<b>7</b> Direct expense summary. Add lines 2 through 5 in column (d) . . . . . ▶				( )	
<b>8</b> Net gaming income summary. Combine line 1, column d, and line 7 . . . . . ▶					

	Yes	No
<b>9</b> Enter the state(s) in which the organization operates gaming activities: _____		
<b>a</b> Is the organization licensed to operate gaming activities in each of these states? . . . . .	<b>9a</b>	
<b>b</b> If "No," explain: _____		
<b>10a</b> Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? . . . . .	<b>10a</b>	
<b>b</b> If "Yes," explain: _____		
<b>11</b> Does the organization operate gaming activities with nonmembers? . . . . .	<b>11</b>	
<b>12</b> Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? . . . . .	<b>12</b>	

**13** Indicate the percentage of gaming activity operated in:

- a The organization's facility . . . . . 

13a	%
-----	---
- b An outside facility . . . . . 

13b	%
-----	---

**14** Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name ▶ .....

Address ▶ .....

**15a** Does the organization have a contract with a third party from whom the organization receives gaming revenue? . . . . .

**b** If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ ..... and the amount of gaming revenue retained by the third party ▶ \$ .....

**c** If "Yes," enter name and address of the third party:

Name ▶ .....

Address ▶ .....

**16** Gaming manager information:

Name ▶ .....

Gaming manager compensation ▶ \$ .....

Description of services provided ▶ .....

- Director/officer       Employee       Independent contractor

**17** Mandatory distributions:

**a** Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? . . . . .

**b** Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ .....

	Yes	No
13a		
13b		
14		
15a		
15b		
15c		
16		
17a		
17b		



**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 Part IV and 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
Barnard Grants for Tuition/Board Assistance	973	24,670,125			
Basic Educational Opportunity Grants (Pell)	461	1,964,094			
Federal College Work Study	327	300,871			
Supplementary Educational Opportunity Grants	184	380,391			
Higher Education Opportunity Grant	100	193,000			
Academic Competitiveness Grant	201	199,025			

(Continued on Schedule I, Part IV, Statement 1)

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

Schedule I, Part I, Line 2 - All Federal financial aid administered by Barnard College is based on demonstrated need as determined by the Federal Methodology formula. However for institutional aid is determined using a Barnard Need Analysis formula which takes into consideration all sources of income and all assets. Barnard gives no merit on scholarships. The College believes that the primary responsibility for financing educational cost rests with each student's family, and all college aid is supplementary to family resources. Once need has been established, Barnard makes every effort to meet the need of all eligible students with a combination of grants, loans and employment opportunities. A student who is admitted to Barnard with financial aid can guaranteed college grants for future years. Awards are for academic year only. A student can receive Barnard aid for a maximum of eight semesters. Each semester a student is enrolled is counted towards the eight of eligibility whether or not aid was received. No financial aid is given for summer study. If a student has room in her academic year financial aid package and has not already borrowed the maximum loans, these funds may be borrowed during the academic year to be used for classed the following summer. For financial statement purposes, the Pell grant award of 1,964,094 are excluded.

**SCHEDULE J  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Compensation Information**  
For certain Officers, Directors, Trustees, Key Employees, and Highest  
Compensated Employees  
▶ Complete if the organization answered "Yes" to Form 990,  
Part IV, line 23.  
▶ Attach to Form 990. ▶ See separate instructions.

OMB No. 1545-0047

**2009**

**Open to Public  
Inspection**

Name of the organization

**BARNARD COLLEGE**

Employer identification number

**13 : 1628149**

**Part I Questions Regarding Compensation**

**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.

- |   |   |
|---|---|
| <input type="checkbox"/> First-class or charter travel                        | <input checked="" type="checkbox"/> Housing allowance or residence for personal use |
| <input type="checkbox"/> Travel for companions                                | <input type="checkbox"/> Payments for business use of personal residence            |
| <input checked="" type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees              |
| <input type="checkbox"/> Discretionary spending account                       | <input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)            |

**b** If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain

**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?

**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.

- |  |   |
|--|---|
| <input checked="" type="checkbox"/> Compensation committee   | <input checked="" type="checkbox"/> Written employment contract                     |
| <input type="checkbox"/> Independent compensation consultant | <input checked="" type="checkbox"/> Compensation survey or study                    |
| <input type="checkbox"/> Form 990 of other organizations     | <input checked="" type="checkbox"/> 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? . . . . .
- b** Participate in, or receive payment from, a supplemental nonqualified retirement plan? . . . . .
- c** Participate in, or receive payment from, an equity-based compensation arrangement? . . . . .
- If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

**Only section 501(c)(3) and 501(c)(4) organizations 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? . . . . .
- b** Any related organization? . . . . .
- 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? . . . . .
- b** Any related organization? . . . . .
- 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 . . . . .

**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 . . . . .

**9** If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)? . . . . .

	Yes	No
1a		
1b	✓	
2	✓	
3		
4a	✓	
4b		✓
4c		✓
5a		✓
5b		✓
6a		✓
6b		✓
7		✓
8		✓
9		

**Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees.** Use Schedule J-1 if additional space is needed.

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

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

(A) Name	(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ	
	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation					
Debora Spar	(i)	372,460	0	39,402	0	84,098	495,960	0
	(ii)	0	0	0	0	0	0	0
Gregory N Brown	(i)	224,743	0	0	0	42,059	266,802	0
	(ii)	0	0	0	0	0	0	0
Michael S Felerman	(i)	155,834	0	0	0	49,753	205,587	0
	(ii)	0	0	0	0	0	0	0
Elizabeth S Boylan	(i)	221,328	0	0	0	45,323	266,651	0
	(ii)	0	0	0	0	0	0	0
Dorothy S Denburg	(i)	166,210	0	0	0	61,143	227,353	0
	(ii)	0	0	0	0	0	0	0
Roberta Mark	(i)	224,099	0	0	0	39,381	263,480	0
	(ii)	0	0	0	0	0	0	0
Lisa Gamsu	(i)	169,931	0	0	0	33,262	203,193	0
	(ii)	0	0	0	0	0	0	0
Rae Silver	(i)	282,860	0	0	0	53,490	336,350	0
	(ii)	0	0	0	0	0	0	0
Robert McCaughey	(i)	191,050	0	0	0	39,836	230,886	0
	(ii)	0	0	0	0	0	0	0
Peter Balsam	(i)	188,002	0	0	0	44,170	232,172	0
	(ii)	0	0	0	0	0	0	0
Walter Newman	(i)	184,111	0	0	0	37,525	221,636	0
	(ii)	0	0	0	0	0	0	0
Robert Remez	(i)	196,083	0	0	0	42,508	238,591	0
	(ii)	0	0	0	0	0	0	0
Judith Shapiro	(i)	183,442	0	0	0	31,769	215,211	0
	(ii)	0	0	0	0	0	0	0
(i)								
(ii)								
(i)								
(ii)								

**Part III** Supplemental information

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

Schedule J, Part I, Line 1a - The President's employment contract documents the housing allowance and tax indemnification and gross up payments.

Schedule J, Part I, Line 4 - Judith Shapiro received severance payment.



**SCHEDULE K  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

Name of the organization

**BARNARD COLLEGE**

**Supplemental Information on Tax-Exempt Bonds**

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information on Schedule O (Form 990).

▶ Attach to Form 990. See separate instructions.

OMB No. 1545-0047

**2009**

Open to Public Inspection

Employer identification number

13 : 1628149

**Part I Bond Issues**

	(a) Issuer name	(b) Issuer EN	(c) CUSIP #	(d) Date issued	(e) Issue price	(f) Description of purpose	(g) Defeased		(h) On behalf of issuer	
							Yes	No	Yes	No
	Dormitory Authority of the State of New York	14-6000293	64983U7Q7	02/04/2004	28,880,374	See Schedule O	Yes	No	Yes	No
<b>A</b>									✓	✓
	Dormitory Authority of the State of New York	14-6000293	649903NL1	07/11/2007	50,184,096	See Schedule O			✓	✓
<b>B</b>										
	Dormitory Authority of the State of New York	14-6000293	649903ZP9	04/24/2008	28,040,000	See Schedule O			✓	✓
<b>C</b>										
<b>D</b>										
<b>E</b>										

**Part II Proceeds**

	A		B		C		D		E	
	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
1 Total proceeds of issue		28,880,374		50,184,096		28,040,000				
2 Gross proceeds in reserve funds		1,208,379		2,942,214		0				
3 Proceeds in refunding or defeasance escrows		0		23,106,538		27,612,953				
4 Other unspent proceeds		0		0		0				
5 Issuance costs from proceeds		932,402		930,843		427,953				
6 Working capital expenditures from proceeds		0		0		0				
7 Capital expenditures from proceeds		27,947,972		26,146,715		0				
8 Year of substantial completion	2004		2010		2010					
9 Were the bonds issued as part of a current refunding issue?		✓		✓		✓				
10 Were the bonds issued as part of an advance refunding issue?		✓		✓		✓				
11 Has the final allocation of proceeds been made?	✓		✓		✓					
12 Does the organization maintain adequate books and records to support the final allocation of proceeds?	✓		✓		✓					

**Part III Private Business Use**

	A		B		C		D		E	
	Yes	No								
1 Was the organization a partner in a partnership, or a member of an LLC, which owned property financed by tax-exempt bonds?		✓		✓		✓				
2 Are there any lease arrangements with respect to the financed property which may result in private business use?		✓		✓		✓				

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

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Schedule K (Form 990) 2009

**Part III Private Business Use (Continued)**

	A		B		C		D		E	
	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
3a Are there any management or service contracts with respect to the financed property which may result in private business use?		✓		✓		✓				
b Are there any research agreements with respect to the financed property which may result in private business use?		✓		✓		✓				
c Does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts or research agreements relating to the financed property?		✓		✓		✓				
4 Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government ▶		0 %		0 %		0 %				%
5 Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government ▶		0 %		0 %		0 %				%
6 Total of lines 4 and 5		0 %		0 %		0 %				%
7 Has the organization adopted management practices and procedures to ensure the post-issuance compliance of its tax-exempt bond liabilities?	✓		✓		✓					

**Part IV Arbitrage**

	A		B		C		D		E	
	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
1 Has a Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate, been filed with respect to the bond issue?	✓		✓		✓					
2 Is the bond issue a variable rate issue?		✓		✓	✓					
3a Has the organization or the governmental issuer identified a hedge with respect to the bond issue on its books and records?		✓		✓	✓					
b Name of provider	HSBC									
c Term of hedge	7									
4a Were gross proceeds invested in a GIC?		✓		✓		✓				
b Name of provider										
c Term of GIC										
d Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?										
5 Were any gross proceeds invested beyond an available temporary period?		✓		✓		✓				
6 Did the bond issue qualify for an exception to rebate?		✓		✓		✓				

**SCHEDULE M  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Noncash Contributions**

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

OMB No. 1545-0047

**2009**

Open To Public  
Inspection

Name of the organization

**BARNARD COLLEGE**

Employer identification number

**13 : 1628149**

**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 . . . . .	✓	92	1,595,971	Mean Mkt Price
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 Acknowledgement . . . . . **29** **0**

	Yes	No
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? . . . . .		✓
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? . . . . .	✓	
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions? . . . . .	✓	
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.		



**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

**BARNARD COLLEGE**

Employer identification number

**13 : 1628149**

Form 990, Header, Line B - Amendment reflects the disclosure included in the Part VII and Schedule J for the College's President, Debora Spar. The compensation and non taxable benefits were amended to reflect the Form W-2C issued for calendar year 2009. In addition, corrections were made to Part V Line 3a and 3b, and Part V Line 7a and 7b.

Form 990, Part III, Line 1 - Barnard College aims to provide the highest quality liberal arts education to promising and high-achieving young women, offering the unparalleled advantages of an outstanding residential college in partnership with a major research university. With a dedicated faculty of scholars distinguished in their respective fields, Barnard is a community of accessible teachers and engaged students who participate together in intellectual risk-taking and discovery. Barnard students develop the intellectual resources to take advantage of opportunities as new fields, new ideas, and new technologies emerge. They graduate prepared to lead lives that are professionally satisfying and successful, personally fulfilling, and enriched by love of learning. As a college for women, Barnard embraces its responsibility to address issues of gender in all of their complexity and urgency, and to help students achieve the personal strength that will enable them to meet the challenges they will encounter throughout their lives. Located in the cosmopolitan urban environment of New York City, and committed to diversity in its student body, faculty and staff, Barnard prepares its graduates to flourish in different cultural surroundings in an increasingly inter-connected world. The Barnard community thrives on high expectations. By setting rigorous academic standards and giving students the support they need to meet those standards, Barnard enables them to discover their own capabilities. Living and learning in this unique environment, Barnard students become agile, resilient, responsible, and creative, prepared to lead and serve their society.

Form 990, Part V, Line 3b - The Form 990-T for the tax year beginning July 1, 2009 and ending June 30, 2010 will be filed by the College by the end of the current fiscal year (June 30, 2012).

Form 990, Part VI, Section A, Line 2 - The Board of Trustees has one family relationship among its members, Mr. William Reid and Mrs. Mary Louise Reid are son and mother. Mr. Reid is an active board member with voting rights. Mrs. Reid is a Trustee Emerita without voting rights.

Form 990, Part VI, Section B, Line 11 - The Form 990 is reviewed by the Asst. Vice President of Finance / Controller, the Chief Operating Officer, The President and the Committee on Audit and Compliance.

Form 990, Part VI, Section B, Line 12c - The policy and disclosure statement is distributed annually to each Trustee who shall read the policy, disclosure statement and sign the certification agreeing to be bound by the policy and return the disclosure statement to the Secretary of the Board. The statements are reviewed by the College's General Counsel.

Form 990, Part VI, Section B, Line 15 - The Compensation Committee of Barnard College's Board of Trustees is responsible for determining and approving the compensation of the College's President (CEO) and other top management officials including the: Chief Operating Officer, General Counsel, Dean of the College, Provost, Vice President for Development, Vice President for Communications and the Vice President for Administration. The Compensation Committee is provided with comparable data from the higher education industry and uses that data to determine the compensation levels on an annual basis.

Supplemental Information (Continued)

Form 990, Part VI, Section C, Line 19 - The College discloses its audited financial statements and its conflict of interest policies on its website at the following links : www.barnard.edu/opir, http://barnard.edu/hr/policies\_conflict.html, and http://barnard.edu/provost/policies/conflictpolicy.html, respectively.

Schedule K, Part I, Column a - The Series 2007A Bonds were issued (i) to refund the outstanding portion of the Dormitory Authority's Barnard College Insured Revenue Bonds, Series 1996 (the "Series 1996") maturing on and after July 1, 2008, (ii) to pay for the Costs of the Series 2007 Project (as defined hereinafter), (iii) to pay a portion of the interest on the Series 2007A Bonds and (iv) to pay the Costs of Issuance of the Series 2007A Bonds, including a portion of the premium for the municipal new issue bond insurance policy. The Series 2007 Project consisted of the demolition of an existing facility and construction of a new, approximately 100,000 gross square foot multi-purpose facility to be located at 3023 Broadway, to include a theatre with seating for approximately 100, special event space for seating for approximately 500, a central reading room, computer technology center, student services offices, club space, student union, classrooms, food services venues and academic departments; and (ii) campus-wide renovation and maintenance projects at various buildings. As noted above, a portion of the Series 2007A Bonds were used to refund the Series 1996 Bonds the proceeds of which were used to (A) refund the College's loans under the Dormitory Authority's College and University Variable/Fixed Rate Insured Revenue Bonds (1985 Pooled Capital Program), the proceeds of which were used to finance the construction of Sulzberger Hall, and (B) to repair, renovate and upgrade various buildings at Barnard College.

Schedule K, Part I, Column b - The Series 2008 Bonds were issued for the purpose of providing funds, which together with other available monies, will be used (i) to refund and defease the outstanding Dormitory's Barnard College Insured Revenue Bonds, Series 2007B (the "Series 2007B") and (ii) to pay the Costs of Issuance of the Series 2008 Bonds. The proceeds of the Series 2007B were used to finance a portion of the cost (i) of the "Nexus" project consisting of the demolition of an existing facility and construction of a new, approximately 100,000 gross square foot multi-purpose facility to be located at 3023 Broadway, to include a theatre with seating for approximately 100, special event space for seating for approximately 500, a central reading room, computer technology center, student services offices, club space, student union, classrooms, food services venues and academic departments; and (ii) campus-wide renovation and maintenance projects at various buildings.

Schedule K, Part I, Column c - The Series 2004 Bonds were issued (i) to pay for the Costs of the Series 2004 Project (as defined hereafter), (ii) to pay a portion of the interest on the Series 2004 Bonds and (iii) to pay the Costs of Issuance of the Series 2004 Bonds, including the premium for the municipal bond insurance policy. The Series 2004 Project, known as Cathedral Gardens, consisted of the acquisition by Barnard College of five condominium units to be used primarily to provide residential space for 91 students and 26 faculty apartments. The five condominium units, together with related rights comprise approximately 66,000 square feet in a building located near the corner of 110th Street and Manhattan Avenue.

Accounts and Activities Outside the United States

	Offices	Employees	Total
Region Activities Services	Central America and the Caribbean Investments		
Region Activities Services	Central America and the Caribbean Program Services Research		21,973
Region Activities Services	East Asia and the Pacific Program Services Admissions		1,758
Region Activities Services	East Asia and the Pacific Program Services Research		75,683
Region Activities Services	East Asia and the Pacific Program Services Conference		8,470
Region Activities Services	Europe (Including Iceland and Greenland) Program Services Study Abroad		614,368
Region Activities Services	Europe (Including Iceland and Greenland) Program Services Admission		2,157
Region Activities Services	Europe (Including Iceland and Greenland) Program Services Research		5,943
Region Activities Services	Europe (Including Iceland and Greenland) Program Services Conferences		4,202
Region Activities Services	Europe (Including Iceland and Greenland) Program Services Instruction		16,288
Region Activities Services	Middle East and North Africa Program Services Study Abroad		35,303
Region Activities Services	Middle East and North Africa Speaking at Seminars or Conferences		56,434
Region Activities Services	Middle East and North Africa Program Services Advising Students		5,264
Region Activities Services	Middle East and North Africa Program Services Advising Students		3,921
Region Activities Services	Russia and the newly independent States Program Services Research		5,395
Region Activities Services	South America Program Services Admissions		4,043

Schedule F, Part IV, Statement 1

BARNARD COLLEGE

Region	South Asia			5,500
Activities	Program Services			
Services	Admissions			
Region	South Asia			24,579
Activities	Program Services			
Services	Research			
Region	Sub-Saharan Africa			3,090
Activities	Program Services			
Services	Research			
	<b>Total:</b>	<b>0</b>	<b>0</b>	<b>894,371</b>

Grants To Individuals Located Outside US

		Recipients	Cash Grant	Non-Cash Assistance
Assistance	Institutional Grant used for tuition and room	2	41,493	
Region	Central America and the Caribbean			
Cash Disbursement	Other			
Non-Cash Assistance Valuation				
Assistance	Institutional Grant used for tuition and room	1	44,482	
Region	East Asia and the Pacific			
Cash Disbursement	Other			
Non-Cash Assistance Valuation				
Assistance	Institutional Grant used for tuition and room	3	87,366	
Region	Europe (including Iceland and Greenland)			
Cash Disbursement				
Non-Cash Assistance Valuation				
Assistance	Institutional Grant used for tuition and room	2	28,093	
Region	North America (including Canada and Mexico, but not the United States)			
Cash Disbursement	Other			
Non-Cash Assistance Valuation				
Assistance	Institutional Grant used for tuition and room	3	82,454	
Region	South America			
Cash Disbursement	Other			
Non-Cash Assistance Valuation				
Assistance	Institutional Grant used for tuition and room	1	47,232	
Region	Sub-Saharan Africa			
Cash Disbursement	Other			
Non-Cash Assistance Valuation				

Description of Grants and Other Assistance to Individuals in the United States

		Number of recipients	Amount of cash grant	Amount of non-cash assistance
Type of grant	National Smart Grant	41	147,000	
Method of valuation				
Description of non-cash assistance				
Type of grant	Stipends / Honorarium	65	93,457	
Method of valuation				
Description of non-cash assistance				

Schedule O, Statement 1  
Form: 990  
Page: 5  
Line Number: Part V Line 4b

BARNARD COLLEGE  
13-1628149

Name Of Foreign Country

Name

United Kingdom (England, Northern Ireland, Scotland, and Wales)

Government Financial Aid Explanation

Explanation

Barnard College receives funds from the following federal programs: College Federal Work Study, Basic Educational Opportunity Grants (Pell), Supplementary Educational Opportunity Grants, Federal Perkins Loans, Academic Competitiveness Grant, National SMART Grant, and Higher Education Opportunity Grant.

Fundraiser Activity Information

Name	Activity	C1	Gross Receipts	C2	C3
Wallace and Washburn Assoc	Research	No	0	9,600	-9,600
Strategic Fundraising Solution	Research	No	0	50,000	-50,000
The Williams Club	Event Mgt	No	0	8,720	-8,720
Buckley Hall Events	Event Mgt	No	1,758,148	67,500	1,690,648
Karen Schwartz	Correspondence	No	0	27,825	-27,825
Tedesco and Affiliates LLC	Event Mgt	No	0	7,000	-7,000
<b>Total:</b>			<b>1,758,148</b>	<b>170,645</b>	<b>1,587,503</b>

C1 = Fundraiser control of funds?

C2 = Amount paid to (or retained by) fundraiser

C3 = Amount paid to (or retained by) organization