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Form

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

OMB No 1545-0047 2009

Open to Public Inspection

				/		
<u>A</u>	For the 200		ear, or tax year beginning $07/01/09$, and ending $06/30$	/10	_	
В	Check if applica	able Please	c Name of organization BRONX HIGH SCHOOL OF SCIENCE		D Emplo	yer identification number
	Address chang	e use IRS label or	ENDOWMENT FUND, INC.		_]	
\Box	Name change	print or	Doing Business As		13-	3763299
\equiv	•	type.	Number and street (or P O box if mail is not delivered to street address)	Room/suite	E Teleph	one number
	Initial return	See	C/O J.KOENIG,320 WEST END AVENUE	5B		-799-8048
\Box	Termination	Specific	City or town, state or country, and ZIP + 4		<u> </u>	
\Box		Instruc-	•		G Gross rece	ihiza 224,421
\sqsubseteq	Amended retur		NEW YORK NY 10023-8110		┥	
	Application per	nding F Nam	e and address of principal officer			a group return for
					affiliate H(b) Are all	
		İ			include	d? Yes No
				<u> </u>	If "No,"	attach a list (see instructions)
1	Tax-exempt	status X	501(c) (3) ◀ (insert no) 4947(a)(1) or 527]	
J	Website:	BRON	SCIENCEENDOWMENTFUND.ORG/		H(c) Group	exemption number
ĸ	Type of organi			L Year of formation		M State of legal domicile NY
	art I	Summa				
<u></u>			7 			
	4	· =	ne organization's mission or most significant activities			
ø	T	O SUPPO	RT EDUCATIONAL PROGRAMS AT BRONX H.S. OF SCIE	NCE		
ĕ						
Ĕ						
Š	2 Che	ck this box	if the organization discontinued its operations or disposed of more than 2	25% of its net ass	ets	
Ŏ			members of the governing body (Part VI, line 1a)		3	17
တိ			endent voting members of the governing body (Part VI, line 1b)		4	17
ij						
Activities & Governance			employees (Part V, line 2a)		5	0
Ą	6 Tota	al number of	rolunteers (estimate if necessary)		- 6	
	-7 a -Tota	il gross unrel	ated business revenue from Part VIII, column Column EVED		7a	
	b Net	unrelated bu	C 31		7b	0
				Prior		Current Year
Θ	8 Con	tributions and	I grants (Part VIII, line 1h) revenue (Part VIII, line 2g) NOV 1 6 2010	2	74,699	167,175
20 Revenue	9 Prog	gram service	revenue (Part VIII, line 2g)			
ě	10 Inve	stment incon	ne (Part VIII, column (A), lines 3, 4, and 70)	-1	94,785	41,907
<u> </u>	11 Othe	er revenue (F	art VIII, column (A), lines 5, 6d, 8c, 9d, 10c, and DEN, UT			
2			idd lines 8 through 11 (must equal Part VIII, column (A), line 12)		79,914	209,082
			ar amounts paid (Part IX, column (A), lines 1–3)	4	78,012	390,040
9					70,012	330,010
0	1	•	r for members (Part IX, column (A), line 4)			27,732
efises	15 Sala		empensation, employee benefits (Part IX, column (A), lines 5–10)		01 100	21,132
(E)	16a Prof		raising fees (Part IX, column (A), line 11e)	<u> </u>	01,100	
		al fundraising	expenses (Part IX, column (D), line 25) ▶ 21, 452			
	17 Othe	er expenses	Part IX, column (A), lines 11a–11d, 11f–24f)		23,568	37,638
2	18 Tota	l expenses	Add lines 13–17 (must equal Part IX, column (A), line 25)	6	02,680	455,410
4	19 Rev	enue less ex	penses Subtract line 18 from line 12	-5	22,766	-246,328
Net Assets or Fund Balances on MINITEX	D		, , , , , , , , , , , , , , , , , , ,	Beginning of		End of Year
Sets	20 Tota	ıl assets (Par	t X, line 16)	5,8	27,563	5,486,391
As	21 Tota	-	art X, line 26)	•		2,062
3,5	22 Net	assets or fun	d balances Subtract line 21 from line 20	5.8	27,563	5,484,329
_	art II	Signatu	· · · · · · · · · · · · · · · · · · ·			
			ies of perjyry, I declare that I have examined this return, including accompanying schedule	a and statements of	and to the best o	f my knowledge
		and belief, it	is true, correct, and complete. Declaration of preparer (other than officer) is based on all in	formation of which	preparer has an	knowledge
C:-			home and horas		12/	1/4/1/2
Sig	-		y vona grovy			<u>, , , , , , , , , , , , , , , , , , , </u>
He	re	Signatu	Termme A. Nolnia Treasurer		Date	
		<u> </u>	Jerome A. Holnig Treasurer			
		Type or	print name and title			
		Preparer's	Date		ck if	Preparer's identifying number
Pai	id	signature	1 She your Coff	/02/10 self-	loyed X	(see instructions) P00726669
Pre	eparer's			22/10 em		77 7474044
Us	e Only	Firm's name	(or yours		EIN D	11-3414344
		If self-emplo			Phone	E16 038 0400
		address, and	122111111111111111111111111111111111111		no	<u> 516-937-3400</u>
			urn with the preparer shown above? (see instructions)			Yes No
For DAA		ct and Pape	work Reduction Act Notice, see the separate instructions.		_	Form 990 (2009)
~~					/_	/) (=

Part III Statement of Program Se	rvice Accomplishments		
Briefly describe the organization's mission SUPPORT EDUCATIONAL	PROGRAMS AT BRONX H.S	S. OF SCIENCE	
2 Did the organization undertake any significant the prior Form 990 or 990-EZ?	t program services during the year which we	ere not listed on	Yes X No
If "Yes," describe these new services on Sch	edule O		
3 Did the organization cease conducting, or ma	ike significant changes in how it conducts, a	ny program	
services?			Yes X No
If "Yes," describe these changes on Schedul			
4 Describe the exempt purpose achievements			
Section 501(c)(3) and 501(c)(4) organization allocations to others, the total expenses, and			
allocations to others, the total expenses, and	revenue, if any, for each program service re	sported	
4a (Code) (Expenses \$ GRANT PURPOSE:	338,405 including grants of \$	338,405) (Revenue \$)
PURCHASE: FURNITURE	& EQUIPMENT	164,221	
PURCHASE: ART DEPART	MENT SUPPLIES	9,797	
ARCHITECTURAL & ENGI		59,193	
CONTRUCTION & INSPEC	TION COSTS	105,194	
		338,405	
4b (Code) (Expenses \$ GRANT PURPOSE: EDUCATIONAL SUPPORT MENTORING SERVICES	21,635 including grants of \$	21,635) (Revenue \$ 20,585 1,050 21,635 =======)
4c (Code) (Expenses \$ GRANT PURPOSE:,	30,000 including grants of \$	30,000) (Revenue \$)
MANNE SCHOLARSHIP		18,000	
GOLDSTEIN SCHOLARSHI	P	10,000	
DAVIDSON HONORARIUM		2,000	
		30,000	
		======	
Ad Other program convers (Decembers Orbert	do O V		
4d Other program services (Describe in Schedi (Expenses \$	ale O) notuding grants of \$) (Revenue \$)
4e Total program service expenses ▶	390,040	/ (Notorido - T	
			Form 990 (2009)

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
	complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
	candidates for public office? If "Yes," complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete			
	Schedule C, Part II	4		Х
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e)			
	notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have			
	the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes,"			
	complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	<u> </u>		
•	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		x
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
•	complete Schedule D, Part III	8		x
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part	<u> </u>		
•	X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes,"			
	complete Schedule D, Part IV	9		x
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or	ا ا	 	1
		10	İ	X
11	quasi-endowments? If "Yes," complete Schedule D, Part V	10		
• •	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable	11		X
_		'' -	-	<u> </u>
•	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D. Part VI	-	, 1	.
	200100000000000000000000000000000000000			
•	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 related 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			Ī
42	the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X			l
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	40	X	
404	Schedule D, Parts XI, XII, and XIII	12	 ^	
IZA	Was the organization included in consolidated, independent audited financial statements for the tax year? Yes If "Yes" appropriate School is D. Dodo XI. XII. and XIII. a category.	No X		I
42	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional		İ	Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	 	X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	 	^
þ	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising,	1445		X
4 5	business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I	14b	 -	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any	45		X
46	organization or entity located outside the United States? If "Yes," complete Schedule F, Part II	15	├	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance	40		₩
4-	to individuals located outside the United States? If "Yes," complete Schedule F, Part III	16	 	X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services			•
40	on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17	 	X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			_ v
40	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	ļ	X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			v
	If "Yes," complete Schedule G, Part III	19	-	X
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		X

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 12 If "Yes," complete Schedule I, Parts I and II	21		X
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 27 If "Yes," complete Schedule I, Parts I and III	22	X	<u> </u>
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the		ļ	
	organization's current and former officers, directors, trustees, key employees, and highest compensated	1	ļ	
	employees? If "Yes," complete Schedule J	23		X
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	24a	<u> </u>	X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	ļ	
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d	<u> </u>	<u> </u>
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction			<u>,,</u>
	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
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			٠,,
	990-EZ? If "Yes," complete Schedule L, Part I	25b	ļ	X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or	1		٠,,
	disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L. Part II	26		X
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?			_v
20	If "Yes," complete Schedule L, Part III	27	-	X
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)	200	1	х
a	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a	 	<u> </u>
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		х
С	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a	200		<u> </u>
٠	family member) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L,			
	Part IV	28c		х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	_	X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified		-	<u> </u>
••	conservation contributions? If "Yes," complete Schedule M	30		х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,	1-33		
•	Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II,			
	III, IV, and V, line 1	34		Х
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete			
	Schedule R, Part V, line 2	35		X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related			
	organization? If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,			
	Part VI	37	ļ	X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and			
	197 Note. All Form 990 filers are required to complete Schedule O	38	<u> </u>	<u>X</u>

Form 990 (2009) BRONX HIGH SCHOOL OF SCIENCE 13-3763299 Page 5 Statements Regarding Other IRS Filings and Tax Compliance Part V Yes No 1a Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of 0 U.S. Information Returns Enter -0- if not applicable 1a 0 Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable b Did the organization comply with backup withholding rules for reportable payments to vendors and reportable Х 1c gaming (gambling) winnings to prize winners? Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax 2a Statements, filed for the calendar year ending with or within the year covered by this return b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 2b Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions) 3a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? 3a 3b b If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial X 4a account)? If "Yes," enter the name of the foreign country See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts 5a 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5b b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding 5c Prohibited Tax Shelter Transaction? 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the \mathbf{X}^{-} 6a organization solicit any contributions that were not tax deductible? b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 6b Organizations that may receive deductible contributions under section 170(c). 7 Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods 7a and services provided to the payor? X 7b b If "Yes," did the organization notify the donor of the value of the goods or services provided? Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was Х 7с required to file Form 8282? | 7a | If "Yes," indicate the number of Forms 8282 filed during the year Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal 7e Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7f For all contributions of qualified intellectual property, did the organization file Form 8899 as required? 7g a For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as Х 7h required? Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring X organization, have excess business holdings at any time during the year? 8 9 Sponsoring organizations maintaining donor advised funds. 9a Х Did the organization make any taxable distributions under section 4966? X 9b Did the organization make a distribution to a donor, donor advisor, or related person? ь 10 Section 501(c)(7) organizations. Enter 10a a Initiation fees and capital contributions included on Part VIII, line 12 b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b Section 501(c)(12) organizations. Enter 11 11a Gross income from members or shareholders b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) 11b

12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?

If "Yes," enter the amount of tax-exempt interest received or accrued during the year

12a

12b

Form 990 (2009) BRONX HIGH SCHOOL OF SCIENCE 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.			
Sec	tion A. Governing Body and Management			
10	Enter the number of voting members of the governing body		Yes	No
1a b	Enter the number of voting members of the governing body Enter the number of voting members that are independent 10 17	-		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with	-[
-	any other officer, director, trustee, or key employee?	2		Х
3	Did the organization delegate control over management duties customarily performed by or under the direct	<u></u> -		
	supervision of officers, directors or trustees, or key employees to a management company or other person?	3		Х
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		X X X
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		X
6	Does the organization have members or stockholders?	6		X
7a	Does the organization have members, stockholders, or other persons who may elect one or more members			
	of the governing body?	7a_		_X_
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		<u>X</u>
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
	the year by the following			
а	The governing body?	8a	Х	
þ	Each committee with authority to act on behalf of the governing body?	8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached			
	at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		X
	tion B. Policies (This Section B requests information about policies not required by the Internal			
Rev	venue Code)			
		<u> </u>	Yes	No
_	Does the organization have local chapters, branches, or affiliates?	10a		X
Ь	If "Yes," does the organization have written policies and procedures governing the activities of such chapters,			
	affiliates, and branches to ensure their operations are consistent with those of the organization?	10b		
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the	44		v
44-	form?	11		X
11a	Describe in Schedule O the process, if any, used by the organization to review this Form 990	12a		X
12a b	Does the organization have a written conflict of interest policy? If "No," go to line 13 Are officers, directors or trustees, and key employees required to disclose annually interests that could give	128		
b	rise to conflicts?	12b		
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"	120		
·	describe in Schedule O how this is done	12c		
13	Does the organization have a written whistleblower policy?	13		Х
14	Does the organization have a written document retention and destruction policy?	14		X
15	Did the process for determining compensation of the following persons include a review and approval by			
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a		Х
b	Other officers or key employees of the organization	15b		X
	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?	16a		X
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate			
	its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard			
	the organization's exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ▶ NY			
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			
4-	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			
00	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			
377	organization ► JEROME A. KOENIG, TREASURER 320 WEST END AVE APT 5B	. 70		040

DAA

Form 990 (2009)

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 (A)	(B)			((C)			(D)	(E)	(F)
Name and Title	Average hours per week	compensated be ployee ployee and trustee al trustee or			Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations			
SEE ATTACHED				-	-		-	0	0	0
LAURA KOSS-FEDER EXECUTIVE DIRECTOR	40.00	х			Х	х		26,667	0	0
						_				
	_									
		_	-				_			

4	\neg		\neg	7	_	\neg	\sim	\sim	\sim	
	٠.	_	٠.	•	-	•	_	ч	u	

Page 8

(A) Name and Title	(B) Average	Pos	ition (C) k all t	hat a	oply)		(E) Reportable	Estin	F) nated	
,	hours per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	oti compe from organ and re	unt of her nsation in the ization elated zations	
												
		_	_	_						<u> </u>		
		ļ	 									
						_					_ _	
		<u> </u>			_					 		.
· · · · · · · · · · · · · · · · · · ·		\vdash				_				<u> </u>		
····												
		-				_						
		_	-		<u> </u>					-		
				<u> </u>		_						
· · · · · · · · · · · · · · · · · · ·						-						
1b Total		L	<u> </u>		ļ		>	26,667				
2 Total number of individuals (increportable compensation from	-		to th	ose	liste	d abo	ve)	who received more than \$1	00,000 in			
. operation compensation nom	ino organization								. -		Yes	No
 Did the organization list any for employee on line 1a? If "Yes," For any individual listed on line the organization and related organization. 	complete Schedu 1a, is the sum o	ile J i f repo	for si ortab	uch i le co	ndiv	idual ensat	ion a	and other compensation from	m	3		х
individualDid any person listed on line 1a	a receive or accru	ле со	mpe	nsat	ion fi	rom a	any t	unrelated organization for		4		X
services rendered to the organ Section B. Independent Contractor		comp	olete	Sch	edul	e J to	or su	ich person		5		X
Complete this table for your five compensation from the organization.	e highest comper ation	nsate	d inc	depe	nder	nt cor	ntrac		<u> </u>			
Name and	(A) business address						_	Descrip	(B) tion of services		(C) Compensa	ition
							_	· · · · · · · · · · · · · · · · · · ·				
							<u> </u>	·				
	- · · · <u>-</u> ··					<u>.</u>	_					
Total number of independent or		_				to th	ose	listed above) who received			, ,	
more than \$100,000 in compen	sation from the c	rgan	ızatı	on 🕨	•				· 		m 990	(2009

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

Pa	irt V	'III Stater	nent of Reve	nue						
		ı	,				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
25 25	1a	Federated car	npaigns	1a				icvenue		312, 313, 01314
Tan	 b	b Membership dues 1b								
g,E	C			1c						
ar a	d			1d						
S,E	е е	_		1e						
tion	f	All other contribution				±				
ğξ			not included above	1f		167,175				
Contributions, gifts, grants and other similar amounts	g	Noncash contributio	ns included in lines 1a-		\$,	
ರ್ಷ	h	Total. Add line	es 1a-1f		•	▶	167,175			
Program Service Revenue			-			Busn. Code				
/en	2a									
æ	ь						-		· · · · ·	
<u>Ş</u>	С									
Ser	d									
Щ	е									
Бō	f	All other progra	am service reven	ue						
<u>a</u>	g	Total. Add line	s 2a–2f			•				
	3	Investment inc	ome (including d	vidend	s, interes	st, and				
		other similar a	mounts)			▶	86,694			86,694
	4	Income from in	vestment of tax-	exemp	t bond pro	oceeds 🕨				
	5	Royalties				•				
			(ı) Real		(n) F	Personal				
	6a	Gross Rents							-	in some
	þ	Less rental exps								
	С	Rental inc or (loss)	<u> </u>							
	d 7a	Net rental inco Gross amount from				<u> </u>				
	, a	sales of assets	(i) Securities		(11)	Other .				
		other than inventory	280,	568						
	b	Less cost or other								
		basis & sales exps	325,							
		Gain or (loss)	-44,	787						
		Net gain or (los		г			-44,787	-44,787		
9	8a		m fundraising even	ts					=	
ē		(not including \$								
Other Reven			eported on line 1c)							
ě		See Part IV, line		. a		 .				
8		Less direct ex		рĹ						
			(loss) from fundra m gaming activities		events					
	Ja	See Part IV, line		1		İ				
	h	Less direct ex		a b						
İ			penses (loss) from gamır		utios					
		Gross sales of		ig activ	illes					
-	·va	returns and allo		ا						
İ	ь	Less cost of ge	· · · · · · · · · · · · · · · ·	a b						
ļ		-	(loss) from sales	~ L	nton/		1		Ī	
ŀ	Ť		ellaneous Revenue	OI IIIVE	illory	Busn. Code				-
ŀ	11a						Ī		ŧ	
	b					 	· · · · •			
	c					-				
	ď	All other revenu	ıe			 				
ļ		Total. Add line:	_			└				
			. See instructions	3		•	209,082	-44,787	0	86,694

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).

					\-/-
	not include amounts reported on lines 6b, , 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1					
	organizations in the U.S. See Part IV, line 21				
2	Grants and other assistance to individuals in	390,040	390,040		
	the U.S. See Part IV, line 22	390,040	390,040		***
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	U S See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	26,667		26,667	
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	ļ		 	
8	Pension plan contributions (include section 401(k)				
	and section 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes	1,065		1,065	
11	Fees for services (non-employees)				
а	Management				
b	Legal			·	
¢	Accounting	9,000	-	9,000	
đ	Lobbying				
0	Professional fundraising services See Part IV, line 17				
f	Investment management fees				
g	Other				
12	Advertising and promotion				
13	Office expenses				
14	Information technology				
15	Royalties				
16	Occupancy				
17	Travel				
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance				
24	Other expenses Itemize expenses not				
	covered above (Expenses grouped together				
	and labeled miscellaneous may not exceed	1			
	5% of total expenses shown on line 25 below)				
а	PLANNED GIVING EXPENSES	11,355			11,355
b	WEBSITE	9,220			9,220
С	INSURANCE	5,975		5,975	
d	FUNDRAISING EXPENSES	877			877
0	ADMINISTRATIVE EXPENSES	875		875	
f	All other expenses	336		336	
25	Total functional expenses. Add lines 1 through 24f	455,410	390,040	43,918	21,452
26	Joint costs. Check here ▶ ☐ If following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and			•	
	fundraising solicitation				

Parl	t X Balance Sheet			
			(A) Beginning of year	(B) End of year
1	1 Cash—non-interest bearing		1	
2	2 Savings and temporary cash investments		1,442,056	427,326
;	3 Pledges and grants receivable, net		269,000 3	174,000
4	4 Accounts receivable, net		4	,
9	5 Receivables from current and former officers, director	rs, trustees, key		
	employees, and highest compensated employees. C			
	Schedule L			5
0	6 Receivables from other disqualified persons (as defir	ned under section		
	4958(f)(1)) and persons described in section 4958(c)		1	
	Part II of Schedule L			3
Assets	7 Notes and loans receivable, net		7	,
SS	8 Inventories for sale or use		8	3
۶ ۲	9 Prepaid expenses and deferred charges		9)
10	Oa Land, buildings, and equipment cost or] [
	other basis Complete Part VI of Schedule D	10a		
	b Less accumulated depreciation	10b	10	oc
1.	·		4,116,507 1	
1:	•	1		
1:			1	
14			1	1
1:			1	
10	·	e 34)	5,827,563 1	
17			7 7 7 7 7 1 1	
10	,		1	
- - - 19			1	
20			2	·
		V of Schedule D	2	
Liabilities	-			•
<u> </u>	employees, highest compensated employees, and di	<u>-</u>		1
<u>'a</u>	persons Complete Part II of Schedule L	Squamed	2	,
2:	·	hird narties	2	
24		•	2	
2		a parties	2	
26			2	
	Organizations that follow SFAS 117, check here	► X and		2,002
Balances	complete lines 27 through 29, and lines 33 and 34			
E 2		••	5,229,079 2	7 4,860,34 <u>5</u>
Ba 2				8
D 29			9 623,984	
Fund	Organizations that do not follow SFAS 117, check	k boro 🕨 📋	350, 404 2	023,301
뜬	and complete lines 30 through 34.			Į.
Ö 30		3	<u>,</u> †	
sets		ant fund	3	-
SS			3	
Net Assets or	3.	s, or other funds		
N 33				
2 34	4 Total liabilities and net assets/fund balances		<u>5,827,563</u> 3	<u>4 5,486,3</u>

Form **990** (2009)

Form 990 (2009)	BRONX	HIGH	SCHOOL	OF	SCIENCE

13.	- 3'	767	29	C

Pa	rt XI Financial Statements and Reporting			
			Yes	No
1	Accounting method used to prepare the Form 990 Cash X 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?	2a		_X_
b	Were the organization's financial statements audited by an independent accountant?	2b_	X	
С	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?	2c	X	
	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?	3a		X
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	3b		

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

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

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

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service *
Name of the organization

BRONX HIGH SCHOOL OF SCIENCE ENDOWMENT FUND, INC.

Employer identification number 13 - 3763299

P	art I	Reas	on fo	or Public Charity	Status (All organizations	must co	<u>omplete</u>	this p	art.) S	ee ins	tructio	ns		
The	orga	nization is not a	a priva	ate foundation because	it is (For lines 1 through 11, che	eck only or	ne box)							
1		A church, cor	ventio	on of churches, or asso	cialion of churches described in	section 1	70(b)(1)(<i>/</i>	۹)(i).						
2		A school desc	cnbed	I in section 170(b)(1)(A	i)(ii). (Attach Schedule E)									
3		A hospital or	a coo _l	perative hospital service	e organization described in sect	ion 170(b)	(1)(A)(iii)							
4		A medical res	earch	organization operated	in conjunction with a hospital de	scribed in	section 1	70(b)(1)	(A)(iii).	Enter th	e hospit	tal's name,		
		city, and state	•											
5		An organizati	on ope	erated for the benefit of	a college or university owned or	r operated	by a gove	ernmenta	ıl unıt de	scribed	ın			
	_	section 170(b)(1)(A)(iv). (Complete Part I	I)									
6		A federal, sta	te, or	local government or go	vernmental unit described in see	ction 170(b)(1)(A)(v	').						
7		An organizati	on tha	at normally receives a si	ubstantial part of its support fron	n a govern	mental un	nt or fron	n the ge	neral pu	iblic			
		described in s	sectio	on 170(b)(1)(A)(vi). (Co	mplete Part II)									
8		A community	trust	described in section 17	/0(b)(1)(A)(vi) . (Complete Part I	1)								
9		_		-	more than 33 1/3 % of its support									
		receipts from	activi	ties related to its exemp	ot functions—subject to certain e	exceptions	and (2) r	o more (than 33	1/3 % o	fits			
		support from	gross	investment income and	d unrelated business taxable inc	ome (less	section 5	11 tax) fr	om busi	nesses				
	_	acquired by the	ne org	janization after June 30	, 1975 See section 509(a)(2). (Complete	Part III)							
10		•	_	•	xclusively to test for public safety		•							
11	X	•	•	•	xclusively for the benefit of, to pe				_					
					d organizations described in sec						tion			
				F==3	e-type of-supporting organization				— ī					
	(V)	a Type		b X Type II	c Type III—Function			d		e III–Ot	ner			
е	X				nization is not controlled directly and other than one or more publi						ction			
		•		-	and other than one or more publi	ciy suppoi	ieu organ	120110115	uescribe	ou iii set	20011			
		509(a)(1) or s			mination from the IRS that it is a	Type I Ty	mell or T	vne III s	unnortin	nα				
f		organization,			inimation from the fixe that it is a	19001, 19	pc 11, 01 1	ypc iii s	apportin	9				
~		-			on accepted any gift or contribut	ion from a	ny of the							
g		following per			on accepted any gift of continue		., 0,0							
		•			ntrols, either alone or together w	ith person:	s describe	ed in (ii)					Yes	No
					the supported organization?	porcorn		(,				11g(ı)		Х
				ber of a person describe	• •							11g(ii)		Х
		• •		*	escribed in (i) or (ii) above?							11g(iii)		Х
h		* *		• •	e supported organization(s)									
(i)	Nam	e of supported	<u> </u>	(ii) EIN	(III) Type of organization	(iv) Is the	organization	(v) Did y	ou notify	(vi)	Is the	(vii) Am	ount of	
	org	janization			(described on lines 1–9		sted in your		nization in of your		tion in col ized in the	supp	oort	
					above or IRC section (see instructions))	governing	document?		port?		S ?			
					(545	Yes	No	Yes	No	Yes	No			
BI	3OI	X H.S.	OF	SCIENCE										
					6	X			X	<u> </u>	Х			
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Tota	H		I		ŧ	t	1	L	S	. L	11			

Schedule A (Form 990 or 990-EZ) 2009 Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I) Section A. Public Support Calendar year (or fiscal year beginning in) (d) 2008 (e) 2009 (f) Total (a) 2005 (b) 2006 (c) 2007 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total, Add lines 1 through 3 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) Public support. Subtract line 5 from line 4 Section B. Total Support Calendar year (or fiscal year beginning in) ▶ (c) 2007 (d) 2008 (e) 2009 (f) Total (a) 2005 (b) 2006 Amounts from line 4 Gross income from interest, dividends, payments received on securities loans. rents, royalties and income from similar sources Net income from unrelated business activities, whether or not the business is regularly carried on Other income Do not include gain or 10 loss from the sale of capital assets (Explain in Part IV) Total support. Add lines 7 through 10 11 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 Section C. Computation of Public Support Percentage Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f)) 14 14 15 Public support percentage from 2008 Schedule A, Part II, line 14 15 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 33 1/3 % support test-2008. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3 % or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10%-facts-and-circumstances test—2009. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization 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 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

Section A. Public Support

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)

Ca	endar 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			İ			
	amount on line 13 for the year						
C	Add lines 7a and 7b	,, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		 	ļ	- 6-5	
8	Public support (Subtract line 7c from line 6)	_	į				
Sec	tion B. Total Support		<u> </u>	<u> </u>	ł		
	lendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9	Amounts from line 6	(4) 2000	(2) 2000	(0) 2001	(0) 2000	(0) 2000	(4) 1 5151
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						
С	Add lines 10a and 10b						
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
13	Total support. (Add lines 9, 10c, 11, and 12)						
14	First five years. If the Form 990 is for the	organization's first,	second, third, fourt	h, or fifth tax year a	as a section 501(c)(3)	
	organization, check this box and stop here	•					▶ _
Sec	tion C. Computation of Public Su	ipport Percent	age	•			
15	Public support percentage for 2009 (line 8,	column (f) divided	by line 13, column	(f))		15	
16	Public support percentage from 2008 Sche					16	%
Sec	tion D. Computation of Investme						
17	Investment income percentage for 2009 (lin			column (f))		17	<u>%</u>
18	Investment income percentage from 2008 S					18	%
19a	33 1/3 % support tests—2009. If the organ						. ┌
	17 is not more than 33 1/3 %, check this bo		-				
b	33 1/3 % support tests—2008. If the organ						⊾ □
20	line 18 is not more than 33 1/3 %, check the		=				[-
20	Private foundation. If the organization did	not check a box or	imie 14, 198, of 19	D, CHECK THIS DOX 2	ind see instructions		

Schedule A (Form 990 or 990-EZ) 2009 BRONX HIGH SCHOOL OF SCIENCE

13-3763299

Page 4

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

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047
2009
Open to Public

Inspection

Employer identification number Name of the organization BRONX HIGH SCHOOL OF SCIENCE ENDOWMENT FUND, INC. 13-3763299 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if Part I the organization answered "Yes" to Form 990, Part IV, line 6 (a) Donor advised funds (b) Funds and other accounts Total number at end of year 2 Aggregate contributions to (during year) 3 Aggregate grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds 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? Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7 Part II 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 Preservation of certified historic structure Protection of natural habitat Preservation of open space 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 2aa-Total number of conservation easements-2b **b** Total acreage restricted by conservation easements 2c c Number of conservation easements on a certified historic structure included in (a) d Number of conservation easements included in (c) acquired after 8/17/06 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year Number of states where property subject to conservation easement is located > Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section Yes No 170(h)(4)(B)(ı) and section 170(h)(4)(B)(ıı)? In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III 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 Assets included in Form 990, Part X

внѕ								
Sche	dule D (Form 990) 2009 BRONX HIGH	SCHOOL OF	SCIENCE	13-37	63299		Р	age 2
	ert III Organizations Maintaining (continu		
3	Using the organization's acquisition, accession, collection items (check all that apply)							
a b c	Public exhibition Scholarly research Preservation for future generations	d Loa e Oth	an or exchange programer	ms — — —				
4	Provide a description of the organization's collect Part XIV	ctions and explain how	they further the organi	zation's exempt purpo	se in			
5	During the year, did the organization solicit or re assets to be sold to raise funds rather than to be	e maintained as part of	the organization's coll-	ection?	V ". 5	Ye		No
Pa	IV, line 9, or reported an amo			ation answered "	Yes" to Form 99	, Parl 	:	
1a	Is the organization an agent, trustee, custodian	or other intermediary for	or contributions or othe	r assets not		С	_	٦
	included on Form 990, Part X?					Ye	es [No
b	If "Yes," explain the arrangement in Part XIV and	d complete the following	g table			Amoun		—
_	Paginaina halanaa				12	Amoun		
	Beginning balance Additions during the year				1c			
	• •							
4	Distributions during the year				1e			—
22	Ending balance Did the organization include an amount on Form	000 Bart V Ima 212			<u> </u>			1
	If "Yes," explain the arrangement in Part XIV	1 990, Part A, line 217				Y6	es	No
**********	ert V Endowment Funds. Comple	te if organization	answered "Ves" t	o Form 990 Par	t IV/ line 10			
***	Endowment i unus. Comple	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Fou	r vears	back
12	Beginning of year balance	(a) carrent year	(b) The year	(0) 1110) 0010 2001	(a) Thios yours basis	(0).00	. ,	
	Contributions			-		 	•••••	
	Net investment earnings, gains,					-		**********
d	Grants or scholarships	-						
	Other expenditures for facilities and programs							
f	Administrative expenses							*********
g	End of year balance							
2	Provide the estimated percentage of the year er	nd balance held as	•	•		.—		
	Board designated or quasi-endowment ▶	%						
	Permanent endowment ▶ %	~						
	Term endowment ▶%							
	Are there endowment funds not in the possession	on of the organization t	hat are held and admir	nistered for the				
	organization by	c. ino organization t	2.0 11010 0110 001111				Yes	No
	(i) unrelated organizations					3a(i)		
	(ii) related organizations					3a(ii)		

b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIV the intended uses of the organization's endowment funds Investments—Land, Buildings, and Equipment. See Form 990, Part X, line 10. Part VI (a) Cost or other basis (c) Accumulated Description of investment (b) Cost or other (d) Book value (investment) basis (other) depreciation 1a Land **b** Buildings c Leasehold improvements d Equipment

Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c))

Schedule D (Form 990) 2009

Part VII	Investments—Other Securities. See Form 9	90, Part X, line 12.		
	(a) Description of security or category	(b) Book value	(c) Method of	
	(including name of security)		Cost or end-of-year	ar market value
Financial derivation	atives ·			
Closely-held ed	quity interests			
Other		-		
		_		
		_		
		_		
		_ }		
		- 	 	
		_		
Total. (Column	(b) must equal Form 990, Part X, col (B) line 12)	>		,
Part VIII	Investments—Program Related. See Form 9		<u> </u>	
	(a) Description of investment type	(b) Book value	(c) Method of	f valuation
			Cost or end-of-yea	ar market value
·····				
				
-				·····
				-
-				
	7.7	>		
Part IX	Other Assets. See Form 990, Part X, line 15	· .		
	(a) Description			(b) Book value
		· · · · · · · · · · · · · · · · · · ·		

		 -		
	(b) must equal Form 990, Part X, col (B) line 15)	25	<u> </u>	
Part X	Other Liabilities. See Form 990, Part X, line			
Tederal income	(a) Description of hability	(b) Amount	-{	
rederal income	e taxes		-	
	 		-[
	 		- [
			-	
			1	
]	
			_	
			_	
	*		4	
			4	
		>	that are and the	
z. FIN 48 FO	otnote in Part XIV, provide the text of the footnote to the orga	anization's financial statements	s tnat reports the	

organization's liability for uncertain tax positions under FIN 48

<u>Sche</u>	dule D (Form 990) 2009 BRONX HIGH SCHOOL OF SCIE		3763299	Page 4
Pa	rt XI Reconciliation of Change in Net Assets from Form	990 to Audited Financia	I Statements	
1	Total revenue (Form 990, Part VIII, column (A), line 12)		1	209,082
2	Total expenses (Form 990, Part IX, column (A), line 25)		2	455,410
3	Excess or (deficit) for the year Subtract line 2 from line 1		3	<u>-246,328</u>
4	Net unrealized gains (losses) on investments		4	
5	Donated services and use of facilities		5	
6	Investment expenses		6	
7	Prior period adjustments		7	
8	Other (Describe in Part XIV)		8	
9	Total adjustments (net) Add lines 4 through 8		9	
10	Excess or (deficit) for the year per audited financial statements. Combine lines	3 and 9	10	-246,328
Pa	rt XII Reconciliation of Revenue per Audited Financial S	tatements With Revenue	e per Return	
1	Total revenue, gains, and other support per audited financial statements		1	209,082
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12			
а	Net unrealized gains on investments	2a		
b	Donated services and use of facilities	2b		
С	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIV)	2d		
е	Add lines 2a through 2d	•	2e	
3	Subtract line 2e from line 1		3	209,082
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIV)	4b		
C	Add lines 4a and 4b		4c	
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)		5	209,082
Pa	Reconciliation of Expenses per Audited Financial	Statements With Expens	ses per Return	·· ·· -
1	Total expenses and losses per audited financial statements		-1	455,410
2	Amounts included on line 1 but not on Form 990, Part IX, line 25			•
а	Donated services and use of facilities	2a		
b	Prior year adjustments	2b		
c	Other losses	2c		
d	Other (Describe in Part XIV)	2d		
8	Add lines 2a through 2d	()	2е	
3	Subtract line 2e from line 1		3	455,410
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			133/120
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIV)	4b		
	Add lines 4a and 4b	<u> </u>	4c	
	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18	,	5	455,410
	ert XIV Supplemental Information	/		433,410
		and III. Irange dia panel 4. Floori IV/ Irang		
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Pa			
	Pb, 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 comp	piete	
nis p	art to provide any additional information			
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Schedule D (Fo	rm 990) 2009	BRONX HIGH	SCHOOL OF	SCIENCE	13-3763299	Page 5
Part XIV	Suppleme	BRONX HIGH ntal Information (continued)		· · · · · · · · · · · · · · · · · · ·	
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SCHEDULE (Form 990)

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

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

2009

OMB No 1545-0047

	Complete if the organization answered "Yes" on Form 990, Part IV, lines 21 or 22.	Onen to Briblio
Department of the Treasury Internal Revenue Service	► Attach to Form 990.	Inspection
Name of the organization B.	Name of the organization BRONX HIGH SCHOOL OF SCIENCE	
(<u>a</u>	ENDOWMENT FUND, INC. 13-3763299	•
Part I General	Part i General Information on Grants and Assistance	
1 Does the organization	Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and	

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States	Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Part IV and Schedule I-1 (Form 990) if additional space is needed	1 (a) Name and address of organization (b) EIN (c) IRC section or government (a) EIN (b) EIN (c) IRC (d) Amount of cash grant (e) Amount of non-cash grant (f) Method of valuation (g) Description of (h) Purpose of grant (a) Amount of non-cash assistance or government or assistance or government (h) Purpose of grant (h) Purp	
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				2 Enter total number of section 501(c)(3) and government organizations

3 Enter total number of other organizations

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

Schedule I (Form 990) 2009

Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Schedule I (Form 990) 2009 BRONX HIGH SCHOOL OF SCIENCE

Part III

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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)	(e) Method of valuation (book, FMV, appraisal, other)
FURNITURE & EQUIPMENT		39,402			•
FURNITURE & EQUIPMENT		13,495			
FURNITURE & EQUIPMENT		4,105			
FURNITURE & EQUIPMENT		9,258			
FURNITURE & EQUIPMENT		2,315			
FURNITURE & EQUIPMENT		4,378			
FURNITURE & EQUIPMENT		53,364			

Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information PART I, LINE 2 - PROCEDURES FOR MONITORING THE USE OF GRANT FUNDS Part IV

NOT APPLICABLE, ENTITY ONLY MAKES DIRECT PAYMENTS FOR GOODS & SERVICES

(NOT GRANTS TO OTHER ENTITIES).

OMB No. 1545-0047	Open to Public inspection	Employer identification number	ı t II.)	(h) Purpose of grant or assistance									Schedule 1-1 (Form 990) 2009
		Employ 13 -	tule I (Form 990), Pa	(g) Description of non-cash assistance									
(06			States (Sched	(f) Method of valuation (book, FMV, appraisal, other)									
ule I (Form 9	l information for or Part III.		is in the United	(e) Amount of non-cash assistance									
on Sheet for Schedule I (Form 990)	► Attach to Form 990 to list additional information for Schedule I (Form 990), Part II or Part III.		ind Organization	(d) Amount of cash grant	 	 -				-			
Continuation Sh	► Attach to Form Schedule	l	Governments a	(c) IRC Code section if applicable									200
Cor		OL OF SCIENCE	Assistance to	(b) EIN									4h - 1 41 41
		BRONX HIGH SCHOOL		(a) Name and address of organization or government	1 1	1 1 1 1	1	1 1 1			1 1 1 1	1 1	and the Manual Contraction of the Manual
SCHEDULE I-1 (Form 990)	Department of the Treasury Internal Revenue Service	1	Part Continuation										Ear Driver, Ast and Dancaucal Bodinsian Ast Meting and the Instructions for Earn 000

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Schedule 1-1 (Form 990) 2009 BRONX HIGH SC	BRONX HIGH SCHOOL OF SCIENCE	E 13-3763299	3299		Page 2
Part II Continuation of Grants and Other Assistance to Individuals in the United States (Schedule I (Form 990),	er Assistance to Indivi	duals in the United State	s (Schedule I (Form 9	90), Part III.)	•
(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
FURNITURE & EQUIPMENT		000'08			•
FURNITURE & EQUIPMENT		7,904			
ART DEPARTMENT SUPPLIES		4,289			
ART DEPARTMENT SUPPLIES		1,511			
ART DEPARTMENT SUPPLIES		920			
ART DEPARTMENT SUPPLIES		177			
ART DEPARTMENT SUPPLIES		2,900			
I ro		6,455			
		5,657			
ARCHITECTURAL SERVICES		3,689			
ARCHITECTURAL SERVICES		5,351			
ARCHITECTURAL SERVICES		١ ،			
ARCHITECTURAL SERVICES					
ARCHITECTURAL SERVICES		1,022			
ARCHITECTURAL SERVICES		10,329			

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850

1,301

1,700

ARCHITECTURAL SERVICES

ARCHITECTURAL SERVICES

1,935

ARCHITECTURAL SERVICES

ARCHITECTURAL SERVICES

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Schedule 1-1 (Form 930) 2009 BRONX HIGH SCHOOL OF SCIENCE 13-3.763299 Part II Continuation of Grants and Other Assistance to Individuals in the United States (Schedule I (Form 990)	SCHOOL OF SCIENCE ther Assistance to Individu	IB 13763299 13-3763299 iduals in the United States (Sch	53299 es (Schedule I (Form §	90), Part III)	Page 2
1!	(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
ARCHITECTURAL SERVICES		4,026			•
ARCHITECTURAL SERVICES		720			
ARCHITECTURAL SERVICES	į.	1,261			•
ARCHITECTURAL SERVICES		3,729			
ARCHITECTURAL SERVICES		1,095			
ARCHITECTURAL SERVICES		2,818			
CONSTRUCTION		52,597			
CONSTRUCTION		52,597			
EDUCATIONAL SUPPORT		200			
EDUCATIONAL SUPPORT		200			
EDUCATIONAL SUPPORT		2,500			
EDUCATIONAL SUPPORT		175			
EDUCATIONAL SUPPORT		200			
EDUCATIONAL SUPPORT		200			
EDUCATIONAL SUPPORT		149			
EDUCATIONAL SUPPORT		557			
EDUCATIONAL SUPPORT		104			
EDUCATIONAL SUPPORT		212			
EDUCATIONAL SUPPORT		383			
		-			Schedule I-1 (Form 990) 2009

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Schedule 1-1 (Form 990) 2009 BRONX HIGH SCHOOL OF SCIENCE 13-3763299 Part II Continuation of Grants and Other Assistance to Individuals in the United States (Schedule I (Form 990),	SCHOOL OF SCIENCE ther Assistance to Individu	E 13-3763299 duals in the United States (Sch	3299 S (Schedule I (Form 9	90), Part III.)	Page 2
(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
EDUCATIONAL SUPPORT		200			
EDUCATIONAL SUPPORT		2.7			
EDUCATIONAL SUPPORT		175			•
EDUCATIONAL SUPPORT		175			
EDUCATIONAL SUPPORT		175			
EDUCATIONAL SUPPORT		175			
EDUCATIONAL SUPPORT		175			
EDUCATIONAL SUPPORT		95			
EDUCATIONAL SUPPORT		-899			
EDUCATIONAL SUPPORT		1,290			
EDUCATIONAL SUPPORT		986			
EDUCATIONAL SUPPORT		904			
EDUCATIONAL SUPPORT		2,037			
EDUCATIONAL SUPPORT		1,092			
EDUCATIONAL SUPPORT		1,071			
EDUCATIONAL SUPPORT		1,029			
EDUCATIONAL SUPPORT		1,428			
EDUCATIONAL SUPPORT		714			
EDUCATIONAL SUPPORT		1,428			
					Schedule I-1 (Form 990) 2009

3299

Part II Continuation of Grants and Other Assistance to Individua	ther Assistance to Individu		Is in the United States (Schedule I (Form 990),	90), Part III)	rage K
(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
EDUCATIONAL SUPPORT		630			
EDUCATIONAL SUPPORT		1,000			
MENTORING SERVICES		009			
MENTORING SERVICES		300			
MENTORING SERVICES		150			
MANN SCHOLARSHIP		4,000			
MANN SCHOLARSHIP		2,000			
MANN SCHOLARSHIP		4,000			
MANN SCHOLARSHIP		4,000			
MANN SCHOLARSHIP		4,000			
GOLDSTEIN SCHOLARSHIP		5,000			
GOLDSTEIN SCHOLARSHIP		000'5			
DAVIDSON HONORARIUM					
					Schedule I-1 (Form 990) 2009

SCHEDULE O

(Form 990)

Supplemental Information to Form 990

2009

Open to Public Inspection

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

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

BRONX HIGH SCHOOL OF SCIENCE Name of the organization ENDOWMENT FUND, INC.

Employer identification number 13-3763299

SCHEDULE O - ADDITIONAL INFORMATION

FORM 990, PART VI, LINE 11A - ORGANIZATION'S PROCESS TO REVIEW FORM 990 TREASURER REVIEWS THE RETURN WITH THE PRESIDENT AND CPA.

FORM 990, PART VI, LINE 15A - HIRING/COMPENSATION OF ORGANIZATION'S EXECUTIVE DIRECTOR:

RESEARCH, INTERVIEWING AND FINAL DECISION WAS CONDUCTED BY VARIOUS BOARD MEMBERS.

	BRONX HIGH SCHOOL C				II FUND, IN	IC.
		edges Receiv				
	Year E	Ended June	30	, 2010	,	
				-		
<u> </u>		-	\dashv			
		-	\dashv			
	***************************************	Balance	\vdash	Addition <u>al</u>	Contributions	Balance
		7/1/2009	Н	Pledges	Made	6/30/2010
		17172000	rt	1100900	maao	<u>0,00,10,10</u>
Jo	an and Jerome Jakubovitz Foundation	\$120,000 00	а		\$0.00	\$120,000 00
Bri	ian L Schorr	20,000 00	П		\$10,000 00	\$10,000 00
Şu	usan Meadow Engel	3,000 00	П		\$0 00	\$3,000 00
,All	len Klein	20,000 00			\$5,000 00	\$15,000 00
Ju	dy Bernard Baron & Ron Baron	50,000 00			\$50,000 00	\$0 00
Rc	bert Ginsberg Foundation	3,000 00	b		\$0.00	\$3,000 00
Str	uart Oran	3,000 00	С		\$0.00	\$3,000 00
	dith Flamenbaum	5,000 00	·		\$5,000 00	
	thur A Goldberg	30,000 00			\$10,000 00	\$20,000 00
Ge	erald Rosenfeld	15,000 00	С		\$15,000 00	\$0.00
	<u></u> -	+	H			
То	otals	\$269,000 00	╙	\$0 00	\$95,000 00	\$174,000 00
			Н			
- 5	ledge of \$300,000 was a grant pa	yohlo in 10 o	<u>Ц</u>			
	nnual installments of \$30,000 rest					
	e cost, care and maintenance of					
	chool of Science Holocoust Cente		 - -			-
-	Shoot of ocience Florocodat Cente	<u> </u>	\forall			
b Pa	ayable within 5 years	 	H			
<u></u>	ny accommendation	 	H			
c Pa	ayable within 2 years	-			`	

Officers, Directors, Trustees and Key Employees Year End June 30, 2010

Name and address	Title	Compensation	Pension/	Expenses
	and Hrs Applied	<u> </u>	Benefits	
CHRISTINA MCGOVERN BATER	PRESIDENT	0	0	0
198 Shunpike Road, Madison, New Jersey 07940	20 Hrs			l j
BRIAN SCHORR	VICE PRESIDENT	0	0	0
21 E 87 St , New York, NY 10128	2 Hrs			
JEROME A KOENIG	TREASURER	0	0	0
320 West End Ave, New York, NY 10023	6 Hrs	1		
Robert M Grubin	SECRETARY	0	0	0
5 Westview Avenue, Whiteplains, NY 10603	6 Hrs	1		
BRUCE JAKUBOWITZ	DIRECTOR	0	Ó	0
6 Old Roaring Brook Rd Mt Kisko, NY 10549	0 Hrs	,		
SUSAN RAUNHEIM ENGEL	DIRECTOR	0	0	0
2800 South Ocean Drive #9A, Boca Raton, FL 33432	0 Hrs			
ROSE LIPMAN Riverside Drive 185 East 68th St. New York, NY 1002+ 10027	DIRECTOR	0	0	0
185 East 66th St, New York, NY 10024 1002 7	0 Hrs			;
STANLEY BLUMENSTEIN	DIRECTOR (EX OFFICIO)	0	0	0
1550 Moffitt Ave, Hewlett, NY 11557	0 Hrs			
VINCENT GALASSO	DIRECTOR (EX OFFICIO)	0	0	0
140 Grove Street, Stamford, CT 06901	0 Hrs			
MARSHALL JAFFE	DIRECTOR	0	0	0
37 Lincoln Rd, Larchmont, NY 10538	3 Hrs			
VALERIE REIDY (BX HS OF SCIENCE)	DIRECTOR (EX OFFICIO)	0	0	0
75 West 205th St, Bronx, NY 10468	0 Hrs			
Sharon Manewitz	DIRECTOR	0	0	0
260 East 72nd Street, New York, NY 10021	3 Hrs			
Jonathan Roberts	DIRECTOR	0	0	0
90 Riverside Drive, New York, NY 10024	0 Hrs			
Debbie Coutavas	DIRECTOR (EX OFFICIO)	0	0	0
500 East 63rd Street, New York, NY 10065	0 Hrs			
Anne Reingold	DIRECTOR (EX OFFICIO)	0	0	0
222 West 83rd Street, New York, NY 10024	0 Hrs			
Michael Felderman , Boule vard	DIRECTOR	0	Ō	0
200 Riverside Drive, New York, NY 10625	2 Hrs	<u> </u>		
Sang Kim	DIRECTOR	0	0	0
2700 Ralston Avenue, Hillsborough, CA 94010	2 Hrs			