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Form **990**

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

2009

Open to Public Inspection

A Fo	rthe 2	2009 ca	lendar yea	r, or tax year beginnin	g 09-01-2009	and ending 08-31	-2010				
B Che	ck if ap	plicable	Please	C Name of organization Adler School of Professio	nal Psychology				D Employer	dentification numb	oer .
✓ Add	ress ch	ange	use IRS label or						36-2515		
┌ Nar	ne char	nge	print or	Doing Business As					E Telephone	number	
┌ Inıt	al retur	'n	type. See Specific	Number and street (or P	O box if mail is	not delivered to street	address)	Room/suite	(312) 662		
┌ _{Ter}	mınated	i	Instruc- tions.	17 N Dearborn			,		G Gross receip	ots \$ 19,617,372	
Am₁	ended r	eturn		City or town, state or co	untry, and ZIP -	. 4			-		
_		pending		CHICAGO, IL 60602	,,						
i Vh	ilcation	pending	E N						J		
				ne and address of princ mond Crossman	cipal officer				iis a group reti ates?	urn for Yes F	- No
			17 N D	earborn				anni	ates.	1 165 1	NO
			Chicag	o,IL 60602				H(b) Are a	ll affiliates incl	uded?	,
	v-evem	nt status	□) (3) ◀ (insert no)	1047(2)(1) 25					st (see instructio	ns)
			/W A D L E R		+947(a)(1) Of	527		H(c) Gro	up exemption	number 🟲	
										Γ	
				ion Trust Association	Other 🕨			L Year of fo	ormation 1952	M State of legal dor	nıcıle IL
Pa	rt I	Sum		. ,		<u> </u>					
ψ		COMMI	TTED TO	e organization's missic ADVANCING PROFES ORESPONDING TO TI	SSIONALPS	CHOLOGICAL PRA			•	ITY PROFESSIO	N A L
Governance											
Ě											
8	2	Check t	his box 📭	ıf the organization di	scontinued it:	operations or dispe	osed of	more than	25% of its ne	t assets	
			,	nembers of the govern						3	17
8			_	ident voting members (4	15
Ě	5	Total nu	umber of en	nployees (Part V , line :	2a)					5	245
Activities &				lunteers (estimate if n						6	15
٠.	7a	Total gr	oss unrela	ted business revenue 1	from Part VII	I, column (C), line 1	.2 .			7a	0
	ь	Net unr	elated busi	ness taxable income fi	rom Form 990)-T, line 34				7b	0
								Pric	or Year	Current Ye	ar
	8	Contri	butions and	d grants (Part VIII, lın		191,977	6	72,112			
Revenue	9	Progra	ım service	revenue (Part VIII, lın	e 2g)	[15,497,987	18,8	84,921	
e Ac	10	Invest	ment incor	me (Part VIII, column	(A), lines 3 , 4	, and 7d)		42,877		24,293	
ш	11	Other	revenue (P	art VIII, column (A), l)		9,674		0		
	12			dd lines 8 through 11 (), line		15,742,515	195	81,326
	13			ar amounts paid (Part I			_		172,082		58,190
	14			or for members (Part IX			· · · · · ·		0		0
	15			ompensation, employee			· ·				
8		10)	, , , , , , , , , , , , , , , , , , , ,			9,778,401	12,2	95,158			
Expenses	16a	Profes	sıonal fund	raising fees (Part IX, c	olumn (A), lı		0		0		
ਡੌ	b	Total fu	ndraising exp	enses (Part IX, column (D),	line 25) 🕨 552,						
_	17	Other	expenses ((Part IX, column (A), lı	nes 11a–11c	,11f-24f)	[5,086,005	6,6	32,554
	18	Total	expenses A	Add lines 13–17 (mus	t equal Part I	X, column (A), line 2	25)		15,036,488	19,0	85,902
	19	Reven	ue less exp	enses Subtract line 1	8 from line 1	2			706,027	4	95,424
Not Assets or Fund Balances								_	g of Current Year	End of Yea	ar
10 kg	20	Totala	assets (Par	t X, line 16)			•		11,627,588	23.4	17,686
2 A B	21			Part X, line 26)					7,478,816		40,317
žŽ	22			d balances Subtract II			ŀ		4,148,772	4,6	77,369
Par	t II	Sign	ature Blo	ock							
				erjury, I declare that I have correct, and complete Deck							
Sia-									04.43		
Sign Here		**** Signa	*** ature of office	er				2011 Date	-04-13		
		'	ey Green CF(
			e or print nam								
		Preparer	'c h			Date	Che	ck ıf	Preparer's ide	ntıfyıng number	
Paid		signature		A Kayman Principal			self-		(see instruction		
Prepa	arer's	Firm's n	me (or vour	MILLER COOPER & CO	ITD		Lenn	,51,500 F			
. سا -		Firm's name (or yours MILLER COOPER & CO LTD fi self-employed),							EIN ▶		
Use (Only		and ZIP + 4	1751 Lake Cook Road	Curto 400				LINF		

Deerfield, IL 60015

May the IRS discuss this return with the preparer shown above? (see instructions) $\,$. $\,$.

▼Yes 「No

Part III Statement of Program Service Accomplishments

1 Briefly describe the organization's mission

THE ADLER SCHOOL OF PROFESSIONAL PSYCHOLOGY IS AN INSTITUTION OF HIGHER EDUCATION COMMITTED TO ADVANCING PROFESSIONAL PSYCHOLOGICAL PRACTICE IT PROVIDES QUALITY PROFESSIONAL EDUCATION, PSYCHOLOGICAL SERVICES, COMMUNITY SERVICES, RESEARCH AND PUBLICATIONS, ANTICIPATING AND RESPONDING TO THE CONSTANT AND CHANGING NEEDS OF STUDENTS, THE PROFESSION OF PSYCHOLOGY, THE COMMUNITY, AND SOCIETY

2	Did the organization undert the prior Form 990 or 990-		t program se	rvices during the year	which were not listed on	┌ Yes ┌ No
	If "Yes," describe these ne	w services on Sch	edule O			
3	Did the organization cease services?		-	nt changes in how it con	nducts, any program	┌ Yes ┌ No
	If "Yes," describe these cha	anges on Schedule	e O			
4		(c)(4) organizatio	ns and section	on 4947(a)(1) trusts ar	largest program services by re required to report the amo ervice reported	·
4a	PROVIDED PART-TIME AND FUL	SUCH FIELDS AS CLIN	13,537,149 CERTIFICATE PI ICAL PSYCHOLO	Including grants of \$ ROGRAMS OF STUDY FOR IN DGY, MENTAL HEALTH, SOCIA	158,190) (Revenue \$ DIVIDUALS WHO CAN APPLY THEC AL SERVICE AND OTHER PSYCHOL	19,581,326) RETICAL KNOWLEDGE AND OGY RELATED PROFESSIONS IN
4b	(Code)	(Expenses \$		including grants of \$) (Revenue \$)
4c	(Code)	(Expenses \$		including grants of \$) (Revenue \$)
4.1	O. b. b. a.	Danamha Cal	lula () \			
4d	Other program services((Expenses \$		lule O) ling grants o	f \$) (Revenue \$)
4e	Total program service exp	enses ► \$	13,537,14	9		

Dart TV	Checklist	of Required	Schedules
	CHECKHAL	oi keuulieu	Juliculies

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes,"</i> complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors? 🕏	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4	Yes	
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? <i>If "Yes," complete Schedule D, Part II</i>	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 2	8		No
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		No
10	Did the organization, directly or through a related organization, hold assets in term, permanent,or quasi- endowments? If "Yes," complete Schedule D, Part V	10		Νο
11	Is the organization's answer to any of the following questions "Yes"? If so,complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable	11	Yes	
	◆ Did the organization report an amount for land, buildings, and equipment in Part X, line10? If "Yes," complete Schedule D, Part VI.			
	◆ Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.			
	◆ Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.			
	◆ Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.			
	◆ Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.			
	◆ Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X.			
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12	Yes	
12A	Was the organization included in consolidated, independent audited financial statements for the tax year? Yes No			
	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional	ļ	ļ	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	Yes	
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	Yes	
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? <i>If</i> " <i>Yes,"</i> complete Schedule F, Part I	14b	Yes	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the U S ? If "Yes," complete Schedule F, Part II	15		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the U S ? If "Yes," complete Schedule F, Part III	16	Yes	
17	Did the organization report a total of more than \$15,000, of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If</i> " <i>Yes," complete Schedule G, Part I</i>	17		Νο
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If</i> "Yes," complete Schedule G, Part II	18		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		N o
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		Νo

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		Νο
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	22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer questions 24b-24d and complete Schedule K. If "No," go to line 25	24a	Yes	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? <i>If</i> "Yes," complete Schedule L, Part III	27		No
28	Was the organization a party to a business transaction with one of the following parties? (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV			
_		28a		No
D	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
c	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or owner? If "Yes," complete Schedule L, Part IV	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If</i> "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
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		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? <i>If</i> "Yes," complete Schedule R, Part I	33		No
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		No
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		No
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		
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		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	_
		F	orm 990	(2009)

art V	Statements	Regarding	Other 1	IRS Filings	and Tax	Compliance
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			Yes	No
la	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable			
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?	1 c		
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			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions)	2b	Yes	
a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this	2-		N. o
h	return?	3a 3b		Νο
a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	Yes	
b	If "Yes," enter the name of the foreign country ▶ CA See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
а	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Νο
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Νo
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		
1	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		Νo
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).			
	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		Νo
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		Νo
e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		Νo
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Νo
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		
	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
	Sponsoring organizations maintaining donor advised funds.			
а	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		
)	Section 501(c)(7) organizations. Enter			
	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			
L	Section 501(c)(12) organizations. Enter			
а	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)			
2a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			

MR RAY CROSSMAN 17 N DEARBORN Chicago, IL 60602 (312) 662-4000

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

## Enter the number of voting members of the governing body	Se	ction A. Governing Body and Management					
Describe number of voting members that are independent Did any officer, director, trustee, or key employee have a family relationship or a bismess relationship with any other officer, director, trustee, or key employee have a family relationship or a bismess relationship with any other officer, director, trustee, or key employee have a family relationship or a bismess relationship with any other organization delegate control over memagement duties customarily performed by or under the director. Did the organization delegate control over memagement duties customarily performed by or under the director. Did the organization make any significant changes to its organization documents since the prior form 390 was like? Did the organization make any significant changes to its organization of the organization's assets? Did the organization have members, stockholders, or other persons? Did the organization have members, stockholders, or other persons? Did the organization have members, stockholders, or other persons? Did the organization of the governing body subject to approval by members, stockholders, or other persons? Did the organization of the governing body subject to approval by members, stockholders, or other persons? Did the organization of the governing body subject to approval by members, stockholders, or other persons? Did the organization of the governing body subject to approval by members, stockholders, or other persons? Did the stockholders of the governing body? Did the organization of the governing body? Did the organization of the governing body? Did the organization device the persons of the governing body? Did the organization of the governing body and the stockholders of the governing body by the stockholders. Did the persons of the governing body subject to approve the persons of the governing body by the stockholders. Did the persons of the governing body subject to approve the persons of the governing body by the stockholders. Did the providers of the governing body subject						Yes	No
Describe number of voting members that are independent. 1 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. 3 Did any officer, director, trustee, or key employee. 4 Did the organization delegate control over management dutus customanily performed by or under the direct. 5 Did the organization delegate control over management dutus customanily performed by or under the direct. 6 Did the organization make any significant changes to its organization of the organization sasses? 6 Did the organization become aware during the year of a material diversion of the organization's assets? 7 Did the organization have members or stockholders. 7 Did the organization have members or stockholders. 8 Did the organization have members of stockholders. 9 Did the organization have members of stockholders. 9 Did the organization of the governing body subject to approval by members, stockholders, or other persons? 10 Did the organization of the governing body subject to approval by members, stockholders, or other persons? 10 Did the organization of the governing body subject to approval by members, stockholders, or other persons? 11 Did the following 12 Did the organization of the governing body subject to approval by members, stockholders, or other persons? 13 Did the stockholders. 14 Did the following 15 Did the organization of the governing body? 16 Did the organization of the governing body? 17 Did the stockholders. 18 Did the organization of the governing body subject to approval by members, stockholders, or other persons? 18 Did the organization of the governing body subject to approval by members, stockholders, or other persons? 18 Did the province of the governing body subject to approval by members, stockholders. 19 Did the province of the governing body subject to approval by members, stockholders. 19 Did the province of the governing body subject to approval by members of the govern							
Describe number of voting members that are independent. 1 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. 3 Did any officer, director, trustee, or key employee. 4 Did the organization delegate control over management dutus customanily performed by or under the direct. 5 Did the organization delegate control over management dutus customanily performed by or under the direct. 6 Did the organization make any significant changes to its organization of the organization sasses? 6 Did the organization become aware during the year of a material diversion of the organization's assets? 7 Did the organization have members or stockholders. 7 Did the organization have members or stockholders. 8 Did the organization have members of stockholders. 9 Did the organization have members of stockholders. 9 Did the organization of the governing body subject to approval by members, stockholders, or other persons? 10 Did the organization of the governing body subject to approval by members, stockholders, or other persons? 10 Did the organization of the governing body subject to approval by members, stockholders, or other persons? 11 Did the following 12 Did the organization of the governing body subject to approval by members, stockholders, or other persons? 13 Did the stockholders. 14 Did the following 15 Did the organization of the governing body? 16 Did the organization of the governing body? 17 Did the stockholders. 18 Did the organization of the governing body subject to approval by members, stockholders, or other persons? 18 Did the organization of the governing body subject to approval by members, stockholders, or other persons? 18 Did the province of the governing body subject to approval by members, stockholders. 19 Did the province of the governing body subject to approval by members, stockholders. 19 Did the province of the governing body subject to approval by members of the govern	12	Enter the number of voting members of the governing body	12	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 employees to a management company or other person. 3 Did the organization dategate control over management dates customanity performed by or under the direct supervisor of officers, directors or trusteers, or key employees to a management company or other person. 5 Did the organization become aware during the year of a material diversion of the organizations assetts? 5 Did the organization have members or stockholders? 6 Does the organization have members or stockholders? 7 Does the organization have members or stockholders? 8 Are any designation have members or stockholders? 8 Are any designation have members or stockholders, or other persons who may elect one or more members of the programany body? 9 Does the organization have members, stockholders, or other persons who may elect one or more members of the programany body? 9 Does the organization contemporaneously document the meetings held or written actions undertaken during the year by the following 10 The governing body? 11 Did the organization become aware during the persons who may elect one or more members of the year by the following 12 The governing body? 13 Describer any officer, director, trustee, or key a smoloyee listed in Part VII, Section A, who cannot be reached this year by the following 13 Describer any officer, director, trustee, or key a smoloyee listed in Part VII, Section A, who cannot be reached the year by the following by the programizations and addresses in Schedule O. 14 Describer any officer, director, trustee, or key a smoloyee listed in Part VII, Section A, who cannot be reached the year by the programization have written policies and procedures governing the activities of such chapters, by a fill-activated by the programization of the program program of the program program of the program program program provided a copy of this Form 990 to all members of its g		· · · · · · · · · · · · · · · · · · ·					
a Due the organization make any significant changes to its organizational selegate 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? 4		- '					
supervision of officers, directors of trustees, or key employees to a management company or other person? A Did the organization make any significant changes to its organizational documents since the prior Form 990 was fell of the organization make any significant changes to its organization documents since the prior Form 990 was fell organization become aware during the year of a material diversion of the organization sasests? 5 Did the organization have members or stockholders? 6 Dees the organization have members or stockholders? 7 Did be organization organization organization become aware during the year of a material diversion of the organization in main and address? 1f Yes, provide the names and addresses in Schadule 0 Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) 10 Dees the organization have local chapters, brenches, or affiliates? 11 Has the organization have local chapters, brenches, or affiliates? 12 Dees the organization have a written policies and procedures governing the activates of such chapters, affiliates, and branches to an urrel their organization organization? 12 Dees the organization provided a copy of this Form 990 to all members of its governing body before filing the form? 13 Dees the organization have a written conflict of interest policy? If Yio, "go to fine 13 14 Describe in Schedule O the process, fiany, used by the organization to review the Form 990 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and compensation of the following persons include a review and approval by independent persons, comparability data,	_				2		Νo
Finish 2 Pool the organization become aware during the year of a material diversion of the organization's assets? 5 No Deas the organization have members or stockholders? 6 Deas the organization have members or stockholders? 7 Deas the organization have members, stockholders? 7 Deas the organization have members, stockholders, or other persons who may elect one or more members of the governing body? 8 Dot the organization organization organization of the governing body subject to approval by members, stockholders, or other persons? 8 Dot the organization may be a stock organization organization organization may be a stock organization organization have local chapters, branches, or affiliates? 10 Deas the organization have local chapters, branches, or affiliates? 10 Deas the organization have local chapters, branches, or affiliates? 11 Has the organization have local chapters, branches, or affiliates? 12 Deas the organization have a written polices and procedures governing the activates of such chapters, affiliates, and branches to ensure their organization theorems of the organization? 12 Deas the organization provided a copy of this Form 990 to all members of its governing body before filing the form? 13 Deas the organization have a written conflict of interest policy? If *No, *go to fine 13 14 Deas the organization have a written organization to review the Form 990 15 Do the process for determining compensation of the following persons includes a review and approval by independent persons, comparability data, and comistently monitor and enforce compliance with the policy? If *Yes in the organization have a written document retention and destruction policy? 16 Do the organization have a written document retention and destruction policy? 17 Do the process for determining compensation of the following persons includes a review and approval by independent persons, comparability data	3				3		Νο
Does the organization have members or stockholders? Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body? Are any discussions of the governing body subject to approval by members, stockholders, or other persons? Are any discussions of the governing body subject to approval by members, stockholders, or other persons? But the organization chembers are used to approval by members, stockholders, or other persons? But the committee with authority to act on behalf of the governing body? Section B. Policies (This Section behalf of the governing body? Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Section B. Policies (This Section B requests information and processes in Schedule O the process, if any, used by the organization of eview the Form 990 If "Yes," does the organization have a written policies of the organization of eview the Form 990 Describe in Schedule O the process, if any, used by the organization of eview the Form 990 Describe in Schedule	4		ince t	he prior Form 990 was	4		Νo
The poses the organization have members, stockholders, or other persons who may elect one or more members of the governing body? A rea my decisions of the governing body subject to approval by members, stockholders, or other persons? 7b No No Do the organization contemporaneously document the meetings held or written actions undertaken during the year by the following a The governing body? 8a Yes Set Carl or By organization for the governing body? 15 Internal officers, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organizations mailing address? If Yes," provide the names and addresses in Schedule O. Section B, Policies (This Section B requests information about policies not required by the Internal Revenue Code.) No Do set the organization have local chapters, branches, or affiliates? No Do se the organization have local chapters, branches, or affiliates? No Do set the organization have local chapters, branches, or affiliates? No Do set the organization have local chapters, branches, or affiliates? No Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form? Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form? A certain Do set the organization have a written conflict of interest policy? If No, go to line 13 Does the organization have a written organization or review the Form 990 Do set the organization regularly and consistently monitor and enforce compliance with the policy? If Yes," Do set the organization have a written document retention and destruction policy? Do set the organization have a written document retention and destruction policy? The organization is chedule O how this is done The organization have a written document reference or policy and policy and policy and policy and financial to set the organization or fine following persons in clude a review and approval by independent persons, comparability data	5	Did the organization become aware during the year of a material diversion of the organization	anızat	ion's assets?	5		Νo
by Are any decisions of the governing body subject to approval by members, stockholders, or other persons? by Are any decisions of the governing body subject to approval by members, stockholders, or other persons? by Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following a The governing body? by Each committee with authority to act on behalf of the governing body? by Each committee with authority to act on behalf of the governing body? committee with authority to act on behalf of the governing body? by Each committee with authority to act on behalf of the governing body? committee with authority to act on behalf of the governing body? 1 Is there any officer, director, furstee, 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. Section B. Policles (This Section B requests information about policies not required by the Internal Revenue Code). 10 Does the organization have local chapters, branches, or affiliates? 11 Has 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 have a written policies and procedures governing the activities of such chapters, and the process, if any, used by the organization to review the Form 990 11 Has the organization have a written conflict of interest policy? If Wo," go to line 13 12 Does the organization have a written conflict of interest policy? If Wo," go to line 13 13 Yes 14 Does the organization have a written whistleblower policy? 14 Yes 15 Does the organization have a written whistleblower policy? 15 Does the organization have a written document retention and destruction policy? 16 Does the organization have a written document retention and destruction policy? 17 Yes 18 Does the organization invest in, co	6	Does the organization have members or stockholders?			6		Νo
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following a The governing body?	7a				7a		Νο
year by the following a The governing body? b Each committee with authority to act on behalf of the governing body? class a The governing body? b Each committee with authority to act on behalf of the governing body? class and defease of the governing body and the governing body and the governing body and the governing body and the governing body before filling the form? Let be seen organization have local chapters, branches, or affiliates? be seen organization have local chapters, branches, or affiliates? be seen organization provided a copy of this Form 990 to all members of its governing body before filling the form? be seen organization provided a copy of this Form 990 to all members of its governing body before filling the form? be seen organization have a written conflict of interest policy? If "No," go to line 13 and 12 by seen offices, directors or trustees, and key employees required to disclose annually interests that could give inside a copy of the seen of Schedule O how this is done. Cobes the organization have a written document retention and deforce compliance with the policy? If "Yes," describe in Schedule O how this is done. Cobes the organization have a written whistleblower policy? Does the organization have a written document retention and destruction policy? The possible organization have a written document retention and destruction policy? The possible organization have a written document retention and destruction of the deliberation and decision? The organization's Cobe possible organization. The organization have a written document retention and destruction of the deliberation and decision? The organization have a written doc	b	Are any decisions of the governing body subject to approval by members, stockhold	ers, o	rother persons?	7b		Νo
Back Committee with authority to act on behalf of the governing body? 1	8		ons ur	ndertaken during the			
Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) 10a Possible Policies (This Section B requests information about policies not required by the Internal Revenue Code.) 10a Possible Policies (This Section B requests information about policies not required by the Internal Revenue Code.) 10a Possible Policies (This Section B requests information about policies not required by the Internal Revenue Code.) 10a Possible Policies (This Section B requests information about policies not required by the Internal Policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization? 10b Possible Policies (This Section B) Possible Policies and procedures governing body before filing the form? 10b Possible Policies (This Section B) Possible P	а	The governing body?			8a	Yes	
section B. Policies (This Section B requests information about policies not required by the International Revenue Code.) For Section B. Policies (This Section B requests information about policies not required by the International Revenue Code.) For Section B. Policies (This Section B requests information about policies not required by the International Revenue Code.) For Section B. Policies (This Section B requests information about policies not required by the International Revenue Code.) For Section B. Policies (This Section B requests information about policies and procedures governing the activities of such chapters, and siliciates, and branches to ensure their operations are consistent with those of the organization? For Section B. Policies (This Section B) For Section B) For Section B required to Grant Revenue Revenu	b	Each committee with authority to act on behalf of the governing body?	•		8b	Yes	
Note the organization have local chapters, branches, or affiliates? 10 Poes the organization have local chapters, branches, or affiliates? 11 Poes the organization provided a copy of this Form 990 to all members of its governing the activities of such chapters of affiliates, and branches to ensure their operations are consistent with those of the organization? 11 Poes the organization provided a copy of this Form 990 to all members of its governing body before filing the form of the organization provided a copy of this Form 990 to all members of its governing body before filing the form of the organization provided a copy of this Form 990 to all members of its governing body before filing the form of the organization have a written conflict of interest policy? If "No," go to line 13 12 Poes the organization have a written conflict of interest policy? If "No," go to line 13 13 Poes the organization have a written conflict of interest policy? If "No," go to line 13 14 Poes the organization have a written whistleblower policy? If "No," go to line 13 15 Poes the organization have a written whistleblower policy? If "No," go to line 13 16 Poes the organization have a written whistleblower policy? 17 Poes the organization have a written whistleblower policy? 18 Poes the organization have a written whistleblower policy? 19 Poes the organization have a written whistleblower policy? 19 Poes the organization have a written whistleblower policy? 20 Poes the organization have a written whistleblower policy? 21 Poes officers or key employees of the organization and decision? 22 Poes the organization have a written whistleblower policy and poes in the following persons include a review and approval by individual and contemporaneous substantiation of the deliberation and decision? 22 Poes the organization and decision? 23 Poes organization in poes to determining compensation of the following persons include a review and approval by the poes in Schedule O (See instructions) 23 Poes organization in poes to dec	9				9		Νο
Yes No No 10a Does the organization have local chapters, branches, or affiliates? 16 17 18 19 19 19 19 19 19 19		· · · · · · · · · · · · · · · · · · ·	requi	red by the Internal			
10a Yes 11 Has the organization have local chapters, branches, or affiliates? 10b Yes 11 Has the organization bave written policies and procedures governing the activities of such chapters, and branches to ensure their operations are consistent with those of the organization? 10b Yes 11 Has the organization provided a copy of this Form 990 to all members of its governing body before filling the form? 11 No 11A Describe in Schedule O the process, if any, used by the organization to review the Form 990 11 No 11B Does the organization have a written conflict of interest policy? If "No," go to line 13 12a Yes 12a Does the organization have a written conflict of interest policy? If "No," go to line 13 12b Yes 12b Yes 12c Yes 13c Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," 13c Ves 13d Does the organization have a written whistleblower policy? 14d Yes 15d Does the organization have a written whistleblower policy? 14d Yes 15d Does the organization have a written document retention and destruction policy? 14d Yes 15d Does the organization have a written document retention and destruction policy? 14d Yes 15d 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? 15a Yes 15d Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 15d Yes 15d Y	ке	venue Code.)				Voc	No
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? Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form? 11 Poscribe in Schedule O the process, if any, used by the organization to review the Form 990	10a	Does the organization have local chanters, branches, or affiliates?			10a		140
affiliates, and branches to ensure their operations are consistent with those of the organization? 10							
11					10b	Yes	
12a Describe in Schedule O the process, if any, used by the organization to review the Form 990	11	Has the organization provided a copy of this Form 990 to all members of its governi	ng boo	y before filing the form?	11		Νo
to conflicts?	11A	Describe in Schedule O the process, if any, used by the organization to review the F	orm 9	90			
c Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12a	Does the organization have a written conflict of interest policy? If "No," go to line 13			12a	Yes	
describe in Schedule O how this is done		Are officers, directors or trustees, and key employees required to disclose annually	ıntere	sts that could give rise	12b	Yes	
14 Does the organization have a written document retention and destruction policy?	c		th the	policy? If "Yes,"	12c	Yes	
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	13	Does the organization have a written whistleblower policy?			13	Yes	
a The organization's CEO, Executive Director, or top management official	14	Does the organization have a written document retention and destruction policy? .			14	Yes	
the officers or key employees of the organization	15	, , , , , , , , , , , , , , , , , , , ,					
If "Yes" to line a or b, describe the process in Schedule O (See instructions) 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	а	The organization's CEO, Executive Director, or top management official			15a	Yes	
Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	b	Other officers or key employees of the organization $\ldots \ldots \ldots \ldots$			15b	Yes	
taxable entity during the year?		If "Yes" to line a or b, describe the process in Schedule O (See instructions)					
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?	16a		orsım	ılar arrangement wıth a	16a		Νο
Section C. Disclosure 17 List the States with which a copy of this Form 990 is required to be filed IL 18 Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you make these available. Check all that apply Own website Another's website Upon request 19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public. See Additional Data Table.	ь	, , ,	anızat	ion to evaluate its			
List the States with which a copy of this Form 990 is required to be filed ►IL Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you make these available. Check all that apply Own website ✓ Another's website ✓ Upon request Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public. See Additional Data Table		participation in joint venture arrangements under applicable federal tax law, and take	en ste	ps to safeguard the	16b		
Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you make these available. Check all that apply Own website. Another's website. Upon request Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public. See Additional Data Table	Se	ction C. Disclosure					
(3)s only) available for public inspection. Indicate how you make these available. Check all that apply Own website. Another's website. Upon request Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public. See Additional Data Table.	17	List the States with which a copy of this Form 990 is required to be filed ▶ IL					
19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public See Additional Data Table	18	(3)s only) available for public inspection. Indicate how you make these available. Ch					
interest policy, and financial statements available to the public. See Additional Data Table	19		na doc	uments, conflict of			
	20	interest policy, and financial statements available to the public See Additional Data	Table	•	e oras	nizatio	n ▶ -

Part VIII 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, and current key employees 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, or 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 i	not compen	sate any	y curi	rent	or fo	rmer	ffice	r, dırector, trustee	or key employee	
(A) Name and Title	(B) Average hours	Posi t	(C tion (hat a	ched	ckal)	I		(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of other
	per week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	from the organization (W- 2/1099-MISC)	from related organizations (W- 2/1099- MISC)	compensation from the organization and related organizations
See add'l data										

1b	Total	0		226,794
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 ►16			
			Yes	No
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If</i> " <i>Yes,"</i> complete Schedule <i>J</i> for such individual	3		No
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such			
	ındıvıdual	4	Yes	
5	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 I for such person	5		No
<u>S</u>	ection 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) (B) Name and business address Description of services		(C Comper	
2	Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization ►0			
		F	orm 99 0	(2009)

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Form 990 (2009)

Form 99								Page 9
Part v	/1111	Statement o	of Revenue		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
\$ 2	1a	Federated cam	paigns 1a					
亞吳	ь	Membership du	es 1b					
£g	c	Fundraising eve	ents 1c					
#¥	d	Related organiz	rations 1d					
% ≣	e	Government grants	s (contributions) 1e	488,903				
ੂੰ ਨੂੰ ਨੂੰ	f	All other contribution	ons, gifts, grants, and 1f	183,209				i i
ē Fe	g	sımılar amounts no Noncash contri	bt included above butions included in					
Contributions, gifts, grants and other similar amounts		lines 1a-1f \$ _						
္မ	h	Total. Add lines	s 1a-1f	▶	672,112			
				Business Code				
eun	2a	TUITION & FEES		900,099	18,330,309	18,330,309		
₽e	ь	SPONSORED ACTIV	/ITY	900,099	212,117	212,117		
Program Service Revenue	c	PSYCH SERV CENT	ER	541,900	285,645	285,645		
Ser.	d	OTHER REVENUE		900,099	56,850	56,850		
Ξ	e							
<u>Š</u>	f	All other progra	am service revenue					
Ě	g	Total. Add lines	s 2a – 2f		18,884,921			
	3		ome (including dividend	+				
		and other simila	aramounts)	. ▶	24,293			24,293
	4	Income from inves	tment of tax-exempt bond p	oroceeds	0			
	5	Royalties		•	0			
	_	Gross Rents	(ı) Real	(II) Personal				
	6а ь	Less rental						
		expenses Rental income						
	_	or (loss)						
	a	Net rental incol	me or (loss) (i) Securities	(II) O ther				
	7a	Gross amount from sales of assets other than inventory	(i) securities	(ii) o tilei				
	ь	Less cost or other basis and						
		sales expenses Gain or (loss)						
	c d		s)		0			
	8a	Gross income f	rom fundraising					
Other Revenue		events (not inc \$	reported on line 1c)					
ŧ	Ь		penses b		_			
U	c 9a		loss) from fundraising e	events F	0			
	_	See Part IV , lin	а					
	b c		penses b (loss) from gaming activ	vities►	0			
	10a	Gross sales of returns and allo		36,046				
	ь		oods sold b	36,046				
	С		loss) from sales of inve		0			0
		Miscellaneous	s Revenue	Business Code				
	11a							
	Ь							
	C C	Λ II o+bo= =						
	d e	All other revenue Total. Add lines	· · · · · · · · · · · · · · · · · · ·					+
					0			
	12	lotal revenue.	See Instructions	▶-	19,581,326	18,884,921	C	24,293

Part IX Statement of Functional Expenses
Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

	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).									
			(B), (C), and ((B)	(D).	(D)					
	ot include amounts reported on lines 6b, o, 9b, and 10b of Part VIII.	(A) Total expenses	Program service expenses	Management and general expenses	Fundraising expenses					
1	Grants and other assistance to governments and organizations									
	in the U.S. See Part IV, line 21	5,000	5,000							
2	Grants and other assistance to individuals in the									
	U S See Part IV, line 22	124,304	124,304							
3	Grants and other assistance to governments,									
	organizations, and individuals outside the U.S. See									
_	Part IV, lines 15 and 16	28,886	28,886							
4	Benefits paid to or for members	0								
5	Compensation of current officers, directors, trustees, and key employees	1,529,258	384,950	939,533	204,775					
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								
7	Other salaries and wages	9,031,891	7,708,408	1,192,949	130,534					
8	Pension plan contributions (include section 401(k) and section	3,031,031	7,700,100	1,132,313	130,331					
J	403(b) employer contributions)	0								
9	Other employee benefits	1,134,732	816,902	299,489	18,341					
10	Payroll taxes	599,277	432,557	148,467	18,253					
11	Fees for services (non-employees)									
а	Management	0								
b	Legal	67,297		67,297						
С	Accounting	74,695		74,695						
d	Lobbying	0		·						
e	Professional fundraising See Part IV, line 17	0								
f	Investment management fees	0								
g	Other	0								
12	Advertising and promotion	78,674		78,674						
13	Office expenses	0		70,071						
14	Information technology	0								
15	Royalties	0								
16	Occupancy	1,890,856	1,557,677	285,435	47,744					
17	Travel	177,404	90,077	81,965	5,362					
18	Payments of travel or entertainment expenses for any federal,	177,404	90,077	81,965	3,362					
	state, or local public officials	0								
19	Conferences, conventions, and meetings	162,612	30,028	132,584						
20	Interest	5,621		5,621						
21	Payments to affiliates	0								
22	Depreciation, depletion, and amortization	680,490	605,636	68,049	6,805					
23	Insurance	150,166	69,275	80,113	778					
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)									
а	DUES & MEMBERSHIPS	186,435	116,451	54,533	15,451					
Ь	SUPPLIES	326,903	185,953	133,393	7,557					
c	CONSULTANTS	766,005	136,175	577,836	51,994					
d	CATERING	306,345	242,356	57,103	6,886					
e	STUDENT RECRUITMENT & SERVICES	559,917	559,917	,	.,					
f	All other expenses	1,199,134	442,597	718,737	37,800					
25	Total functional expenses. Add lines 1 through 24f	19,085,902	13,537,149	4,996,473	552,280					
26	Joint costs. Check here ► ☐ If following SOP 98-2	19,003,902	13,337,149	7,990,473	332,200					
	Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation									

Part X Balance Sheet (A) (B) Beginning of year End of year 222 123 1 1 Cash—non-interest-bearing 2.128.111 2 5.029.851 2 120,477 161,301 3 3 4 6.139.109 4 8.202.424 5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of 5 6 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete Part II of 6 7 7.169 7,169 453,458 417,888 Land, buildings, and equipment cost or other basis Complete 10.824.961 10a 10a Part VI of Schedule D 10b 2.588.716 b Less accumulated depreciation 1,665,869 10c 8.236.245 1,068,761 11 1.110.885 11 12 12 Investments—other securities See Part IV, line 11 13 13 Investments—program-related See Part IV, line 11 . . 14 14 44.412 15 15 251.800 16 11,627,588 16 23,417,686 Total assets. Add lines 1 through 15 (must equal line 34) . . . 880.256 17 3.472.790 17 Accounts payable and accrued expenses . 18 18 6,443,117 19 8,924,550 19 20 20 5,100,000 Liabilities 21 Escrow or custodial account liability Complete Part IV of Schedule D . . . 21 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified 22 οl 1,000,000 23 23 Secured mortgages and notes payable to unrelated third parties . . 24 Unsecured notes and loans payable to unrelated third parties 24 155.443 25 Other liabilities Complete Part X of Schedule D 25 242.977 26 **Total liabilities.** Add lines 17 through 25 7,478,816 18,740,317 Organizations that follow SFAS 117, check here ▶ 🔽 and complete lines 27 Balances through 29, and lines 33 and 34. 4.148.772 4.677.369 27 Unrestricted net assets 27 28 28 Temporarily restricted net assets Fund 29 29 Permanently restricted net assets Organizations that do not follow SFAS 117, check here ▶ □ and complete lines 30 through 34. ö 30 30 Capital stock or trust principal, or current funds . . . Assets 31 Paid-in or capital surplus, or land, building or equipment fund 31 32 32 Retained earnings, endowment, accumulated income, or other funds ¥ 4,148,772 4,677,369 33 Total net assets or fund balances 33 34 Total liabilities and net assets/fund balances 11.627.588 23,417,686 34

			Yes	No
1	Accounting method used to prepare the Form 990			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		Νo
b	Were the organization's financial statements audited by an independent accountant?	2b	Yes	
c	If "Yes," to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	2c	Yes	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both			
	▼ Separate basis			
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	Yes	
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	Yes	

Form **990** (2009)

OMB No 1545-0047

Inspection

SCHEDULE A

(Form 990 or 990EZ)

Name of the organization

Adler School of Professional Psychology

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

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

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

Employer identification number

36-2515281

									30-231320			
	rt I			olic Charity Stat						tructions		
he o	_			foundation because)			
1	<u> </u>	A churc	h, conventio	on of churches, or as	sociation of o	churches s e	ection 170(b)	(1)(A)(i).				
2	굣			ın section 170(b)(1)			•					
3		A hospi	tal or a coop	erative hospital serv	vice organiza	ition describ	ed in section	170(b)(1)(A	A)(iii).			
4	Γ		A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the nospital's name, city, and state									
5	Г	An orga	nızatıon ope	rated for the benefit	of a college	or university	y owned or op	erated by a g	jovernmental	unıt describ	_ ed in	
		section	170(b)(1)(<i>A</i>	\)(iv). (Complete Pa	rt II)							
6	Г	A federa	al, state, or l	ocal government or	governmenta	ıl unıt descr	ıbed ın sectio	n 170(b)(1)(A)(v).			
7	Γ	describe	ed ın	t normally receives a \)(vi) (Complete Pa		part of its s	upport from a	a government	al unit or froi	n the genera	public	
8	Γ	A comm	nunity trust o	described in section	170(b)(1)(A)(vi) (Com	plete Part II)				
9	Γ	An orga	nızatıon tha	t normally receives	(1) more tha	n 331/3% o	f its support f	rom contribut	tions, membe	ership fees, a	nd gro	SS
		receipts	from activit	ties related to its ex	empt function	ns—subject	to certain ex	ceptions, and	d (2) no more	than 331/3%	of	
		ıts supp	ort from gro	ss investment incom	ne and unrela	ited busines	s taxable ınc	ome (less se	ction 511 ta	x) from busın	esses	
		acquire	d by the orga	anızatıon after June 3	30,1975 Se	e section 5	09(a)(2). (Co	mplete Part I	III)			
10	Γ	An orga	nızatıon org	anızed and operated	exclusively	to test for p	ublic safety s	See section 5 (09(a)(4).			
11 e	Г Г	one or n the box a By chec	nore publicly that describ Type I king this bo	anized and operated visupported organiza ves the type of support visual Type II x, I certify that the commanagers and other	tions describ orting organiz c [organization i	ped in section and control Type III	on 509(a)(1) omplete lines - Functionally olled directly	or section 50 11e through , integrated or indirectly l	99(a)(2) See 11h d by one or mo	section 509(Type II re disqualifie	a)(3). I - Oth d pers	Check ner ons
f g		If the or check tl Since A	his box ugust 17, 2	eceived a written de 006, has the organiz						supporting (organız	ration,
			g persons? rson who dir	ectly or indirectly co	ntrols eithe	ralone orto	aether with n	ersons descr	nhed in (ii)		Yes	No
				overning body of the	•				(,	11g(i)	1.05	No
				r of a person describ						11g(ii)		No
			•	ed entity of a person	` ,		ove?			11g(iii)		No
h				g information about t								
				•		J	,					
(i) Name suppo organiz		ne of (ii) (described on col (i) listed in your governing document?		ion in ted in rning	(v) Did you no organizat col (i) of suppo	ion in your	(vi) Is the organizat col (i) org in the U	e Ion In anized	A m	vii) ount of oport?		
				(see instructions))	Yes	No	Yes	No	Yes	No		
				•								
ot a	1											

ınstructions

P	Support Schedule (Complete only if yo					and 170(b)	(1)(A)(vi)
S	ection A. Public Support	a checked tile	DOX OII IIIC 3,	,, or o or rare.	÷·/		
	endar year (or fiscal year beginning	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
	ın)	(a) 2005	(b) 2006	(6) 2007	(d) 2008	(e) 2009	(I) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not						
	include any "unusual						
_	grants ") Tax revenues levied for the						
2	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) Dublic Support Subtract line F from						
6	Public Support. Subtract line 5 from line 4						
S	ection B. Total Support	1		-			
	endar year (or fiscal year beginning	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
	ın)	(a) 2005	(b) 2000	(6) 2007	(d) 2008	(e) 2009	(1) Total
7	A mounts from line 4						
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar						
9	sources Net income from unrelated						
9	business activities, whether or						
	not the business is regularly						
	carried on						
10	Other income (Explain in Part						
	IV) Do not include gain or loss						
	from the sale of capital assets						
11	Total support (Add lines 7						
4.5	through 10)	/5					
12	Gross receipts from related activities	,	•			12	
13	First Five Years If the Form 990 is f	or the organizati	on's first, second	, third, fourth, or	fifth tax year as a	501(c)(3) orga	inization, ▶□
	check this box and stop here						-1
S	ection C. Computation of Pub	lic Support P	ercentage				
14	Public Support Percentage for 2009			11 column (f))		14	
15	Public Support Percentage for 2008	Schedule A . Pa	rt II. line 14			15	
	33 1/3% support test—2009. If the	•	,	v on line 13 and	line 14 is 33 1/30		k this hox
	and stop here. The organization qua	-		·	IIIIC 14 13 33 1/3/	o or more, ence	▶ □
ь	33 1/3% support test—2008. If the				5a, and line 15 is	33 1/3% or moi	
	box and stop here. The organization				,		▶
17a	10%-facts-and-circumstances test-	-2009. If the org	anızatıon dıd not	check a box on lı	ne 13, 16a, or 16	b and line 14	
	ıs 10% or more, and ıf the organizat						
	in Part IV how the organization mee	ts the "facts and	l cırcumstances"	test The organiz	ration qualifies as	a publicly supp	
L	organization	_2009 Ifthe c==	onization did net	chack a bay as li	no 12 165 164	or 17a and line	▶□
D	10%-facts-and-circumstances test- 15 is 10% or more, and if the organ	_					
	Explain in Part IV how the organizat						clv
	supported organization						▶ ┌
10	Deiveta Farmdation Ifthe averages	on did not obselv	a hay an line 12	16- 16- 17-	17	hay and cas	•

▶□

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

	(Complete only if you	cnecked the	box on line 9 o	r Part I.)			
	ction A. Public Support			<u> </u>	1	T	ı
Cale	ndar 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						
3	purpose Gross receipts from activities that				+		
3	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	A mounts included on lines 1, 2, and 3 received from disqualified						
	persons				1		
ь	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						
с	Add lines 7a and 7b						
8	Public Support (Subtract line 7c						
	from line 6)						
	ction B. Total Support		1			1	Γ
Cale	ndar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9	A mounts from line 6						
10a	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources						
ь	Unrelated business taxable						
	ıncome (less section 511 taxes)						
	from businesses acquired after						
_	June 30, 1975 Add lines 10a and 10b						
c 11	Net income from unrelated						
11	business activities not included						
	ın lıne 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,						
14	11 and 12) First Five Years If the Form 990 is for	or the organizat	lon's first, second	L third fourth or	l fifth tax vear as a	1 a 501(c)(3) organ	l uzation
	check this box and stop here	or the organizat		., 4,	men tax your as t	(c)(c) c.gu.	▶ ┌
	ction C. Computation of Publ						
15	Public Support Percentage for 2009	(line 8 column	(f) divided by line	13 column (f))		15	
16	Public support percentage from 200	8 Schedule A , F	art III, line 15			16	
Se	ction D. Computation of Inve	stment Inco	ome Percenta	ge			
17	Investment income percentage for 2	009 (line 10c c	olumn (f) dıvıded	by line 13 columi	n (f))	17	
18	Investment income percentage from	2008 Schedule	A, Part III, line 1	L 7		18	
19a	33 1/3% support tests—2009. If the	organization di	d not check the b	ox on line 14, and	d line 15 is more	than 33 1/3% and	d line 17 is not
	more than 33 1/3%, check this box a	ind stop here. T					
L	organization 33 1/3% support tests—2008. If the	► C	d not chastes here	on line 14 amilion	100 and line 4	5 ic mara +ha= 22	1/20/2 and line
b	שר בו בע suppoit tests—zouo. If the	organization (I	и посепеска вох	OILLINE TH OLINE	= ⊥⊃a, anu nne 1(us more man 33	1/370 and ine

18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization **Private Foundation** If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions

Part IV

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

Schedule A (Form 990 or 990-EZ) 2009

Software ID: Software Version:

EIN: 36-2515281

Name: Adler School of Professional Psychology

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

(A) Name and Title	(B) A verage hours	(C) Position (check all that apply)			cka			(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of other
	per week	Individual trustee or director	Institutional Trustee	Office		Highest compensated employee	Former	from the organization (W- 2/1099-MISC)	from related organizations (W- 2/1099- MISC)	compensation from the organization and related organizations
Dr Raymond Crossman President	40 0	Х		х				479,720	0	47,116
Audra Akıns Board Member	5 0	Х						0	0	0
Janet Campbell Board Member	5 0	Х						0	0	0
Diane Dinkins-Carr Board Member	5 0	Х						0	0	0
William Greaves Board Member	5 0	×						0	0	0
David Kreischer Board Member	5 0	Х						0	0	0
Harold Mosak Board Member	5 0	Х						0	0	0
Bernard Shulman Board Member	5 0	Х						0	0	0
Javier Ubarri Board Vice-Chair	5 0	х						0	0	0
Mary Cahilane Board Chair	15 0	Х						0	0	0
Vickie Chou Board Vice Chair	5 0	Х						0	0	0
Ralph Dewitt Board Member	5 0	Х						0	0	0
Jım Houlıhan Board Member	5 0	х						0	0	0
Lındsay Setzer Board Member	5 0	Х						0	0	0
Caroyln Williams Meza Board Member	5 0	х						0	0	0
Sıd Mohn Board Member	5 0	Х						0	0	0
Aurie Pennick Board Member	5 0	Х						0	0	0
Jo Beth Cup VP of Administration	40 0			х				177,486	0	24,595
Jeff Green VP of Finance	40 0			х				197,625	0	16,439
Wendy Paszkiewicz Assoc VP Of Academic Affairs	40 0				х			148,777	0	21,201
Lynn Todman Director of Institute on Socia	40 0				х	х		134,469	0	9,301
Anthony Chimera VP of Development	40 0				х			171,178	0	29,660
Frank Gruba-McCallister Core Faculty	32 0					х		126,879	0	21,905
Dan Barnes Director of PSC	40 0					Х		111,794	0	20,308
Craig Hines Director of Admission	32 0					х		103,968		13,681

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

(A) Name and Title	(B) A verage hours	Average Position (check all		(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of other				
	per week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	from the organization (W- 2/1099-MISC)	from related organizations (W- 2/1099- MISC)	compensation from the organization and related organizations
Thomas Todd Director MAF/ Core Faculty	32 0					×		104,911		22,588

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

Do not include amounts reported on line 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
DUES & MEMBERSHIPS	186,435	116,451	54,533	15,451
SUPPLIES	326,903	185,953	133,393	7,557
CONSULTANTS	766,005	136,175	577,836	51,994
CATERING	306,345	242,356	57,103	6,886
STUDENT RECRUITMENT & SERVICES	559,917	559,917		

DLN: 93493118008091

OMB No 1545-0047

SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527 ► Complete if the organization is described below.

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

Open to Public Inspection

If the organization answered "Yes," to Form 990, Part IV, Line 3, or Form 990-EZ, Part VI, line 46 (Political Campaign Activities),

- ◆ Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C
- ◆ Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B
- ◆ Section 527 organizations Complete Part I-A only

If the organization answered "Yes," to Form 990, Part IV, Line 4, or Form 990-FZ, Part VI, line 47 (Lobbying Activities), then

SeIf the	ction 501(c)(3) organizations that ction 501(c)(3) organizations that e organization answered "Ye	t have filed Form 5768 (election under t have NOT filed Form 5768 (election u s," to Form 990, Part IV, Line 5 (Pr	section 501(h)) C inder section 501(complete Part II-A Do not con h)) Complete Part II-B Do n	mplete Part II-B ot complete Part II-A
	ction 501(c)(4), (5), or (6) organi me of the organization	zations Complete Part III		Employer iden	tification number
	er School of Professional Psychology				
Dar	+ T-A Complete if the or	ganization is exempt under	soction E01/a	36-2515281	organization
					organization.
1	·	ganızatıon's dırect and ındırect polıtı	cal campaign acti	ivities in Part IV	
2	Political expenditures			•	\$
3	Volunteer hours				
Par	t I-B Complete if the or	ganization is exempt under	section 501(d	:)(3).	
1	Enter the amount of any excise	e tax incurred by the organization un	der section 4955	▶	\$
2	Enter the amount of any excise	e tax incurred by organization manag	ers under section	14955 ►	\$
3	If the organization incurred a s	ection 4955 tax, did it file Form 472	0 for this year?		┌ Yes
4a	Was a correction made?				┌ Yes
b	If "Yes," describe in Part IV				
Par	t I-C Complete if the or	ganization is exempt under	section 501(c	c) except section 501	L(c)(3).
1	Enter the amount directly expe	ended by the filing organization for se	ction 527 exemp	t function activities 🕨	\$
2	Enter the amount of the filing of exempt funtion activities	organization's funds contributed to ot	her organizations	for section 527 ▶-	\$
3	Total exempt function expendi	tures Add lines 1 and 2 Enter here	and on Form 112	0-POL, line 17b ►	¢
4	Did the filing organization file I	Form 1120-POL for this year?			⊤ Yes
5	State the names, addresses as were made For each organizat contributions received that we	nd employer identification number (E ion listed, enter the amount paid fror re promptly and directly delivered to nittee (PAC) If additional space is no	n the filing organi: a separate politio	zation's funds Also enter t cal organization, such as a	he amount of political
	(a) Name	(b) Address	(c) EIN	(d) A mount paid from filing organization's funds If none, enter -0-	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-

e Grassroots ceiling amount (150% of line 2d, column (e))

f Grassroots lobbying expenditures

Pa	rt II-A Complete if the organization under section 501(h)).	is exempt under	section 501(c)(3) and file	d Form 5768	(election
	Check If the filing organization belongs to a Check If the filing organization checked box		d" provisions apply	,		
<u> </u>	Limits on Lobbying E (The term "expenditures" means ar	Expenditures			(a) Filing Organization's Totals	(b) Affiliated Group Totals
1a	Total lobbying expenditures to influence public o	ppinion (grass roots lob	ıbyıng)			
b	Total lobbying expenditures to influence a legisla	ative body (direct lobby	yıng)			
c	Total lobbying expenditures (add lines 1a and 18	b)				
d	Other exempt purpose expenditures					
e	Total exempt purpose expenditures (add lines 1					
f	Lobbying nontaxable amount Enter the amount f	ın both				
	If the amount on line 1e, column (a) or (b) is: Not over \$500,000	The lobbying nontaxa 20% of the amount on lir				
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the	e excess over \$500,00	0		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the	e excess over \$1,000,0	000		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the	excess over \$1,500,00	00		
	Over \$17,000,000	\$1,000,000				
		•				
g	Grassroots nontaxable amount (enter 25% of lin					
h	Subtract line 1g from line 1a If zero or less, enter	er -0-				
i	Subtract line 1f from line 1c If zero or less, ente	er - 0 -				
j	If there is an amount other than zero on either li section 4911 tax for this year?	ne 1h or line 1ı, did the	organization file F	orm 4720 repoi	rtıng	┌ Yes ┌ No
	(Some organizations that made a columns below. See the	he instructions fo	ection do not l r lines 2a thro	nave to com ugh 2f on pa		ne five
	Lobbying Exp	enditures During	4-Year Averag	ing Period	I	ı
	Calendar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) Total
2a	Lobbying non-taxable amount					
b	Lobbying ceiling amount (150% of line 2a, column(e))					
c	Total lobbying expenditures					
d	Grassroots non-taxable amount					

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

		(;	a)	(b)	
		Yes	No	A mount	
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of				
а	Volunteers?		Νo		
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?		Νο		
С	Media advertisements?		Νo		
d	Mailings to members, legislators, or the public?	Yes		3,200	
е	Publications, or published or broadcast statements?		Νo		
f	Grants to other organizations for lobbying purposes?		Νo		
g	Direct contact with legislators, their staffs, government officials, or a legislative body?	Yes		3,100	
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		Νo		
i	Other activities? If "Yes," describe in Part IV	Yes		30,700	
j	Total lines 1c through 1i			37,000	
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		Νo		
b	If "Yes," enter the amount of any tax incurred under section 4912				
С	If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?		Νo		

Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

			Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?	1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?	2		
3	Did the organization agree to carryover lobbying and political expenditures from the prior year?	3		

Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, line 3 is answered "Yes".

2	expenses for which the section 527(f) tax was paid).		
а	Current year	2a	
b	Carryover from last year	2b	
c	Total	2c	
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and		

Part IV Supplemental Information

political expenditure next year?

Dues, assessments and similar amounts from members

Taxable amount of lobbying and political expenditures (see instructions)

Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, and Part II-B, line 1, Also, complete this part for any additional information

Ident if ier	Return Reference	Explanation
Direct Contact and Other Activities	Part II-B, Lines 1G and 1I	The Adler School is represented by legislative consultants in support of and responsible for the School's government affairs program both in the Federal Government and in the state of Illinois Specifically, the consultants provide direct advocacy services relating to the School's Federal programs, arrange and participate in meetings for the School's leadership with Members of Congress, monitor state and Federal issues of consequence to the School and assist the School's leadership with all aspects of responding to congressional forms for earmark requests

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DLN: 93493118008091

OMB No 1545-0047

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.

Open to Public

ame of the organization dler School of Professional Psychology		'	oloyer identification number
organizations Maintaining Don organization answered "Yes" to For	or Advised Funds or Other Simil m 990, Part IV, line 6.		2515281 or Accounts. Complete if th
-	(a) Donor advised funds	((b) Funds and other accounts
Total number at end of year			
Aggregate contributions to (during year)			
Aggregate grants from (during year)			
Aggregate value at end of year			
Did the organization inform all donors and dono funds are the organization's property, subject t	-		rsed ⊤Yes ⊤N o
Did the organization inform all grantees, donors used only for charitable purposes and not for th conferring impermissible private benefit			
art II Conservation Easements. Comp	olete if the organization answered "Y	es" to Forn	n 990, Part IV, line 7.
Purpose(s) of conservation easements held by Preservation of land for public use (e g , re Protection of natural habitat Preservation of open space Complete lines 2a-2d if the organization held a easement on the last day of the tax year	creation or pleasure)	of a certifie	ically importantly land area d historic structure onservation
, ,			Held at the End of the Year
Total number of conservation easements		2a	
Total acreage restricted by conservation easei	ments	2b	
Number of conservation easements on a certifi	ed historic structure included in (a)	2c	
Number of conservation easements included in	(c) acquired after 8/17/06	2d	
Number of conservation easements modified, t the taxable year		·	ie organization during
Does the organization have a written policy reg enforcement of the conservation easements it		, handling of	fviolations, and Yes No
Staff and volunteer hours devoted to monitoring			
A mount of expenses incurred in monitoring, ins	pecting, and enforcing conservation ease	ments during	g the year ► \$
Does each conservation easement reported on 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)?	line 2(d) above satisfy the requirements	ofsection	☐ Yes ☐ No
In Part XIV, describe how the organization repo balance sheet, and include, if applicable, the te the organization's accounting for conservation	xt of the footnote to the organization's fina		
Complete if the organization answer	ections of Art, Historical Treasu ered "Yes" to Form 990, Part IV, line		her Similar Assets.
If the organization elected, as permitted under art, historical treasures, or other similar assets provide, in Part XIV, the text of the footnote to	s held for public exhibition, education or re	esearch in fu	
If the organization elected, as permitted under historical treasures, or other similar assets he provide the following amounts relating to these	ld for public exhibition, education, or resea		•
(i) Revenues included in Form 990, Part VIII,	line 1		▶ \$
(ii) Assets included in Form 990, Part X			► \$
If the organization received or held works of art following amounts required to be reported unde		ets for finan	·
Revenues included in Form 990, Part VIII, line	· 1		▶ \$
Assets included in Form 990, Part X			

eck all that apply) c exhibition larly research ervation for future generations description of the organization's c e year, did the organization solicit be sold to raise funds rather than a crow and Custodial Arrang art IV, line 9, or reported an ar ganization an agent, trustee, custod on Form 990, Part X? explain the arrangement in Part XI g balance s during the year alance reganization include an amount on F explain the arrangement in Part XI andowment Funds. Complete	or receive donation to be maintained as gements. Complement on Form 9 dian or other intermally and complete the form 990, Part X, linv	d e ain hor s of an part ete if 90, P ediary follow	w they rt, histo of the of the o art X, r for co wing tal	Loan or Other further orical trorganizarganizaline 21 ntribution	the oreasulation's ation 1. ons o	rganization res or othe s collection n answere	r sımını? d "Y ets ı 1c 1d 1e 1f	eempt purp nilar es" to Fo	A mou	Yes Yes Int	☐ No ☐ No ☐ No ears Back
ervation for future generations description of the organization's c e year, did the organization solicit be sold to raise funds rather than secrow and Custodial Arrang int IV, line 9, or reported an arganization an agent, trustee, custod on Form 990, Part X? explain the arrangement in Part XI g balance s during the year ions during the year alance rganization include an amount on Fexplain the arrangement in Part XI adowment Funds. Complete	or receive donation to be maintained as gements. Complement on Form 9 dian or other intermally and complete the form 990, Part X, lings	e ain hor s of ar s part of ete if 90, P. ediary follow	w they rt, histo of the of the o art X, for co ving tal	further further orical tr organiza rganiza line 21 ntribution	the o reasul ation's ation 1. ons o	rganization res or othe s collection n answere or other ass	r sım r sım n ² d "Y ets ı 1c 1d 1e 1f	eempt purpoillar es" to Fo	Г rm 990 Г Ато .	Yes Int Yes	┌ No
ervation for future generations description of the organization's c e year, did the organization solicit be sold to raise funds rather than scrow and Custodial Arrang art IV, line 9, or reported an arg ganization an agent, trustee, custod on Form 990, Part X? explain the arrangement in Part XI g balance s during the year alance rganization include an amount on F explain the arrangement in Part XI adowment Funds. Complete g of year balance g of year balance	or receive donation to be maintained as gements. Complement on Form 9 dian or other intermally and complete the form 990, Part X, lings	s of an apparent of a part	w they rt, histo of the of the of art X, r for co wing tal	further orical trorganiza rganiza line 21 ntribution	reasuration's ation 1. ons o	res or othe s collection n answere or other ass	r sim 12 d "Y ets i 1c 1d 1e 1f	es" to Fo	Г rm 990 Г Ато .	Yes Int Yes	┌ No
description of the organization's celegrary, did the organization solicity be sold to raise funds rather than scrow and Custodial Arranguit IV, line 9, or reported an arganization an agent, trustee, custod on Form 990, Part X? explain the arrangement in Part XI go balance and during the year alance arrangement in Part XI explain the arrangement in Part XI explain	or receive donation to be maintained as gements. Complement on Form 9 dian or other intermally and complete the form 990, Part X, lings	s of an apparent of a part	rt, histo of the o art X, of for co	orical trorganiza rganiza line 21 ntribution	reasuration's ation 1. ons o	res or othe s collection n answere or other ass	r sim 12 d "Y ets i 1c 1d 1e 1f	es" to Fo	Г rm 990 Г Ато .	Yes Int Yes	┌ No
e year, did the organization solicit be sold to raise funds rather than scrow and Custodial Arrangurt IV, line 9, or reported an arganization an agent, trustee, custod on Form 990, Part X? explain the arrangement in Part XI g balance so during the year alance reganization include an amount on Fexplain the arrangement in Part XI adowment Funds. Complete	or receive donation to be maintained as gements. Complement on Form 9 dian or other intermally and complete the form 990, Part X, lings	s of an apparent of a part	rt, histo of the o art X, of for co	orical trorganiza rganiza line 21 ntribution	reasuration's ation 1. ons o	res or othe s collection n answere or other ass	r sim 12 d "Y ets i 1c 1d 1e 1f	es" to Fo	Г rm 990 Г Ато .	Yes Int Yes	┌ No
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rganization include an amount on Fexplain the arrangement in Part XIV ndowment Funds. Complete g of year balance	v If the organization	n ans	swere				Par		10.		
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signated or quasi-endowment 🕨											
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owment ▶											
endowment funds not in the posse	ession of the organiz	zation	that ar	e held a	and a	dministere	d for	the			
•									2 (1)	Yes	No
3		•		• •			•				
_				 Ia D2	•		•			 	
· ··	•				•		•		35		
					0. Pa	art X. line	10.				
<u> </u>	,_,							(c) Accum	nulated		
Description of investment										(d) Bo	ok value
							0		0		0
ımprovements						5,688	3,817		928,221		4,760,596
						2,042	2,613		950,447		1,092,166
		•				3,093	3,531		710,048		2,383,483
			· /					- In-			8,236,245
	he estimated percentage of the years ignated or quasi-endowment. Intendowment let owner the endowment let owner the endowment funds not in the possection by intended organizations. It of a ganizations is a ganization of the endowment in the related organization of the endowment in Part XIV the intended uses of the endowment in the endowment i	he estimated percentage of the year end balance held signated or quasi-endowment. Intendowment he endowment he endowment funds not in the possession of the organization by sted organizations	he estimated percentage of the year end balance held as signated or quasi-endowment. Intendowment he endowment funds not in the possession of the organization ion by ited organizations	the estimated percentage of the year end balance held as signated or quasi-endowment. Intendowment intendowment intendowment intendowment funds not in the possession of the organization that are ion by ited organizations	he estimated percentage of the year end balance held as signated or quasi-endowment hat endowment hat are held in by endowment funds not in the possession of the organization that are held in by ited organizations	he estimated percentage of the year end balance held as signated or quasi-endowment. Intendowment intendowment intendowment intendowment funds not in the possession of the organization that are held and a ion by sited organizations	the estimated percentage of the year end balance held as signated or quasi-endowment intendowment. Intendowment intendowment intendowment intendowment funds not in the possession of the organization that are held and administered ion by steed organizations	the estimated percentage of the year end balance held as signated or quasi-endowment intendowment intendowment intendowment intendowment funds not in the possession of the organization that are held and administered for ion by ited organizations	the estimated percentage of the year end balance held as signated or quasi-endowment in the possession of the organization that are held and administered for the endowment funds not in the possession of the organization that are held and administered for the ion by ited organizations	the estimated percentage of the year end balance held assignated or quasi-endowment intendowment. Intendowment intendowment intendowment funds not in the possession of the organization that are held and administered for the endowment funds not in the possession of the organization that are held and administered for the endowment funds organizations	the estimated percentage of the year end balance held as signated or quasi-endowment lendowment lendowment lendowment lendowment lendowment lendowment funds not in the possession of the organization that are held and administered for the ion by ted organizations listed as required on Schedule R?

Part VII Investments—Other Securities. See (a) Description of security or category			d of valuation
(including name of security)	(b)Book value		-year market value
Financial derivatives			
Closely-held equity interests Other			
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)		12	
Part VIII Investments—Program Related. See			d of valuation
(a) Description of investment type	(b) Book value		year market value
Total. (Column (b) should equal Form 990, Part X, col (B) line 13)			
Part IX Other Assets. See Form 990, Part X, III (a) Descrip			(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1			
Part X Other Liabilities. See Form 990, Part X	, line 25.		
Part X Other Liabilities. See Form 990, Part X (a) Description of Liability	, line 25. (b) A mount		
Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes	, line 25. (b) A mount 0		
Part X Other Liabilities. See Form 990, Part X (a) Description of Liability	, line 25. (b) A mount		
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Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes	, line 25. (b) A mount 0		

	tal Reconciliation of change in Net Assets from Form 990 to Financial Statemen	1165	
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	19,581,326
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	19,085,902
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	495,424
4	Net unrealized gains (losses) on investments	4	33,173
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 - 8	9	33,173
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	528,597
Par	t XIII Reconciliation of Revenue per Audited Financial Statements With Revenue p	er R	eturn
1	Total revenue, gains, and other support per audited financial statements	1	19,614,499
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments		
ь	Donated services and use of facilities		
c	Recoveries of prior year grants		
d	Other (Describe in Part XIV) 2d		
e	Add lines 2a through 2d	2e	33,173
3	Subtract line 2e from line 1	3	19,581,326
4	A mounts 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 should equal Form 990, Part I, line 12)	5	19,581,326
Par	Reconciliation of Expenses per Audited Financial Statements With Expenses	<u>per</u>	
1	Total expenses and losses per audited financial statements	1	19,085,902
2	A mounts included on line 1 but not on Form 990, Part IX, line 25		
a	Donated services and use of facilities		
b	Prior year adjustments		
c	Other losses		
d	Other (Describe in Part XIV)		
e	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	19,085,902
4	A mounts included on Form 990, Part IX, line 25, but not on line 1:		, ,
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
ь	Other (Describe in Part XIV) 4b		
c	Add lines 4a and 4b	4c	
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5	19,085,902
Pai	rt XIV Supplemental Information		<u> </u>

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

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

Ident if ier	Return Reference	Explanation
Deferred Rent		The School lease for its campus facilities contains incremental rent increases. However, in accordance with accounting principles generally accepted in the United States of America, rent expense must be recognized on a straight-line basis. Due to this accounting treatment, deferred rent expense is recorded for the difference between the actual payment and the expense recognized.
FIN 48 Footnote		FASB ASC 740-10 (formerly known as FASB Interpretation No 48), Accounting for Uncertainty in Income Taxes, clarifies the accounting for uncertainty in income taxes recognized in an enterprises's financial statements and prescribes a recognition threshold and measurement attribute for the financial statement recognition and measurement of a tax position taken or expected to be taken in a tax return FASB ASC 740-10 also provides guidance on derecognition of tax benefits, classification on the statement of financial position, interest and penalties, accounting in interim periods, disclosure, and transition The adoption of FASB ASC 740-10 did not impact the School's financial position or changes in its net assets for the years ended August 31, 2010 and 2009

Employer identification number

SCHEDULE E

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

Adler School of Professional Psychology

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

	36-2515281			
			YES	NO
1	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?	1	Yes	
2	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	2	Yes	
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	3	Yes	
	POLICY STATED IN THE INSTITUTE'S CATALOGUE			
	Does the organization maintain the following?			
	Records indicating the racial composition of the student body, faculty, and administrative staff?	4a	Yes	
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	4b	Yes	
c	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	4c	Yes	
d	Copies of all material used by the organization or on its behalf to solicit contributions?	4d	Yes	
	If you answered "No" to any of the above, please explain If you need more space, use Schedule O (Form 990)			
	Does the organization discriminate by race in any way with respect to Students' rights or privileges?	5a_		Νo
b	Admissions policies?	5b		Νo
c	Employment of faculty or administrative staff?	5c		Νo
d	Scholarships or other financial assistance?	5d		Νo
е	Educational policies?	5e		Νo
f	Use of facilities?	5f		Νo
g	Athletic programs?	5g		Νo
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)	5h		Νo
	Does the organization receive any financial aid or assistance from a governmental agency?	6a	Yes	
b	Has the organization's right to such aid ever been revoked or suspended?	6b		Νo
7	If you answered "Yes" to either line 6a or line 6b, explain on Schedule O (Form 990) # 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	7	Yes	
	990)			1

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DLN: 93493118008091

OMB No 1545-0047

2009

SCHEDULE F (Form 990)

Department of the Treasury

Statement of Activities Outside the United States

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

Open to Public

Internal Revenue Service **Inspection** Name of the organization Employer identification number Adler School of Professional Psychology 36-2515281 General Information on Activities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 14b. 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 For grant makers. Describe in Part IV the organization's procedures for monitoring the use of grant funds outside the United States Activites per Region (Use Schedule F-1 (Form 990) if additional space is needed) (d) Activities conducted in (e) If activity listed in (d) (f) Total expenditures (a) Region (b) Number of (c) Number of region (by type) (ie, is a program service, for region fundraising, program services, offices in the employees or describe specific type of grants to recipients located in agents in region region service(s) in region the region) 2,370,585 North America 16 Program Services Education North America Grantmaking Scholarships 28.886

Totals

16

2,399,471

Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete If the organization answered "Yes" to Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Check this box if no one recipient received more than \$5,000 ▶ ☐ Use Schedule F-1 (Form 990) if additional space is needed.									
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)	
2 Enter total n tax-exempt	number of recipions by the IRS, or f	ent organizations lis or which the grante	ted above that are e or counsel has pr	recognized as chari ovided a section 50	ties by the foreign o 1(c)(3) equivalency	country, recognized letter	as . ►		
3 Enter total n	umber of other	organizations or en	tities					: (Earm 990) 2009	

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16. Use Schedule F-1 (Form 990) if additional space is needed. (c) Number of (b) Region (d) A mount of (e) Manner of cash (a) Type of grant or (f) A mount of (g) Description (h) Method of cash grant disbursement of non-cash valuation assistance recipients non-cash (book, FMV, assistance assistance appraisal, other) Scholarships North America 17 28,886

Schedule F (Form 990) 2009

Identifier	ReturnReference	ured in Part I, line 2, and any additional information. Explanation
Grants and other assistance	Schedule F, Part III	Student must have applied for admission to the School
Grants and other assistance	Schedule F, Part III	Scholarships are reserved for full-time students Students must maintain satisfactory progress to maintain eligibility

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Part I General Information on Grants and Assistance

DLN: 93493118008091

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

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

Attach to Form 990

OMB No 1545-0047

2009

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Schedule I

(Form 990)

Name of the organization
A dier School of Professional Psychology

Employer identification number

36-2515281

	ed to award the gra	substantiate the amount of t nts or assistance? edures for monitoring the us					✓ Yes 🗀
Form 990, Part	IV, line 21 for ar	e to Governments and ny recipient that receive 990) if additional space	d more than \$5,000	. Check this box if n	o one recipient receiv	ed more than \$5,00	0. Use
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)		(h) Purpose of grant or assistance
2 Enter total number of se	ction 501(c)(3) and	d government organizations				<u> </u>	
3 Enter total number of otl	ner organizations .			Cot No FOOFED			dulo I (Form 200) 2000
For Privacy Act and Paperwork R	eauction Act Notice,	see the Instructions for Form	1990.	Cat No 50055P		Sche	dule I (Form 990) 2009

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

(a)Type of grant or assistance	(b)Number of recipients	(c)A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
Scholarships	21	124,304			
See Additional Data Table					

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

Ident if ier	Return Reference	Explanation
Grants and Other Assistance	Schedule I, Part III	Student must have applied for admission to the School Scholarships are reserved for full-time students. They are available to US or international students unless otherwise noted. Students must maintain satisfactory progress to maintain eligibility. US students must complete the Free Application for Federal Student Aid (FAFSA). All applicants must also maintain a GPA of 3.25 in psychology coursework at time of application. Scholarships are paid over two terms.

DLN: 93493118008091

Employer identification number

OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury

Name of the organization

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, question 23.

► Attach to Form 990. ► See separate instructions.

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Adle	dler School of Professional Psychology			
	36-251528	31		
Pa	art I Questions Regarding Compensation		_	Т
			Yes	Νo
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 iter			
	First-class or charter travel Housing allowance or residence for personal us	e		
	Travel for companions Payments for business use of personal residence	ce		
	Tax idemnification and gross-up payments			
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement orprovision of all the expenses described above? If "No," complete Part III to explain	1b	Yes	
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	2	Yes	
3	Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director Check all that apply Compensation committee Independent compensation consultant Form 990 of other organizations Approval by the board or compensation commit	rtee		
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing orgor a related organization	anızatıon		
а	Receive a severance payment or change-of-control payment?	4a		Νο
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		Νo
c	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		Νo
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III			
	Only $501(c)(3)$ and $501(c)(4)$ organizations only must complete lines 5-9.			
5	For persons listed in form 990 , Part VII, Section A, line $1a$, did the organization pay or accrue any compensation contingent on the revenues of			
а	The organization?	5a		Νo
b	Any related organization?	5b		Νo
	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			
а	The organization?	6a	Yes	<u>L</u>
Ь	Any related organization?	6b		Νo
	If "Yes," to line 6a or 6b, describe in Part III			
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III	7		No
8	Were any amounts reported in Form 990, Part VII, paid or accured pursuant to a contract that was subject to the initial contract exception described in Regs section 53 4958-4(a)(3)? If "Yes," describe in Part III	8		No

section 53 4958-6(c)?

If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space 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)-(III) 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-MIS	SC compensation	(C) Retirement and		(E) Total of columns	(F) Compensation
		(i) Base compensation	(ii) Bonus & ıncentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	reported in prior Form 990 or Form 990-EZ
Dr Raymond Crossman	(ı) (ıı)	296,352 0	183,368 0	0	33,000	14,116 0	526,836 0	
Jo Beth Cup	(ı) (ıı)	157,486 0	20,000	0	17,749 0	6,846 0	202,081	
Wendy Paszkiewicz	(ı) (ıı)	128,777 0	20,000	0	11,282 0	9,919 0	169,978 0	
Jeff Green	(ı) (ıı)	177,625 0	20,000	0	9,881	6,558 0	214,064 0	
Anthony Chimera	(ı) (ıı)	151,178 0	20,000	0	17,118 0	12,542 0	200,838	

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

Ident if ier	Ret urn Reference	Explanation
Compensation	SCHEDULE J,	A LEADERSHIP TEAM BONUS IS BASED UPON THE ACHIEVEMENT OF CERTAIN FINANCIAL GOALS
Contingent on	PART I, LINE	
Net Earnings of	6A	
the School		

Schedule J (Form 990) 2009

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DLN: 93493118008091

Schedule K (Form 990)

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 in Schedule 0 (Form 990).

► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047

2009

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization Adler School of Professional Psychology Employer identification number

											13201			
P	art I Bond Issues													
	(a) Issuer Name	(b) Issuer EIN	(c) CUSIP #	(d) Date	Issued	(e) Issue	Price	(f) Des	cription of	Purpose	(g) De	feased		On alf of uer
											Yes	No	Yes	No
A	Illinois Finance Authority	36-2779212		02-16-	2010	5,1	.00,000	Financing &	refinancing	geduc facıl		×		X
Pa	rt III Proceeds													
					١	į į	3		С	D			E	
1	Total proceeds of issue				5,100,00	0								
2	Gross proceeds in reserve funds													
3	Proceeds in refunding or defeasa	ince escrows												
4	Other unspent proceeds				3,032,44	1								
5	Issuance costs from proceeds				101,00	0								
6	Working capital expenditures fro	m proceeds												
7	Capital expenditures from proces	eds			2,067,98	7								
8	Year of substantial completion									ı				
				Yes	No	Yes	No	Yes	No	Yes	No	Ye	s	No
9	Were the bonds issued as part of	f a current refunding is	sue?		Х									
10	Were the bonds issued as part of	f an advance refunding	ıssue?		Х									
11	Has the final allocation of procee	eds been made?			Х									
12	Does the organization maintain a the final allocation of proceeds?	adequate books and re	cords to support	х										
Pa	rt 💵 Private Business Use	e												
					A	-	3	_	<u>c</u>	D			E	
				Yes	No	Yes	No	Yes	No	Yes	No	Ye	s	No
1	Was the organization a partner in which owned property financed b		ember of an LLC,											
2	Are there any lease arrangement which may result in private busir		inanced property											

Schedule K	•	•		
Part III	Private	Business	Use	(Continued)

Pai	Private Business Use (Continued)										
			A	E	3		С		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?										
3b	Are there any research agreements with respect to the financed propert which may result in private business use?	У									
3с	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 us by entities other than a section 501(c)(3) organization or a state or loc government										
5	Enter the percentage of financed property used in a private business us 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										
6	Total of lines 4 and 5										
7	Has the organization adopted management practices and procedures to ensure the post-issuance compliance of its tax-exempt bond liabilities?										
Pa	rt IV Arbitrage										
		Α		В		С		D		E	
1	Vos	No	Voc	No	Va		No	Voc	No	Vac	No

			A		3		С		D		E
		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?		x								
2	Is the bond issue a variable rate issue?	х									
3a	Has the organization or the governmental issuer identified a hedge with respect to the bond issue on its books and records?		x								
ь	Name of provider										
С	Term of hedge										
4a	Were gross proceeds invested in a GIC?		Х								
ь	Name of provider										
С	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?		х								
6	Did the bond issue qualify for an exception to rebate?		х								
4											

Software ID: Software Version:

EIN: 36-2515281

Name: Adler School of Professional Psychology

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DLN: 93493118008091

SCHEDULE 0

(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

Adler School of Professional Psychology

Employer identification number

36-2515281

ldentifier	Return Reference	Explanation
Public Information	Form 990, Part VI, Section C, Line 19	The organization makes its governing documents, conflict of interest policy, and financial statements available to the public upon request

ldentifier	Return Reference	Explanation
Determination of Compensation		Compensation for the organization's CEO is determined by use of a compensation committee, independent compensation consultant, written employment contract, compensation study, and approval of the board. Compensation for other key employees to the organization is determined by a compensation study of similar size/type of organizations' compensation.

Identifier	Return Reference	Explanation
990 Review Process	1 '	THE COMPLETED 990 IS REVIEWED BY CONTROLLER, THE VICE PRESIDENT OF FINANCE AND INFORMATION TECHNOLOGY, AND THE PRESIDENT OF THE SCHOOL PRIOR TO SUBMISSION

ldentifier	Return Reference	Explanation
Conflict of Interest Policy	PART VI, SECTION B , LINE 12C	NEW BOARD MEMBERS AND EMPLOYEES RECEIVE AN ORIENTATION BOOKLET CONTAINING THE SCHOOL'S CONFLICT OF INTEREST POLICY THE SCHOOL RELIES ON THE BOARD MEMBERS AND EMPLOYEES TO NOTIFY THE SCHOOL OF ANY CONFLICTS OF INTEREST THAT MAY ARISE DURING THEIR TERM AS A BOARD MEMBER OR EMPLOYMENT WITH THE SCHOOL