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Form 990

Return of Organization Exempt From Income Tax

2010

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

Open to Public Inspection

A For the 2010 calendar year, or tax year beginning 06-01-2010 and ending 05-31-2011

B Check if applicable	C Name of organization ALBRIGHT COLLEGE		D Employer identification number 23-1352615
<input type="checkbox"/> Address change	Doing Business As		E Telephone number (610) 921-7749
<input type="checkbox"/> Name change	Number and street (or P O box if mail is not delivered to street address) 13TH BERN STREETS PO BOX 15234		Room/suite
<input type="checkbox"/> Initial return	City or town, state or country, and ZIP + 4 READING, PA 196125234		G Gross receipts \$ 94,572,988
<input type="checkbox"/> Terminated	F Name and address of principal officer LEX O MCMILLAN III 13TH BERN STREETS PO BOX 15234 READING, PA 196125234		H(a) Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<input type="checkbox"/> Amended return			H(b) Are all affiliates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list (see instructions)
<input type="checkbox"/> Application pending			H(c) Group exemption number ►

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

J Website: ► WWW.ALBRIGHT.EDU

K Form of organization Corporation Trust Association Other ► L Year of formation 1928 M State of legal domicile PA

Part I Summary

1 Briefly describe the organization's mission or most significant activities PROMOTING A COMMITMENT TO LIFELONG LEARNING WITH A FOUNDATION IN THE LIBERAL ARTS & SCIENCES		
2 Check this box ► if the organization discontinued its operations or disposed of more than 25% of its net assets		
3 Number of voting members of the governing body (Part VI, line 1a)	3	32
4 Number of independent voting members of the governing body (Part VI, line 1b)	4	31
5 Total number of individuals employed in calendar year 2010 (Part V, line 2a)	5	1,605
6 Total number of volunteers (estimate if necessary)	6	186
7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	839,354
b Net unrelated business taxable income from Form 990-T, line 34	7b	-64,886

8 Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
9 Program service revenue (Part VIII, line 2g)	8,791,224	11,490,021
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	67,160,661	68,380,475
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	1,748,430	2,552,469
12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	2,489,562	2,415,999
	80,189,877	84,838,964

13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	Prior Year	Current Year
14 Benefits paid to or for members (Part IX, column (A), line 4)	22,561,880	23,889,799
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	0	0
16a Professional fundraising fees (Part IX, column (A), line 11e)	29,560,884	30,570,660
b Total fundraising expenses (Part IX, column (D), line 25) ► 1,879,688	0	142,976
17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	19,545,287	19,753,986
18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	71,668,051	74,357,421
19 Revenue less expenses Subtract line 18 from line 12	8,521,826	10,481,543

20 Total assets (Part X, line 16)	Beginning of Current Year	End of Year
21 Total liabilities (Part X, line 26)	138,006,074	155,349,099
22 Net assets or fund balances Subtract line 21 from line 20	64,618,634	63,564,938
	73,387,440	91,784,161

Part II Signature Block

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

Sign Here	***** Signature of officer WILLIAM W WOOD VP ADMIN & FINANCIAL SERVICES Type or print name and title	2012-04-13 Date
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Paid Preparer Use Only	Print/Type preparer's name JULIUS C GREEN CPA JD Firm's name ► PARENTEBEARD LLC Firm's address ► 400 MARKET STREET WILLIAMS, PA 17701	Preparer's signature JULIUS C GREEN CPA JD Date Check if self-employed ► <input type="checkbox"/> PTIN Firm's EIN ► Phone no ► (570) 323-6023
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May the IRS discuss this return with the preparer shown above? (see instructions) Yes No

Part III Statement of Program Service AccomplishmentsCheck if Schedule O contains a response to any question in this Part III **1 Briefly describe the organization's mission**

OUR MISSION IS TO INSPIRE AND EDUCATE THE SCHOLAR AND LEADER IN EACH STUDENT, BUILDING ON A STRONG FOUNDATION IN THE LIBERAL ARTS AND SCIENCES AND A COMMITMENT TO THE BEST OF HUMAN VALUES, FOSTERING A COMMITMENT TO A LIFETIME OF SERVICE AND LEARNING

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? Yes No

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

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes No

If "Yes," describe these changes on Schedule O

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

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

4a (Code) (Expenses \$ 61,483,019 including grants of \$ 23,889,799) (Revenue \$ 68,508,844)

ALBRIGHT COLLEGE PROVIDES AN EXCELLENT LIBERAL ARTS EDUCATION AND ABUNDANT OPPORTUNITIES FOR SOCIAL, PERSONAL AND CULTURAL DEVELOPMENT. ALBRIGHT HAS ALL OF THE ADVANTAGES OF A SMALL, COEDUCATIONAL, PRIVATE COLLEGE, INCLUDING A RIGOROUS YET FLEXIBLE CURRICULUM, A 13:1 STUDENT-FACULTY RATIO AND THE SINCERE FRIENDLINESS AND WARMTH OF A CLOSE-KNIT COMMUNITY. APPROXIMATELY 1,670 FULL TIME STUDENTS ATTEND ALBRIGHT. THEY REPRESENT TWENTY-TWO STATES AND SEVENTEEN COUNTRIES. SIXTY-EIGHT PERCENT OF THE STUDENTS LIVE ON CAMPUS. INTERCOLLEGiate, INTRAMURAL AND CLUB SPORTS ARE A MAJOR PART OF CO-CURRICULAR LIFE AT ALBRIGHT. WITH ONE-QUARTER OF ALL STUDENTS PARTICIPATING IN INTERCOLLEGiate ATHLETIC COMPETITION. THE BOLLMAN CENTER, LIFESPORTS CENTER AND THE SCHUMO CENTER FOR FITNESS AND WELL-BEING OFFER FACILITIES FOR SPORTS AND RECREATIONAL ATHLETICS. THE CENTER FOR THE ARTS IS THE FOCAL POINT FOR VERY ACTIVE VISUAL AND PERFORMING ARTS PROGRAMS AND CONTAINS STUDIOS, A THEATRE, AND THE FREEDMAN GALLERY. THROUGHOUT ITS DISTINGUISHED 155 YEAR HISTORY, ALBRIGHT HAS PROVIDED A RELEVANT EDUCATION THAT PREPARES INDIVIDUALS FOR THE CHALLENGE OF LIFELONG LEARNING. THE COLLEGE OFFERS BACHELOR OF ARTS AND BACHELOR OF SCIENCE DEGREES IN THIRTY AREAS OF CONCENTRATION (MAJORS). IN ADDITION, TWENTY-TWO OTHER COMBINABLE AREAS OF CONCENTRATION AND PROGRAMS (SIMILAR TO MINORS) ARE OFFERED. ALBRIGHT'S PRE-PROFESSIONAL PROGRAMS ARE HIGHLY REGARDED. STATISTICS INDICATE THAT UPON GRADUATION APPROXIMATELY TWENTY PERCENT OF ALUMNI ENROLL IN GRADUATE OR PROFESSIONAL PROGRAMS AND THAT MORE THAN FORTY PERCENT ENROLL WITHIN FIVE YEARS OF GRADUATION. ALBRIGHT'S ACADEMIC CALENDAR IS BASED ON THE 4-1-4 CONCEPT WITH FALL, INTERIM (JANUARY) AND SPRING SEMESTERS. THE FULL-TIME COURSE LOAD FOR FALL AND SPRING IS FOUR COURSES PER SEMESTER. STUDENTS MUST SUCCESSFULLY COMPLETE THIRTY-TWO COURSES FOR GRADUATION. AMPLE OPPORTUNITIES FOR INDIVIDUALLY-DESIGNED MAJORS, COMBINED MAJOR PROGRAMS, INTERDISCIPLINARY STUDY AND INTERNSHIPS ARE AVAILABLE. SEVENTY-FOUR STUDENTS PARTICIPATE IN EITHER THE MASTER OF ARTS OR MASTER OF SCIENCE DEGREES IN EDUCATION WITH CONCENTRATIONS IN ELEMENTARY, SPECIAL AND SECONDARY EDUCATION. ALBRIGHT ALSO OFFERS ACCELERATED DEGREE PROGRAMS FOR ADULT STUDENTS. ACADEMIC ADVISING IS A VITAL PART OF THE SUPPORT SYSTEM PROVIDED FOR STUDENTS. THE ALPHA PROGRAM IS SPECIFICALLY DESIGNED FOR UNDECIDED STUDENTS. CAREER COUNSELING, PEER COUNSELING AND PRIVATE COUNSELING PROVIDE GUIDANCE FOR ALL STUDENTS. ALBRIGHT'S FULL-TIME FACULTY INCLUDES ONE HUNDRED TWENTY-THREE MEMBERS, SEVENTY-EIGHT PERCENT OF WHOM HOLD EITHER A PH.D. OR ANOTHER TERMINAL DEGREE IN THEIR FIELD OF SPECIALIZATION. A COMPLETE RANGE OF FACILITIES SUPPORTS THE ACADEMIC PROGRAMS, INCLUDING THE GINGRICH LIBRARY, THE CENTER FOR MATHEMATICS AND COMPUTING, AND THE RECENTLY EXPANDED AND RENOVATED MERNER-PFEIFFER HALL OF SCIENCE. OTHER CLASSROOM FACILITIES CONTINUE TO BE RENOVATED TO FACILITATE A TECHNOLOGY DRIVEN TEACHING CURRICULUM.

4b (Code) (Expenses \$ including grants of \$) (Revenue \$)

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

4d Other program services (Describe in Schedule O)

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

4e Total program service expenses \$ 61,483,019

Part IV Checklist of Required Schedules

1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A

2 Is the organization required to complete Schedule B, Schedule of Contributors (see instruction)?

3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I

4 **Section 501(c)(3) organizations.** Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II

5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III

6 Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I

7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," complete Schedule D, Part II

8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III

9 Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV

10 Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V

11 If the organization's answer to any of the following questions is 'Yes,' then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable

a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI

b 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

c 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

d 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

e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X

f 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 (ASC 740)? If "Yes," complete Schedule D, Part X

12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII

b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional

13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E

14a Did the organization maintain an office, employees, or agents outside of the United States?

b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If "Yes," complete Schedule F, Parts I and IV

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, Parts II and IV

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, Parts III and IV

17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)

18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II

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

20a Did the organization operate one or more hospitals? If "Yes," complete Schedule H

b If "Yes" to line 20a, did the organization attach its audited financial statement to this return? **Note.** Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)

	Yes	No
1	Yes	
2	Yes	
3		No
4		No
5		No
6		No
7		No
8	Yes	
9		No
10	Yes	
11a	Yes	
11b	Yes	
11c		No
11d	Yes	
11e	Yes	
11f	Yes	
12a		No
12b	Yes	
13	Yes	
14a		No
14b		No
15		No
16		No
17	Yes	
18	Yes	
19		No
20a		No
20b		

Part IV Checklist of Required Schedules (continued)

21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	<input checked="" type="checkbox"/>	21		No
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	<input checked="" type="checkbox"/>	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	<input checked="" type="checkbox"/>	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 lines 24b-24d and complete Schedule K. If "No," go to line 25	<input checked="" type="checkbox"/>	24a	Yes	
24b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		24b		No
24c	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		No
24d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		24d		No
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	<input checked="" type="checkbox"/>	25a		No
25b	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	<input checked="" type="checkbox"/>	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	<input checked="" type="checkbox"/>	26	Yes	
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	<input checked="" type="checkbox"/>	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)		28a		No
28b	a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	<input checked="" type="checkbox"/>	28b		No
28c	b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	<input checked="" type="checkbox"/>	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	<input checked="" type="checkbox"/>	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	<input checked="" type="checkbox"/>	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	<input checked="" type="checkbox"/>	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	<input checked="" type="checkbox"/>	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? If "Yes," complete Schedule R, Part I	<input checked="" type="checkbox"/>	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	<input checked="" type="checkbox"/>	34	Yes	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?		35	Yes	
36	a Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	<input checked="" type="checkbox"/>	36		No
37	✓ Yes <input type="checkbox"/> No		37		No
38	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	<input checked="" type="checkbox"/>	38	Yes	
	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	<input checked="" type="checkbox"/>			
	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O				

Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response to any question in this Part V

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a 2,717	
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b 0	
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c Yes	
2a	Enter the number of employees reported on Form W-3, <i>Transmittal of Wage and Tax Statements</i> filed for the calendar year ending with or within the year covered by this return	2a 1,605	
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b Yes	
Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a Yes	
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b Yes	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a Yes	
b	If "Yes," enter the name of the foreign country CJ, GK See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a No	
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b No	
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c	
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?	6a No	
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b	
7	Organizations that may receive deductible contributions under section 170(c).	7a Yes	
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7b Yes	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7c No	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7d	
d	If "Yes," indicate the number of Forms 8282 filed during the year		
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e No	
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f No	
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g	
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h Yes	
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8	
9	Sponsoring organizations maintaining donor advised funds.	9a	
a	Did the organization make any taxable distributions under section 4966?	9b	
b	Did the organization make a distribution to a donor, donor advisor, or related person?		
10	Section 501(c)(7) organizations. Enter	10a	
a	Initiation fees and capital contributions included on Part VIII, line 12	10b	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities		
11	Section 501(c)(12) organizations. Enter	11a	
a	Gross income from members or shareholders	11b	
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	13a	
a	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O		
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b	
c	Enter the amount of reserves on hand	13c	
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a No	
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b	

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.

Check if Schedule O contains a response to any question in this Part VI

Section A. Governing Body and Management

1a Enter the number of voting members of the governing body at the end of the tax year

1b Enter the number of voting members included in line 1a, above, who are independent

2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?

3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?

4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?

5 Did the organization become aware during the year of a significant diversion of the organization's assets?

6 Does the organization have members or stockholders?

7a Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?

b Are any decisions of the governing body subject to approval by members, stockholders, or other persons?

8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following

a The governing body?

b Each committee with authority to act on behalf of the governing body?

9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O

	Yes	No
1a	32	
1b	31	
2		No
3	Yes	
4		No
5		No
6		No
7a		No
7b		No
8a	Yes	
8b	Yes	
9		No

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

10a Does the organization have local chapters, branches, or affiliates?

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?

11a Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?

b Describe in Schedule O the process, if any, used by the organization to review this Form 990

12a Does the organization have a written conflict of interest policy? If "No," go to line 13

b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?

c Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done

13 Does the organization have a written whistleblower policy?

14 Does the organization have a written document retention and destruction policy?

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

b Other officers or key employees of the organization

If "Yes" to line 15a or 15b, describe the process in Schedule O (See instructions)

16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?

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?

	Yes	No
10a		No
10b		
11a		No
12a	Yes	
12b	Yes	
12c	Yes	
13	Yes	
14		No
15a	Yes	
15b	Yes	
16a		No
16b		

Section C. Disclosure

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

18 Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you make these available. Check all that apply

Own website Another's website Upon request

19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public. See Additional Data Table

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization ►

ALBRIGHT COLLEGE
13TH BERN STREETS PO BOX 15234
READING, PA 196125234
(610) 921-7749

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

(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (check all that apply)					(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee			
See Additional Data Table									
1b Sub-Total									
c Total from continuation sheets to Part VII, Section A									
d Total (add lines 1b and 1c)							1,578,601	0	311,948

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 ►14

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

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
ROYALL & COMPANY 1920 EAST PARHAM ROAD RICHMOND, VA 23228	RECRUITING SERVICE	420,731
LORD AECK SARGENT 301 BROADWAY SUITE 400 BETHLEHEM, PA 18015	ARCHITECTURAL SERVICES	313,713
THE STONE HOUSE GROUP LLC 1201 PEACHTREE ST NE STE 300 ATLANTA, GA 30361	CONSTRUCTION MGMT	189,002
TARGETX 10 CANAL STREET SUITE 205 BRISTOL, PA 19007	DESIGN AND PRINTING SVCS	187,768
GRENZEBACH GLIER & ASSOCIATES INC 401 N MICHIGAN AVENUE SUITE 2800 CHICAGO, IL 60611	FUNDRAISING CONSULTANT	164,059
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 ►6		

Part VIII Statement of Revenue

Contributions, grants and other similar amounts			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
1a Federated campaigns	1a					
b Membership dues	1b					
c Fundraising events	1c	33,018				
d Related organizations	1d					
e Government grants (contributions)	1e	5,009,078				
f All other contributions, gifts, grants, and similar amounts not included above	1f	6,447,925				
g Noncash contributions included in lines 1a-1f \$		697,194				
h Total. Add lines 1a-1f			11,490,021			
Program Service Revenue						
2a STUDENT TUITION AND FE			Business Code			
			611710	58,245,958	58,245,958	
b AUXILIARY ENTERPRISE -			721310	9,506,481	9,506,481	
c AUX ENTERPRISES AND OT			900099	411,016	369,029	41,987
d AUXILIARY ENTERPRISE -			451211	217,020	217,020	
e						
f All other program service revenue						
g Total. Add lines 2a-2f			68,380,475			
Other Revenue						
3 Investment income (including dividends, interest and other similar amounts)						
				1,134,021		1,134,021
4 Income from investment of tax-exempt bond proceeds						
5 Royalties				696,333		696,333
6a Gross Rents		(I) Real	(II) Personal			
		262,722				
b Less rental expenses		96,243				
c Rental income or (loss)		166,479				
d Net rental income or (loss)				166,479	65,151	101,328
7a Gross amount from sales of assets other than inventory		(I) Securities	(II) Other			
		11,038,068	5,026			
b Less cost or other basis and sales expenses		9,617,069	7,577			
c Gain or (loss)		1,420,999	-2,551			
d Net gain or (loss)				1,418,448		1,418,448
8a Gross income from fundraising events (not including \$ 33,018 of contributions reported on line 1c) See Part IV, line 18						
a			13,613			
b Less direct expenses	b		13,135			
c Net income or (loss) from fundraising events				478		478
9a Gross income from gaming activities See Part IV, line 19	a					
b Less direct expenses	b					
c Net income or (loss) from gaming activities						
10a Gross sales of inventory, less returns and allowances						
a						
b Less cost of goods sold	b					
c Net income or (loss) from sales of inventory						
Miscellaneous Revenue		Business Code				
11a FOOD SERVICE		722210	593,820			593,820
b CONFERENCES		812900	386,658		386,658	
c ATHLETICS AND AQUATIC		900099	286,137	45,005	241,132	
d All other revenue			286,094	125,351	146,413	14,330
e Total. Add lines 11a-11d			1,552,709			
12 Total revenue. See Instructions			84,838,964	68,508,844	839,354	4,000,745

Part IX Statement of Functional Expenses**Section 501(c)(3) and 501(c)(4) organizations must complete all columns.****All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).**

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the U S See Part IV, line 21				
2 Grants and other assistance to individuals in the U S See Part IV, line 22	23,889,799	23,889,799		
3 Grants and other assistance to governments, organizations, and individuals outside the U S See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees . . .	1,265,737	373,587	696,372	195,778
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) . . .				
7 Other salaries and wages	22,325,133	16,762,219	4,761,325	801,589
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions) . . .	1,518,342	1,140,001	323,817	54,524
9 Other employee benefits . . .	3,862,212	2,924,861	802,267	135,084
10 Payroll taxes . . .	1,599,236	1,200,738	341,069	57,429
a Fees for services (non-employees) Management . . .				
b Legal . . .	168,560		168,560	
c Accounting . . .	75,281		75,281	
d Lobbying . . .				
e Professional fundraising services See Part IV, line 17 . .	142,976			142,976
f Investment management fees . . .	155,353		155,353	
g Other . . .	1,090,790	561,494	485,170	44,126
12 Advertising and promotion . . .	567,436	481,597	85,839	
13 Office expenses . . .	4,025,480	3,615,963	325,312	84,205
14 Information technology . . .	676,842	59,133	616,552	1,157
15 Royalties . . .	2,486	2,486		
16 Occupancy . . .	3,225,979	3,152,513	62,879	10,587
17 Travel . . .	620,700	538,586	56,593	25,521
18 Payments of travel or entertainment expenses for any federal, state, or local public officials . . .				
19 Conferences, conventions, and meetings . . .	409,393	261,378	129,103	18,912
20 Interest . . .	1,114,399	1,010,537	88,894	14,968
21 Payments to affiliates . . .				
22 Depreciation, depletion, and amortization . . .	3,326,433	3,016,410	265,345	44,678
23 Insurance . . .	613,682	555,517	49,783	8,382
24 Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24f If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O)				
a EQUIPMENT ACQUISITION,	674,593	559,042	84,105	31,446
b RECRUITMENT & RETENTION	571,438	571,438		
c FINANCING ACTIVITY EXPENSE	461,447		461,447	
d BAD DEBT EXPENSE	401,489		401,489	
e BANK AND CREDIT CARD CH	211,800		211,800	
f All other expenses	1,360,405	805,720	346,359	208,326
25 Total functional expenses. Add lines 1 through 24f	74,357,421	61,483,019	10,994,714	1,879,688
26 Joint costs. Check here <input checked="" type="checkbox"/> if following SOP 98-2 (ASC 958-720) Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X Balance Sheet

		(A) Beginning of year	(B) End of year
Assets	1 Cash—non-interest-bearing	283,699	1 71,838
	2 Savings and temporary cash investments	12,188,543	2 7,914,815
	3 Pledges and grants receivable, net	2,219,581	3 5,107,921
	4 Accounts receivable, net	51,227	4 1,021,796
	5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L		
			5 518
	6 Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers, and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Schedule L		6
	7 Notes and loans receivable, net	3,175,802	7 2,742,408
	8 Inventories for sale or use	237,617	8 204,466
	9 Prepaid expenses and deferred charges	433,442	9 560,666
	10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	128,116,329	
	10b Less accumulated depreciation	50,910,664	
		62,285,281	10c 77,205,665
	11 Investments—publicly traded securities	31,758,548	11 36,550,847
	12 Investments—other securities See Part IV, line 11	5,029,712	12 9,064,620
	13 Investments—program-related See Part IV, line 11		13
	14 Intangible assets		14
	15 Other assets See Part IV, line 11	20,342,622	15 14,903,539
	16 Total assets. Add lines 1 through 15 (must equal line 34)	138,006,074	16 155,349,099
Liabilities	17 Accounts payable and accrued expenses	13,613,879	17 14,479,028
	18 Grants payable	2,320,724	18 2,355,445
	19 Deferred revenue	3,244,943	19 2,802,246
	20 Tax-exempt bond liabilities	42,690,769	20 41,390,482
	21 Escrow or custodial account liability Complete Part IV of Schedule D		21
	22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L		22
	23 Secured mortgages and notes payable to unrelated third parties		23
	24 Unsecured notes and loans payable to unrelated third parties		24
	25 Other liabilities Complete Part X of Schedule D	2,748,319	25 2,537,737
	26 Total liabilities. Add lines 17 through 25	64,618,634	26 63,564,938
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.		
	27 Unrestricted net assets	19,804,211	27 33,772,042
	28 Temporarily restricted net assets	23,803,538	28 25,212,239
	29 Permanently restricted net assets	29,779,691	29 32,799,880
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34.		
	30 Capital stock or trust principal, or current funds		30
	31 Paid-in or capital surplus, or land, building or equipment fund		31
	32 Retained earnings, endowment, accumulated income, or other funds		32
	33 Total net assets or fund balances	73,387,440	33 91,784,161
	34 Total liabilities and net assets/fund balances	138,006,074	34 155,349,099

Part XI Reconciliation of Net AssetsCheck if Schedule O contains a response to any question in this Part XI

1	Total revenue (must equal Part VIII, column (A), line 12)	1	84,838,964
2	Total expenses (must equal Part IX, column (A), line 25)	2	74,357,421
3	Revenue less expenses Subtract line 2 from line 1	3	10,481,543
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	73,387,440
5	Other changes in net assets or fund balances (explain in Schedule O)	5	7,915,178
6	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6	91,784,161

Part XII Financial Statements and ReportingCheck if Schedule O contains a response to any question in this Part XII

	Yes	No
1 Accounting method used to prepare the Form 990 <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O		
2a Were the organization's financial statements compiled or reviewed by an independent accountant? <input type="checkbox"/>	2a	No
2b Were the organization's financial statements audited by an independent accountant? <input type="checkbox"/>	2b	Yes
2c 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 <input type="checkbox"/>	2c	Yes
2d If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a separate basis, consolidated basis, or both <input type="checkbox"/> Separate basis <input checked="" type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separated basis		
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? <input type="checkbox"/>	3a	Yes
3b 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 <input type="checkbox"/>	3b	Yes

2010

Open to Public
Inspection**SCHEDULE A**
(Form 990 or 990EZ)**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.

Department of the Treasury
Internal Revenue Service

Name of the organization
ALBRIGHT COLLEGE

Employer identification number

23-1352615

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

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

1 A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i)**.
 2 A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E)
 3 A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.
 4 A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state
 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II)
 6 A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)** (Complete Part II)
 8 A community trust described in **section 170(b)(1)(A)(vi)** (Complete Part II)
 9 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2)**. (Complete Part III)
 10 An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**.
 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See **section 509(a)(3)**. Check the box that describes the type of supporting organization and complete lines 11e through 11h
 a Type I b Type II c Type III - Functionally integrated d Type III - Other
 e By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2)
 f If the organization received a written determination from the IRS that it is a Type I, Type II or Type III supporting organization, check this box
 g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?
 (i) a person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?
 (ii) a family member of a person described in (i) above?
 (iii) a 35% controlled entity of a person described in (i) or (ii) above?
 h Provide the following information about the supported organization(s)

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

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

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")						
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3						
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public Support. Subtract line 5 from line 4						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
7 Amounts from line 4						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
11 Total support (Add lines 7 through 10)						
12 Gross receipts from related activities, etc (See instructions)					12	
13 First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here						►

Section C. Computation of Public Support Percentage

14 Public Support Percentage for 2010 (line 6 column (f) divided by line 11 column (f))	14	
15 Public Support Percentage for 2009 Schedule A, Part II, line 14	15	
16a 33 1/3% support test—2010. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here . The organization qualifies as a publicly supported organization		►
b 33 1/3% support test—2009. If the organization did not check the box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here . The organization qualifies as a publicly supported organization		►
17a 10%-facts-and-circumstances test—2010. If the organization did not check a box on line 13, 16a, or 16b and line 14 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and stop here . Explain in Part IV how the organization meets the "facts and circumstances" test. The organization qualifies as a publicly supported organization		►
b 10%-facts-and-circumstances test—2009. If the organization did not check a box on line 13, 16a, 16b, or 17a and line 15 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and stop here . Explain in Part IV how the organization meets the "facts and circumstances" test. The organization qualifies as a publicly supported organization		►
18 Private Foundation If the organization did not check a box on line 13, 16a, 16b, 17a or 17b, check this box and see instructions		►

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

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public Support (Subtract line 7c from line 6)						

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
13 Total support (Add lines 9, 10c, 11 and 12)						

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

Section C. Computation of Public Support Percentage

15 Public Support Percentage for 2010 (line 8 column (f) divided by line 13 column (f))	15
16 Public support percentage from 2009 Schedule A, Part III, line 15	16

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2010 (line 10c column (f) divided by line 13 column (f))	17
18 Investment income percentage from 2009 Schedule A, Part III, line 17	18
19a 33 1/3% support tests—2010. If the organization did not check the box on line 14, and line 15 is more than 33 1/3% and line 17 is not more than 33 1/3%, check this box and stop here . The organization qualifies as a publicly supported organization ►	
b 33 1/3% support tests—2009. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and stop here . The organization qualifies as a publicly supported organization ►	
20 Private Foundation If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions ►	

Part IV **Supplemental Information.** Supplemental Information. Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).

Facts And Circumstances Test

2010

Open to Public
Inspection**SCHEDULE D**
(Form 990)**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.

Department of the Treasury
Internal Revenue Service**Name of the organization**
ALBRIGHT COLLEGE**Employer identification number**

23-1352615

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

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate contributions to (during year)		
3 Aggregate grants from (during year)		
4 Aggregate value at end of year		

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Yes No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Yes No

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

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

Preservation of land for public use (e.g., recreation or pleasure) Preservation of an historically importantly land area

Protection of natural habitat Preservation of a certified historic structure

Preservation of open space

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

	Held at the End of the Year
2a	
2b	
2c	
2d	

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

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

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Yes No

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

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

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)? Yes No

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

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

1a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items

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

(i) Revenues included in Form 990, Part VIII, line 1 ► \$ _____

(ii) Assets included in Form 990, Part X ► \$ _____

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

a Revenues included in Form 990, Part VIII, line 1 ► \$ _____

b Assets included in Form 990, Part X ► \$ _____

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

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

a Public exhibition

d Loan or exchange programs

b Scholarly research

e Other

c Preservation for future generations

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

5 During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

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

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No

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

	Amount
1c	
1d	
1e	
1f	

2a Did the organization include an amount on Form 990, Part X, line 21? Yes No

b If "Yes," explain the arrangement in Part XIV

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

	(a) Current Year	(b) Prior Year	(c) Two Years Back	(d) Three Years Back	(e) Four Years Back
1a Beginning of year balance	35,697,844	32,108,490	42,985,782		
b Contributions	1,647,252	299,842	613,961		
c Investment earnings or losses	8,832,208	5,514,996	-9,535,278		
d Grants or scholarships	776,300	810,800	676,723		
e Other expenditures for facilities and programs	1,038,117	1,263,011	1,087,415		
f Administrative expenses	137,197	151,673	191,837		
g End of year balance	44,225,690	35,697,844	32,108,490		

2 Provide the estimated percentage of the year end balance held as

a Board designated or quasi-endowment ► 20 300 %

b Permanent endowment ► 51 900 %

c Term endowment ► 27 800 %

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by

(i) unrelated organizations Yes No

(ii) related organizations Yes No

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

	Yes	No
3a(i)	Yes	
3a(ii)		No
3b		

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

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

	Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		2,178,536			2,178,536
b Buildings		88,631,482	31,431,496		57,199,986
c Leasehold improvements		70,480	70,480		0
d Equipment		18,258,911	12,668,493		5,590,418
e Other		18,976,920	6,740,195		12,236,725
Total. Add lines 1a-1e (Column (d) should equal Form 990, Part X, column (B), line 10(c).)					77,205,665

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

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A) OFFSHORE HEDGE FUND	3,792,182	F
(B) OFFSHORE EQUITY FUND	698,951	F
(C) DOMESTIC EQUITY FUNDS	4,573,487	F
Total. (Column (b) should equal Form 990, Part X, col (B) line 12.)	9,064,620	

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

(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value
Total. (Column (b) should equal Form 990, Part X, col (B) line 13.)		

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

(a) Description	(b) Book value
(1) ASSETS HELD IN TRUST BY OTHERS	9,850,161
(2) DEPOSITS HELD BY BOND TRUSTEES	2,631,491
(3) DEFERRED FINANCING COSTS	163,734
(4) MISCELLANEOUS RECEIVABLES	2,102,839
(5) OTHER ASSETS	155,314
Total. (Column (b) should equal Form 990, Part X, col.(B) line 15.)	14,903,539

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

(a) Description of Liability	(b) Amount
Federal Income Taxes	
EARLY RETIREMENT	591,618
POST RETIREMENT HEALTHCARE BENEFITS	477,964
OTHER LIABILITIES	128,200
CHARITABLE GIFT ANNUITY CONTRACT LIABILITIES	1,339,955
Total. (Column (b) should equal Form 990, Part X, col (B) line 25.)	2,537,737

2. FIN 48 (ASC 740) Footnote In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740)

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

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	84,838,964
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	74,357,421
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	10,481,543
4	Net unrealized gains (losses) on investments	4	7,915,178
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	7,915,178
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	18,396,721

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

1	Total revenue, gains, and other support per audited financial statements	1	69,065,367
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains on investments	2a	7,915,178
b	Donated services and use of facilities	2b	31,962
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIV)	2d	-23,469,161
e	Add lines 2a through 2d	2e	-15,522,021
3	Subtract line 2e from line 1	3	84,587,388
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	256,697
b	Other (Describe in Part XIV)	4b	-5,121
c	Add lines 4a and 4b	4c	251,576
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	84,838,964

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

1	Total expenses and losses per audited financial statements	1	50,639,667
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
a	Donated services and use of facilities	2a	31,962
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIV)	2d	540,403
e	Add lines 2a through 2d	2e	572,365
3	Subtract line 2e from line 1	3	50,067,302
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	256,697
b	Other (Describe in Part XIV)	4b	24,033,422
c	Add lines 4a and 4b	4c	24,290,119
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5	74,357,421

Part XIV Supplemental Information

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

Identifier	Return Reference	Explanation
	PART III, LINE 1A	THE COLLEGE DOES NOT ASSIGN VALUES TO COLLECTION ITEMS. COLLECTION ITEMS ARE GENERALLY HELD FOR EDUCATIONAL PURPOSES AND ARE NOT DISPOSED OF FOR FINANCIAL GAIN OR OTHERWISE ENCUMBERED IN ANY MANNER.
	PART III, LINE 4	ALBRIGHT COLLEGE MAINTAINS A DIVERSE COLLECTION OF TWO AND THREE DIMENSIONAL WORKS OF ART ACROSS THE CAMPUS. THE MAJORITY OF THE WORKS OF ART ARE ORIGINAL PRINTS AND PHOTOGRAPHS FROM THE 1960S UP TO THE 1990S, WITH AN EMPHASIS ON WORKS BY AMERICAN ARTISTS. ALL WORKS OF ART ARE AVAILABLE FOR STUDY AND RESEARCH BY STUDENTS, FACULTY, STAFF, AND THE GENERAL PUBLIC. EXHIBITIONS AND EDUCATIONAL PROGRAMS ARE DEVELOPED AROUND VARIOUS ASPECTS OF THE WORKS OF ART FOR THE CAMPUS AND THE GENERAL PUBLIC. SOME EDUCATIONAL PROGRAMS ARE DEVELOPED SPECIFICALLY FOR K-12 SCHOOL GROUPS AND ADULTS FROM THE REGION IN THE FREEDMAN GALLERY, WHILE OTHER PROGRAMS AND WORKS OF ART ARE TAKEN DIRECTLY TO OFFSITE EDUCATIONAL INSTITUTIONS. WORKS OF ART ARE FREQUENTLY TAKEN INTO CLASSES FOR LECTURES AND TRAINING PURPOSES. MANY OF THE WORKS OF ART ARE AVAILABLE FOR USE BY OTHER EDUCATIONAL INSTITUTIONS. ALL WORKS OF ART ARE HANDLED BY SPECIFICALLY TRAINED STAFF AND STUDENTS.
DESCRIPTION OF INTENDED USE OF ENDOWMENT FUNDS	PART V, LINE 4	THE ENDOWMENT FUNDS ARE INTENDED TO BE USED TO SUPPORT STUDENT FINANCIAL AID, INSTRUCTION AND OTHER COLLEGE OPERATIONS.
DESCRIPTION OF UNCERTAIN TAX POSITIONS UNDER FIN 48	PART X	THE COLLEGE FOLLOWS THE FASB GUIDANCE RELATED TO ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES - AN INTERPRETATION OF THE FASB GUIDANCE RELATED TO ACCOUNTING FOR INCOME TAXES EFFECTIVE JUNE 1, 2007. THE GUIDANCE CLARIFIES THE ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES RECOGNIZED IN AN ENTITY'S FINANCIAL STATEMENTS AND PRESCRIBES A RECOGNITION THRESHOLD OF MORE-LIKELY-THAN-NOT TO BE SUSTAINED UPON EXAMINATION BY THE APPROPRIATE TAXING AUTHORITY. MEASUREMENT OF THE TAX UNCERTAINTY OCCURS IF THE RECOGNITION THRESHOLD HAS BEEN MET. THE GUIDANCE ALSO PROVIDES GUIDANCE ON DERECOGNITION, CLASSIFICATION, INTEREST AND PENALTIES, ACCOUNTING IN INTERIM PERIODS, AND DISCLOSURE. MANAGEMENT HAS DETERMINED THAT THERE ARE NO SIGNIFICANT UNCERTAIN TAX POSITIONS MEETING THE RECOGNITION CRITERIA IN 2011 AND 2010.
PART XII, LINE 2D - OTHER ADJUSTMENTS		REVENUE OF SUBSIDIARY (NTSI) 564,261 REVENUE OF NTSI WHICH WAS COLLEGE EXPENSE -143,623 STUDENT AID -23,889,799
PART XII, LINE 4B - OTHER ADJUSTMENTS		REVENUE FOR SERVICES PROVIDED BY SUBSIDIARY (NTSI) 104,256 RENTAL EXPENSES -96,243 FUND RAISING EVENT EXPENSE -13,134
PART XIII, LINE 2D - OTHER ADJUSTMENTS		TOTAL EXPENSE OF SUBSIDIARY (NTSI) 535,282 SUBSIDIARY'S INTERORGANIZATIONAL EXPENSES - 104,256 RENTAL EXPENSES 96,243 FUND RAISING EVENT EXPENSE 13,134
PART XIII, LINE 4B - OTHER ADJUSTMENTS		STUDENT AID 23,889,799 COLLEGE EXPENSE WHICH WAS SUBSIDIARY'S REVENUE 143,623

2010

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

Department of the Treasury
Internal Revenue ServiceName of the organization
ALBRIGHT COLLEGE

Employer identification number

23-1352615

Part I

1 Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?

2 Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?

3 Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe. If "No," please explain. If you need more space use Part II

	YES	NO
1		No
2	Yes	
3		No

4 Does the organization maintain the following?

a Records indicating the racial composition of the student body, faculty, and administrative staff?

b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?

c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?

d Copies of all material used by the organization or on its behalf to solicit contributions?

If you answered "No" to any of the above, please explain. If you need more space, use Part II

4a	Yes	
4b	Yes	
4c	Yes	
4d	Yes	

5 Does the organization discriminate by race in any way with respect to

a Students' rights or privileges?

b Admissions policies?

c Employment of faculty or administrative staff?

d Scholarships or other financial assistance?

e Educational policies?

f Use of facilities?

g Athletic programs?

h Other extracurricular activities?

If you answered "Yes" to any of the above, please explain. If you need more space, use Part II

5a		No
5b		No
5c		No
5d		No
5e		No
5f		No
5g		No
5h		No

6a Does the organization receive any financial aid or assistance from a governmental agency?

b Has the organization's right to such aid ever been revoked or suspended?

If you answered "Yes" to either line 6a or line 6b, explain on Part II

7 Does the organization certify that it has complied with the applicable requirements of sections 401 through 405 of Rev. Proc. 75-50, 1975-2 C B 587, covering racial nondiscrimination? If "No," explain on Part II

6a	Yes	
6b		No
7	Yes	

Part II Supplemental Information

Complete this part to provide the explanations required by Part I, lines 3, 4d, 5h, 6b, and 7, as applicable. Also complete this part to provide any other additional information (see instructions)

Identifier	Return Reference	Explanation
EXPLANATION OF NONDISCRIMINATORY POLICY PUBLICATION	SCHEDULE E, PART I, LINE 3	ALBRIGHT COLLEGE HAS SATISFIED THE PUBLICITY REQUIREMENT OF IRS REVENUE PROCEDURE 75-50, 1975-2 C B 587 SECTION 4 03 BY COMPLYING WITH SECTION 4 02. THE COLLEGE DRAWS A SUBSTANTIAL PERCENTAGE OF ITS STUDENTS NATIONWIDE AND FROM A LARGE GEOGRAPHIC AREA AND ENROLLS MINORITY STUDENTS IN MEANINGFUL NUMBERS, AND, THEREFORE, MEETS THE CONDITION IN SECTION 4 03 - 2(B). THE COLLEGE'S NONDISCRIMINATORY POLICY IS CONTAINED IN ITS SOLICITATION LITERATURE
EXPLANATION OF GOVERNMENT FINANCIAL ASSISTANCE	SCHEDULE E, PART I, LINE 6	ALBRIGHT COLLEGE PARTICIPATES IN STUDENT FINANCIAL AID ASSISTANCE PROGRAMS OF VARIOUS FEDERAL AND STATE GOVERNMENTAL AGENCIES. FEDERAL PROGRAMS INCLUDE THE PELL GRANT PROGRAM, SUPPLEMENTAL EDUCATIONAL OPPORTUNITY GRANT (SEOG) PROGRAM, FEDERAL WORK STUDY (FWS) PROGRAM, AND THE PERKINS LOAN PROGRAM. STATE PROGRAMS FOR STUDENTS INCLUDE THE PENNSYLVANIA HIGHER EDUCATION ASSISTANCE AGENCY'S (PHEAA) GRANT PROGRAM AND THE PHEAA'S MATCHING FUNDS PROGRAMS WHICH SUPPLEMENTS THE FWS PROGRAM. IN ADDITION, THE COLLEGE IS AWARDED SPONSORED RESEARCH AND OTHER PROJECT GRANTS BY VARIOUS LOCAL, STATE, AND FEDERAL AGENCIES, INCLUDING THE NATIONAL SCIENCE FOUNDATION (NSF) AND THE NATIONAL ENDOWMENT FOR THE ARTS (NEA). GENERAL SUPPORT IS PROVIDED TO ALBRIGHT COLLEGE BY THE COMMONWEALTH OF PENNSYLVANIA UNDER ITS INSTITUTIONAL ASSISTANCE GRANT (IAG) PROGRAM TO PRIVATE COLLEGES AND UNIVERSITIES IN THE STATE

2010

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InspectionSCHEDULE G
(Form 990 or 990-EZ)Supplemental Information Regarding
Fundraising or Gaming Activities

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19,
or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.
► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

Department of the Treasury
Internal Revenue ServiceName of the organization
ALBRIGHT COLLEGE

Employer identification number

23-1352615

Part I Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17.

1 Indicate whether the organization raised funds through any of the following activities Check all that apply

a <input checked="" type="checkbox"/> Mail solicitations	e <input checked="" type="checkbox"/> Solicitation of non-government grants
b <input checked="" type="checkbox"/> Internet and e-mail solicitations	f <input checked="" type="checkbox"/> Solicitation of government grants
c <input checked="" type="checkbox"/> Phone solicitations	g <input type="checkbox"/> Special fundraising events
d <input checked="" type="checkbox"/> In-person solicitations	

2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? Yes No

b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization Form 990-EZ filers are not required to complete this table

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
GRENZEBACH GLIER & ASSOCIATES INC PO BOX 88277 DEPT A CHICAGO, IL 606801277	CONSULTING		No	0	142,976	0
Total					142,976	

3 List all states in which the organization is registered or licensed to solicit funds or has been notified it is exempt from registration or licensing

PA

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

		(a) Event #1	(b) Event #2	(c) Other Events	(d) Total Events (Add col (a) through col (c))
		<u>RED & WHITE GOLF</u> (event type)	(event type)	(total number)	
Revenue	1 Gross receipts . . .	46,631			46,631
	2 Less Charitable contributions . . .	33,018			33,018
	3 Gross income (line 1 minus line 2) . . .	13,613			13,613
Direct Expenses	4 Cash prizes . . .				
	5 Non-cash prizes . . .	81			81
	6 Rent/facility costs . . .	6,201			6,201
	7 Food and beverages . . .	5,228			5,228
	8 Entertainment . . .	333			333
	9 Other direct expenses . . .	1,292			1,292
	10 Direct expense summary Add lines 4 through 9 in column (d)				13,135
	11 Net income summary Combine lines 3 and 10 in column (d)				478

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

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

9 Enter the state(s) in which the organization operates gaming activities _____

a Is the organization licensed to operate gaming activities in each of these states? Yes No
b If "No," Explain _____

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? Yes No
b If "Yes," Explain _____

11 Does the organization operate gaming activities with nonmembers? Yes No

12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? Yes No

13 Indicate the percentage of gaming activity operated in

a The organization's facility	13a
b An outside facility	13b

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

Name ►

Address ►

15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? Yes No

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

c If "Yes," enter name and address

Name ►

Address ►

16 Gaming manager information

Name ►

Gaming manager compensation ► \$

Description of services provided ►

 Director/officer Employee Independent contractor**17** Mandatory distributions

a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? Yes No

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

Part IV Complete this part to provide additional information for responses to question on Schedule G (see instructions.)

Identifier

ReturnReference

Explanation

**Schedule I
(Form 990)**

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

2010

Open to Public
Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization
ALBRIGHT COLLEGE

Employer identification number

Part I General Information on Grants and Assistance

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No

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

Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to

Form 990, Part IV, line 21 for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Part II can be duplicated if additional space is needed.

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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
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.

Identifier	Return Reference	Explanation
OTHER INFORMATION	PART IV	THE COLLEGE MAKES GRANTS TO STUDENTS BASED UPON FINANCIAL NEED AND ACADEMIC EXCELLENCE. THE SELECTION OF GRANT RECIPIENTS IS MADE BASED UPON OBJECTIVE CRITERIA. NO ONE IS DISCRIMINATED AGAINST BASED UPON RACE, RELIGION, GENDER, ETHNIC BACKGROUND, AGE, HANDICAP OR ANY OTHER REASON. THE FINANCIAL AID DEPARTMENT ASSESSES AND MONITORS THE ELIGIBILITY AND AWARDING OF GRANTS AND SCHOLARSHIPS TO STUDENTS. IT IS ASSISTED IN ITS ON-GOING REVIEW BY THE RESOURCES OF THE REGISTRAR AND STUDENT ACCOUNTS DEPARTMENTS.

Software ID:
Software Version:
EIN: 23-1352615
Name: ALBRIGHT COLLEGE

Form 990, Schedule I, Part III, Grants and Other Assistance to Individuals in the United States

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
TRUSTEE GRANTS	1070	7,947,213			N/A
PRESIDENTIAL SCHOLARSHIP / DEAN	339	4,162,175			N/A
ALUMNI SCHOLARSHIP	403	3,534,000			N/A
JACOB ALBRIGHT SCHOLARSHIP	139	2,625,000			N/A
EUGENE SHIRK SCHOLARSHIP	98	1,544,700			N/A
ENDOWED SCHOLARSHIPS	224	1,024,640			N/A
SUPPLEMENTAL EDUCATIONAL OPPORTUNITY GRANTS	425	839,250			N/A
COMMUNITY SERVICE LEADERSHIP SCHOLARSHIPS	61	333,500			N/A
NATIONAL HONOR SOCIETY SCHOLARSHIPS	373	359,025			N/A
COLEMAN AWARDS	110	394,375			N/A
GENERAL SCHOLARSHIPS - PARTNERSHIP	235	214,722			N/A
TALENT AWARDS	85	180,000			N/A
OTHER SCHOLARSHIPS, GRANTS AND AWARDS	278	731,199			N/A

Schedule J
(Form 990)**Compensation Information**

OMB No 1545-0047

2010Department of the Treasury
Internal Revenue Service

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.

Open to Public Inspection**Name of the organization**
ALBRIGHT COLLEGE**Employer identification number**

23-1352615

Part I Questions Regarding Compensation

1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items

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

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

2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?

3 Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director. Check all that apply

<input checked="" type="checkbox"/> Compensation committee	<input checked="" type="checkbox"/> Written employment contract
<input checked="" type="checkbox"/> Independent compensation consultant	<input checked="" type="checkbox"/> Compensation survey or study
<input type="checkbox"/> Form 990 of other organizations	<input checked="" type="checkbox"/> Approval by the board or compensation committee

4 During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization

a Receive a severance payment or change-of-control payment from the organization or a related organization?

b Participate in, or receive payment from, a supplemental nonqualified retirement plan?

c Participate in, or receive payment from, an equity-based compensation arrangement?

If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III

Only 501(c)(3) and 501(c)(4) organizations only must complete lines 5-9.

5 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of

a The organization?

b Any related organization?

If "Yes," to line 5a or 5b, describe in Part III

6 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of

a The organization?

b Any related organization?

If "Yes," to line 6a or 6b, describe in Part III

7 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III

8 Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regs. section 53.4958-4(a)(3)? If "Yes," describe in Part III

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

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

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

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

Note. The sum of columns (B)(i)-(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-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) LEX O MCMILLAN III PHD	(i) 269,622 (ii) 0	40,500 0	0 0	70,600 0	64,792 0	445,514 0	0 0
(2) WILLIAM W WOOD	(i) 132,872 (ii) 0	1,000 0	0 0	13,900 0	7,731 0	155,503 0	0 0
(3) TIMOTHY A MCELWEE	(i) 133,608 (ii) 0	1,000 0	0 0	6,689 0	9,401 0	150,698 0	0 0
(4) ANDREA E CHAPDELAINE	(i) 147,351 (ii) 0	1,000 0	0 0	14,592 0	9,945 0	172,888 0	0 0
(5) DANIEL J FALABELLA	(i) 137,030 (ii) 0	903 0	0 0	9,068 0	4,925 0	151,926 0	0 0
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							
(13)							
(14)							
(15)							
(16)							

Part III Supplemental Information

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

Identifier	Return Reference	Explanation
	PART I, LINE 1A	HOUSING ALLOWANCE OR RESIDENCE FOR PERSONAL USE A COLLEGE OWNED HOUSE IS PROVIDED AS A RESIDENCE FOR THE PRESIDENT AND FAMILY BECAUSE IT IS ALSO USED FOR COLLEGE MEETINGS, EVENTS AND OTHER BUSINESS, IT IS NOT TREATED AS A TAXABLE BENEFIT. HEALTH OR SOCIAL CLUB DUES OR INITIATION FEES THE PRESIDENT IS PROVIDED MEMBERSHIP TO A LOCAL COUNTRY CLUB TO FACILITATE THE CONDUCT OF COLLEGE BUSINESS AND CONSEQUENTLY IT IS NOT TREATED AS A TAXABLE BENEFIT
	PART I, LINE 7	THE PRESIDENT IS ELIGIBLE FOR A BONUS AT THE DISCRETION OF THE BOARD OF TRUSTEES. SUCH A NON-FIXED PAYMENT WAS MADE DURING 2010

**Schedule K
(Form 990)****2010****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 O (Form 990).

► Attach to Form 990. ► See separate instructions.

**Open to Public
Inspection**Department of the Treasury
Internal Revenue ServiceName of the organization
ALBRIGHT COLLEGEEmployer identification number
23-1352615**Part I Bond Issues**

(a) Issuer Name	(b) Issuer EIN	(c) CUSIP #	(d) Date Issued	(e) Issue Price	(f) Description of Purpose	(g) Defeased		(h) On Behalf of Issuer		(i) Pool financing	
						Yes	No	Yes	No	Yes	No
A THE BERKS COUNTY MUNICIPAL AUTHORITY	23-6647630	084536GQ8	01-08-2004	23,861,485	CONSTRUCTION OF FACILITY & REFUNDING OF PRIOR ISSUE (10/13/93)		X		X		X
B THE BERKS COUNTY MUNICIPAL AUTHORITY	23-6647630	084537AB5	12-30-2010	25,500,000	REFUND PRIOR ISSUE (11/20/08)		X		X		X

Part II Proceeds

1	Amount of bonds retired	A		B		C		D	
		7,950,000							
2	Amount of bonds legally defeased								
3	Total proceeds of issue		23,980,122		25,500,000				
4	Gross proceeds in reserve funds		1,800,968						
5	Capitalized interest from proceeds								
6	Proceeds in refunding escrow								
7	Issuance costs from proceeds		283,593						
8	Credit enhancement from proceeds								
9	Working capital expenditures from proceeds								
10	Capital expenditures from proceeds		5,489,792						
11	Other spent proceeds		16,405,770		25,500,000				
12	Other unspent proceeds								
13	Year of substantial completion		2005		2010				
		Yes	No	Yes	No	Yes	No	Yes	No
14	Were the bonds issued as part of a current refunding issue?	X		X					
15	Were the bonds issued as part of an advance refunding issue?		X		X				
16	Has the final allocation of proceeds been made?	X		X					
17	Does the organization maintain adequate books and records to support the final allocation of proceeds?	X		X					

Part III Private Business Use

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

Part III Private Business Use (Continued)

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

Part IV Arbitrage

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
		X		X				
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		X				
2 Is the bond issue a variable rate issue?		X	X					
3a Has the organization or the governmental issuer entered into a hedge with respect to the bond issue?		X	X					
b Name of provider	WACHOVIA BANK NA		WACHOVIA BANK NA					
c Term of hedge	7 900000000000		7 900000000000					
d Was the hedge superintegrated?		X		X				
e Was a hedge terminated?		X		X				
4a Were gross proceeds invested in a GIC?	X			X				
b Name of provider	WACHOVIA BANK NA							
c Term of GIC	20 700000000000							
d Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?	X							
5 Were any gross proceeds invested beyond an available temporary period?		X		X				
6 Did the bond issue qualify for an exception to rebate?	X		X					

Part V Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule K (see instructions)

Identifier	Return Reference	Explanation
SCHEDULE K SUPPLEMENTAL INFORMATION		PART II, LINE 3 - THE TOTAL PROCEEDS DO NOT AGREE TO THE ISSUE PRICE IN PART I, COLUMN (E) DUE TO INVESTMENT EARNINGS
PART III LINE 3		THERE ARE NO MANAGEMENT OR SERVICE CONTRACTS OR RESEARCH AGREEMENTS RELATING TO THE FINANCED PROPERTIES FOR EITHER BOND ISSUE

Schedule L

(Form 990 or 990-EZ)

Transactions with Interested Persons

OMB No 1545-0047

2010

Department of the Treasury
Internal Revenue Service

► Complete if the organization answered "Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V lines 38a or 40b.

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

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

**Open to Public
Inspection**

Name of the organization

ALBRIGHT COLLEGE

Employer identification number

23-1352615

Part I Excess Benefit Transactions (section 501(c)(3) and section 501 (c)(4) organizations only)

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b.

1	(a) Name of disqualified person	(b) Description of transaction	(c) Corrected?	
			Yes	No

2 Enter the amount of tax imposed on the organization managers or disqualified persons during the year under section 4958 **\$** _____

3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization. \$

Part II Loans to and/or From Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 26, or Form 990-EZ, Part V, line 38a.

(a) Name of interested person and purpose	(b) Loan to or from the organization?		(c) Original principal amount	(d) Balance due	(e) In default?		(f) Approved by board or committee?		(g) Written agreement?	
	To	From			Yes	No	Yes	No	Yes	No
(1) WILLIAM WOOD LOAN PROGRAM FOR COMPUTER PURCHASE		X	1,131	518	No		No		Yes	
Total				► \$ 518						

Part III Grants or Assistance Benefitting Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

Part IV Business Transactions Involving Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No

Part V Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule L (see instructions)

Identifier	Return Reference	Explanation

NonCash Contributions

OMB No 1545-0047

2010

Open to Public
InspectionName of the organization
ALBRIGHT COLLEGE

Employer identification number

23-1352615

Part I Types of Property

	(a) Check if applicable	(b) Number of Contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining oncash contribution amounts
1 Art—Works of art . . .				
2 Art—Historical treasures				
3 Art—Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles .	X	1	9,762	NADA GUIDE (INTERNET)
7 Boats and planes . . .				
8 Intellectual property . .				
9 Securities—Publicly traded	X	11	687,432	MARKET QUOTATIONS
10 Securities—Closely held stock				
11 Securities—Partnership, LLC, or trust interests .				
12 Securities—Miscellaneous				
13 Qualified conservation contribution—Historic structures				
14 Qualified conservation contribution—Other . .				
15 Real estate—Residential .				
16 Real estate—Commercial				
17 Real estate—Other . .				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts . .				
23 Scientific specimens . .				
24 Archeological artifacts .				
25 Other ►(_____)				
26 Other ►(_____)				
27 Other ►(_____)				
28 Other ►(_____)				
29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement . .			29	

	Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1-28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?	30a	No
b If "Yes," describe the arrangement in Part II		
31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?	31	No
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell non-cash contributions?	32a	Yes
b If "Yes," describe in Part II		
33 If the organization did not report revenues in column (c) for a type of property for which column (a) is checked, describe in Part II		

Part II

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

Identifier	Return Reference	Explanation
THIRD PARTY USE	PART I, LINE 32B	THE COLLEGE LIQUIDATES ALL SECURITIES RECEIVED PRINCIPALLY THROUGH THE FINANCIAL INSTITUTIONS WHO HAVE FIDUCIARY AND CUSTODIAL RESPONSIBILITY FOR ITS INVESTMENT PORTFOLIO

SCHEDULE O
(Form 990 or 990-EZ)Department of the Treasury
Internal Revenue Service**Supplemental Information to Form 990 or 990-EZ**

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

2010**Open to Public
Inspection****Name of the organization**
ALBRIGHT COLLEGE**Employer identification number**

23-1352615

Identifier	Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 3		IN FISCAL YEAR 2010, THE COLLEGE BEGAN THE USE OF A CONSULTANT TO MANAGE ITS INFORMATION TECHNOLOGY SERVICES DEPARTMENT. ALSO, THE COLLEGE ENGAGED BARNES AND NOBLES COLLEGE BOOKSTORE, LLC TO OPERATE AND PROVIDE SERVICES FOR THE COLLEGE'S BOOKSTORE.

Identifier	Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11		FORM 990 WAS DISTRIBUTED TO THE AUDIT COMMITTEE OF THE BOARD OF TRUSTEES FOR REVIEW AND APPROVAL. UPON APPROVAL, THE PUBLIC DISCLOSURE VERSION OF THE RETURN IS POSTED ON THE BOARD OF TRUSTEES' INTRANET SITE FOR THE FULL BOARD'S ACCESS PRIOR TO FILING WITH THE IRS

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 12C	ARTICLE XI, CONFLICT OF INTEREST, OF THE BOARD OF TRUSTEES BY LAWS REQUIRES ALL OF THE COLLEGE'S TRUSTEES AND OFFICERS TO SIGN A "CONFLICT OF INTEREST DISCLOSURE STATEMENT" ANNUALLY ACKNOWLEDGING HIS OR HER AFFIRMATIVE DUTY TO DISCLOSE CONFLICTS OF INTEREST, AND/OR POTENTIAL CONFLICTS OF INTEREST. THE BOARD OF TRUSTEES' TRUSTEESHIP AND GOVERNANCE COMMITTEE ROUTINELY REVIEWS AND DISCUSSES POTENTIAL CONFLICTS OF INTEREST. THE COLLEGE WILL NOT TRANSACT BUSINESS WITH ANY ENTITY IN WHICH A TRUSTEE AND/OR OFFICER HAS AN INTEREST UNLESS SUCH INTEREST IS APPROPRIATELY DISCLOSED, THE INTERESTED TRUSTEE/OFFICER ABSTAINS FROM DELIBERATION OR VOTING ON THE MATTER, AND THE ACTION OR TRANSACTION IS DOCUMENTED AS CLEARLY IN THE BEST INTEREST OF THE COLLEGE

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 15	<p>THE PRESIDENT IS THE COLLEGE'S CHIEF EXECUTIVE OFFICER ARTICLE V OF THE BOARD OF TRUSTEES BYLAWS REQUIRES THAT THE PRESIDENT IN CONJUNCTION WITH THE COMPENSATION COMMITTEE DEVELOP ANNUAL PERFORMANCE OBJECTIVES FOR APPROVAL BY THE FULL BOARD IT FURTHER REQUIRES THAT THE COMPENSATION COMMITTEE DETERMINE THE PRESIDENT'S COMPENSATION BASED ON THE ANNUAL PERFORMANCE ASSESSMENT AND REPORT SUCH FOR APPROVAL BY THE BOARD OF TRUSTEES THE COMPENSATION OF OTHER OFFICERS (VICE-PRESIDENTS) AND ANNUAL PERFORMANCE ASSESSMENTS ARE THE RESPONSIBILITY OF THE PRESIDENT ON AN ANNUAL BASIS, THE COLLEGE UTILIZES THE SERVICES OF A CONSULTANT WITH EXPERTISE IN NOT-FOR-PROFIT EXECUTIVE COMPENSATION TO REVIEW EXECUTIVE COMPENSATION LEVELS THROUGH PARTICIPATION IN THEIR EXECUTIVE COMPENSATION SURVEY FOR COLLEGES AND UNIVERSITIES THESE SURVEYS GIVE COMPARATIVE DATA, INCLUDING SALARIES FOR EXECUTIVE LEVEL OFFICIALS (PRESIDENT AND VICE-PRESIDENTS), TO ENSURE THAT COMPENSATION DOES NOT EXCEED FAIR MARKET VALUE THE PRESIDENT, IN CONCERT WITH THE ASSOCIATE VICE-PRESIDENT OF HUMAN RESOURCES, IS RESPONSIBLE FOR REVIEWING AND ESTABLISHING ONGOING SALARY LEVELS FOR THE RESPECTIVE VICE-PRESIDENTS MINUTES ARE KEPT OF ALL BOARD OF TRUSTEE MEETINGS AND COMMITTEE MEETINGS, INCLUDING THE COMPENSATION COMMITTEE WITH REGARD TO VICE-PRESIDENTS, PERFORMANCE ASSESSMENTS AND EVALUATIONS ARE DOCUMENTED IN THEIR RESPECTIVE PERSONNEL FILES</p>

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION C, LINE 19	GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS ARE AVAILABLE TO THE PUBLIC UPON REQUEST. ANNUAL AUDITED FINANCIAL STATEMENTS ARE POSTED ON THE COLLEGE WEBSITE

Identifier	Return Reference	Explanation
CHANGES IN NET ASSETS OR FUND BALANCES	FORM 990, PART XI, LINE 5	NET UNREALIZED GAINS ON INVESTMENTS 7,915,178

Identifier	Return Reference	Explanation
	FORM 990, PART V, LINE 4A	THE COLLEGE HAS ENDOWMENT FUND INVESTMENTS WITH MANAGEMENT COMPANIES LOCATED IN THE CAYMAN ISLANDS AND GUERNSEY (CHANNEL ISLANDS)

**SCHEDULE R
(Form 990)**Department of the Treasury
Internal Revenue Service**Related Organizations and Unrelated Partnerships**

OMB No 1545-0047

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

2010**Open to Public
Inspection****Name of the organization**

ALBRIGHT COLLEGE

Employer identification number

23-1352615

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

(a) Name, address, and EIN of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled organization	
						Yes	No

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

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership
(1) NORTH THIRTEENTH STREET INC 13TH BERN STREETS PO BOX 14988 READING, PA196124988 23-2362385	REAL ESTATE RENTAL	PA	N/A	C	564,261	944,184	100 000 %

Part V Transactions With Related Organizations (Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35, 35A, or 36.)**Note.** Complete line 1 if any entity is listed in Parts II, III or IV

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

- a Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity
- b Gift, grant, or capital contribution to other organization(s)
- c Gift, grant, or capital contribution from other organization(s)
- d Loans or loan guarantees to or for other organization(s)
- e Loans or loan guarantees by other organization(s)
- f Sale of assets to other organization(s)
- g Purchase of assets from other organization(s)
- h Exchange of assets
- i Lease of facilities, equipment, or other assets to other organization(s)
- j Lease of facilities, equipment, or other assets from other organization(s)
- k Performance of services or membership or fundraising solicitations for other organization(s)
- l Performance of services or membership or fundraising solicitations by other organization(s)
- m Sharing of facilities, equipment, mailing lists, or other assets
- n Sharing of paid employees
- o Reimbursement paid to other organization for expenses
- p Reimbursement paid by other organization for expenses
- q Other transfer of cash or property to other organization(s)
- r Other transfer of cash or property from other organization(s)

	Yes	No
1a		No
1b		No
1c		No
1d	Yes	
1e	Yes	
1f		No
1g		No
1h		No
1i	Yes	
1j	Yes	
1k	Yes	
1l		No
1m		No
1n	Yes	
1o		No
1p	Yes	
1q		No
1r		No

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

(a) Name of other organization	(b) Transaction type(a-r)	(c) Amount involved	(d) Method of determining amount involved
(1) NORTH THIRTEENTH STREET INC	D	595,220	LOAN BALANCE - FMV
(2) NORTH THIRTEENTH STREET INC	I	48,000	FMV
(3) NORTH THIRTEENTH STREET INC	J	190,209	FMV
(4) NORTH THIRTEENTH STREET INC	K	40,056	FMV
(5) NORTH THIRTEENTH STREET INC	N	97,622	FMV
(6) NORTH THIRTEENTH STREET INC	P	40,359	FMV

Part VI Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" on Form 990, Part IV, line 37.)

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

Part VII Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule R (see instructions)

Identifier	Return Reference	Explanation
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Software ID:**Software Version:****EIN:** 23-1352615**Name:** ALBRIGHT COLLEGE**Form 990, Schedule R, Part V - Transactions With Related Organizations**

	(a) Name of other organization	(b) Transaction type(a-r)	(c) Amount Involved (\$)	(d) Method of determining amount involved
(1)	NORTH THIRTEENTH STREET INC	D	595,220	LOAN BALANCE - FMV
(2)	NORTH THIRTEENTH STREET INC	I	48,000	FMV
(3)	NORTH THIRTEENTH STREET INC	J	190,209	FMV
(4)	NORTH THIRTEENTH STREET INC	K	40,056	FMV
(5)	NORTH THIRTEENTH STREET INC	N	97,622	FMV
(6)	NORTH THIRTEENTH STREET INC	P	40,359	FMV

Additional Data

Software ID:
Software Version:
EIN: 23-1352615
Name: ALBRIGHT COLLEGE

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

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)					(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Official	Key employee	Highest compensated employee			
JOHN T BAILY CHAIR	1 00	X		X			0	0	0
WC JACK MILLER VICE CHAIR	1 00	X		X			0	0	0
KAREN A RIGHTMIRE SECRETARY	1 00	X		X			0	0	0
ROBERT J BEALL PHD TRUSTEE	1 00	X					0	0	0
ROBERT A BITTENBENDER TRUSTEE	1 00	X					0	0	0
JOAN DEVELIN COLEY PHD TRUSTEE	1 00	X					0	0	0
TERRENCE R CURTIN TRUSTEE	1 00	X					0	0	0
NANETTE F CUTRONA TRUSTEE	1 00	X					0	0	0
RICHARD A EHST TRUSTEE	1 00	X					0	0	0
MARK T GALLAGHER ESQ TRUSTEE	1 00	X					0	0	0
KATHLEEN J GRANT MD TRUSTEE	1 00	X					0	0	0
JEFFREY W GRIFFITHS TRUSTEE	1 00	X					0	0	0
KATHLEEN C HITTNER MD TRUSTEE	1 00	X					0	0	0
BRENT J HURLEY TRUSTEE	1 00	X					0	0	0
ROBIN M HYNICKA TRUSTEE	1 00	X					0	0	0
JEFFREY J JOYCE TRUSTEE	1 00	X					0	0	0
CHRIS G KRARAS TRUSTEE	1 00	X					0	0	0
JUNE T MAIER TRUSTEE	1 00	X					0	0	0
LORINA L MARSHALL-BLAKE TRUSTEE	1 00	X					0	0	0
ROSS D MILLER TRUSTEE	1 00	X					0	0	0
GEORGE MINNICH TRUSTEE	1 00	X					0	0	0
P SUE PERROTTY TRUSTEE	1 00	X					0	0	0
CHARLES J PHILLIPS ESQ TRUSTEE	1 00	X					0	0	0
JOHN K ROESSNER III TRUSTEE	1 00	X					0	0	0
JOHN D SCHOLL TRUSTEE	1 00	X					0	0	0

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

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)					(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee			
SHERRY K SIDHU TRUSTEE	1 00	X					0	0	0
IVAN L TORRES TRUSTEE	1 00	X					0	0	0
JOHN P WEIDENHAMMER TRUSTEE	1 00	X					0	0	0
SCOTT R WOLFE CPA TRUSTEE	1 00	X					0	0	0
DOUGLAS N YOCOM TRUSTEE	1 00	X					0	0	0
JAY A YODER CFA TRUSTEE	1 00	X					0	0	0
LEX O MCMILLAN III PHD PRESIDENT	40 00	X		X			310,122	0	135,392
WILLIAM W WOOD VP - ADMIN & FINANCE	40 00			X			133,872	0	21,631
TIMOTHY A MCELWEE VP FOR ADVANCEMENT	40 00			X			134,608	0	16,090
ANDREA E CHAPDELAINE PROVOST AND VP - ACADEMIC AF	40 00			X			148,351	0	24,537
GREGORY E EICHHORN VP - ENROLLMENT & ADMISSIO	40 00			X			126,061	0	22,351
GINA-LYN CRANCE VP - STUDENT AFFAIRS	40 00			X			103,923	0	19,070
DANIEL J FALABELLA PROF - COMPUTER SCIENCE	40 00				X		137,933	0	13,993
KAREN A CAMPBELL PRE-MED BIOLOGY PROFESSOR	40 00				X		111,837	0	13,058
SAREL P FUCHS DEAN - GRADUATE PROGRAMS	40 00				X		126,237	0	15,362
THOMAS D MEYERS PROF - SOCIOLOGY	40 00				X		115,205	0	16,192
RODNEY E WARFIELD CHAIR, PROF - SPECIAL ED	40 00				X		130,452	0	14,272