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Department of the Treasury Internal Revenue Service

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

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

OMB No 1545-0047

Open to Public Inspection

GIV

AF	For the	2010 calendar year, or tax year beginning OCT 1, 2010 and en	ding S	EP 30, 201	. L
B	Check if applicable	C Name of organization		D Employer ident	tification number
	Address change	HULT INTERNATIONAL BUSINESS SCHOOL, INC	· .]	
	Name change	Doing Business As		04-	3348440
	Initial return Termin-	, , , , , , , , , , , , , , , , , , , ,	om/suite	E Telephone num	ber '-746-1990
늗	ated Amend	ONE EDUCATION DINEET			
느	return	City or town, state or country, and ZIP + 4		G Gross receipts \$	13,216,206.
L	Applica tion pending	CAMBRIDGE, FA 02141		H(a) Is this a group	
	po/	F Name and address of principal officer: 5 TEPHEN HODGES		for affiliates?	Yes X No
		SAME AS C ABOVE		H(b) Are all affiliates	included? Yes No
<u></u>	Tax-exe	mpt status: X 501(c)(3)	<u> </u>	If "No," attach	n a list (see instructions)
		e: ▶ WWW.HULT.EDU	· · · · · · · · · · · · · · · · · · ·	H(c) Group exemp	
		organization: X Corporation Trust Association Other ►	L Year	of formation: 1996	M State of legal domicile: MA
P		Summary			
ą	1 E	Briefly describe the organization's mission or most significant activities: $ar{ t HULT}$	INTER	NATIONAL E	BUSINESS
Activities & Governance	1 5	SCHOOL IS A GLOBAL INSTITUTION THAT TRANSP	FORMS	LIVES BY	PROVIDING AN
i.	1	Check this box $lacktriangle$ $lacktriangle$ if the organization discontinued its operations or disposed	d of more	than 25% of its net	
Š	1 8	Number of voting members of the governing body (Part VI, line 1a)		L	3 10
<u>න</u>	4 1	Number of independent voting members of the governing body (Part VI, line 1b)		L	4 9
es	5 7	Total number of individuals employed in calendar year 2010 (Part V, line 2a)			5 50
Ϋ́Ε	6 7	Total number of volunteers (estimate if necessary)			6 9
√cti	7a 7	Total unrelated business revenue from Part VIII, column (C), line 12		[7	7a 0.
	1 d	Net unrelated business taxable income from Form 990-T, line 34			7b 0.
				Prior Year	Current Year
Ð	8 (Contributions and grants (Part VIII, line 1h)	<u> </u>	0	
Ę,	9 F	Program service revenue (Part VIII, line 2g)	L	4,969,362	11,516,206.
Revenue	10 I	nvestment income (Part VIII, column (A), lines 3, 4, and 7d)		0	
Œ	11 (Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		0	
	12 7	Fotal revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		4,969,362	13,216,206.
	13 (Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0	·
	14 E	Benefits paid to or for members (Part IX, column (A), line 4)		0	
S	15 9	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	3,009,216	6,276,725.	
Expenses	16a F	Professional fundraising fees (Part IX, column (A), line 11e)		0	0.
ĝ	Ь	Fotal fundraising expenses (Part IX, column (D), line 25)) <u>.</u>	· · · · · · · · · · · · · · · · · · ·	
Ĥ	17 (Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)		1,644,234	
	18	Fotal expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		4,653,450	. 10,457,181.
	19 F	Revenue less expenses. Subtract line 18 from line 12		315,912	2,759,025.
or			Ве	ginning of Current Yea	
sets	20	Total assets (Part X, line 16)		8,023,102	4,355,356.
ASS	21	Total liabilities (Part X, line 26)		9,424,975	2,998,204.
Net Assets or Fund Balances	22 1	Net assets or fund balances Subtract line 21 from line 20		-1,401,873	1,357,152.
P	art II	Signature Block			
		ties of perjury, I declare that I have examined this return, including accompanying schedules a			my knowledge and belief, it is
true	, correct	, and complete. Declaration of preparer (other than officer) is based on all information of which	h preparer	has any knowledge.	<u> </u>
		STHOOL		519	112
Sig	ın İ	Signature of officer		Date /	1
He	re	STEPHEN HODGES, PRESIDENT	_		
<u>3'.</u>		Type or print name and title		S-1	A THE BEAU
=>_	İ	Print/Type preparer's name Preparer's signature	_	Date Check	PTIN
Pai		mank Preziosi Much / mys	<u> </u>	3ch chin	
		Firm's name LEONARD, MULHERIN & GREENE P.CO		Firm's EIN	<u> </u>
Use	Only	Firm's address 625 GROVE STREET	REC	EIVE Phone no.	/501 \ 256 4222
<u> </u>				Phone no.	(781) 356-4800
		S discuss this return with the preparer shown above? (see instructions)	AAAV TI	1 2012 191	X Yes No
-0320 	001 02-22 C1	2-11 LHA For Paperwork Reduction Act Notice, see the separate instruction:	SNAI Д Amema	4 (11)	Form 990 (2010)

Form **990** (2010)

Part IV Checklist of Required Schedules

			Yes	No
1	s the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	х	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		X
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	4	l	Х
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	5		<u></u>
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6	L	X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide			
	credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments?		:	
	If "Yes," complete Schedule D, Part V	10	Х	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X			
	as applicable			~~ ^
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,		7,7	
	Part VI	11a	X	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			v
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		<u> </u>
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			Х
_	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in	11c		
a	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		х
_	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	X	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	<u> </u>		
•	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI, XII, and XIII	12a	х	
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	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	X	
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
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	14b		_X_
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization			
	or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		<u> </u>
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals	i		
	located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		<u> </u>
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			77
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		<u> </u>
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			v
45	1c and 8a? If "Yes," complete Schedule G, Part II	18		<u> </u>
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	_		v
00-	complete Schedule G, Part III	19		$\frac{x}{x}$
	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20a		
ט	If "Yes" to line 20a, did the organization attach its audited financial statements to this return? Note. Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)	20b		
	operate one or more hospitals must attach addited intancial statements (see instructions)	Form	990 (2010)

Х Form **990** (2010)

36

37

X

X

If "Yes," complete Schedule R, Part V, line 2

Note. All Form 990 filers are required to complete Schedule O

37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization

and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?

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	990 (2010) HULT INTERNATIONAL BUSINESS SCHOOL, I tV Statements Regarding Other IRS Filings and Tax Compliance	NC. 04-3348	440	P	age :					
	Check if Schedule O contains a response to any question in this Part V			I	 					
	Control to a complete and the Day O of Forms 1000. February O of material conditions	_{1a} 16		Yes	No					
	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		i							
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	_ ib	ł							
С	Did the organization comply with backup withholding rules for reportable payments to vendors and	eportable gaming	۱	٠ ا	1					
_	(gambling) winnings to prize winners?	1 1	1c		-					
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,	2a 50								
_	filed for the calendar year ending with or within the year covered by this return		f	х						
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns the second of the control of th		2b		-					
_	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. (see instruction	15)			x					
	Did the organization have unrelated business gross income of \$1,000 or more during the year?		3a 3b		<u> </u>					
	b If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O									
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other		١.		x					
	financial account in a foreign country (such as a bank account, securities account, or other financial	account)?	<u>4a</u>	ļ	<u> </u>					
b	If "Yes," enter the name of the foreign country:	 _	*		1					
	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial	Accounts.	_							
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		<u>5a</u>	<u> </u>	X					
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter trans-	action?	<u>5b</u>		X					
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?		5c		<u> </u>					
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did to	he organization solicit		1	٠,					
	any contributions that were not tax deductible?		6a		X					
b	If "Yes," did the organization include with every solicitation an express statement that such contribu	tions or gifts			1					
	were not tax deductible?		6b		_					
7	Organizations that may receive deductible contributions under section 170(c).		ώ	ŧ	x					
а										
	If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b	 	<u> </u>					
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it v	as required			۱.,					
	to file Form 8282?	1 1	7c		X					
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d _	i							
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit	contract?	7e		<u> </u>					
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit cont		7f		X					
g	If the organization received a contribution of qualified intellectual property, did the organization file F		7g		X					
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization		7h	7.7	X					
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.		\$ C.	* } '`	X					
	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at	any time during the year?	8_	<u> </u>	LX.					
9	Sponsoring organizations maintaining donor advised funds.		*		l					
а	Did the organization make any taxable distributions under section 4966?		9a		X					
þ	Did the organization make a distribution to a donor, donor advisor, or related person?		9b		X					
10	Section 501(c)(7) organizations. Enter:		İ		* 0					
а	Initiation fees and capital contributions included on Part VIII, line 12	10a			1					
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	, g ^	* ; ;						
11	Section 501(c)(12) organizations. Enter:	1 1		` '						
а	Gross income from members or shareholders	11a	· ·							
b	Gross income from other sources (Do not net amounts due or paid to other sources against				ŀ					
	amounts due or received from them)	11b	3		3					
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.									
а	Is the organization licensed to issue qualified health plans in more than one state?		13a							
	Note. See the instructions for additional information the organization must report on Schedule O.				25					
b	Enter the amount of reserves the organization is required to maintain by the states in which the				1 3					
	organization is licensed to issue qualified health plans	13b	, '	_	3. 3					
С	Enter the amount of reserves on hand	13c	1	Ľ	2 %					
14a	Did the organization receive any payments for indoor tanning services during the tax year?		14a		X					

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 line 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			X				
Sec	tion A. Governing Body and Management							
			Yes	No				
1a	Enter the number of voting members of the governing body at the end of the tax year 10	4						
b	Enter the number of voting members included in line 1a, above, who are independent 1b	1						
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other	ĺ						
	officer, director, trustee, or key employee?	2	ļ	X				
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision							
	of officers, directors or trustees, or key employees to a management company or other person?	3		X				
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X				
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X				
6	Does the organization have members or stockholders?	6		X				
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the	l _		х				
	governing body?	7a		X				
_	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b	-					
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year		1	1				
	by the following		х					
_	The governing body?	8a 8b	X					
b	Each committee with authority to act on behalf of the governing body?	-00	-A	-				
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		x				
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code)		·					
	to I of the contains required marriage about pointed by the marriage code		Yes	No				
10a	Does the organization have local chapters, branches, or affiliates?	10a		X				
	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates,							
_	and branches to ensure their operations are consistent with those of the organization?	10b						
11a	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11a	X					
b	b Describe in Schedule O the process, if any, used by the organization to review this Form 990							
12a								
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise							
	to conflicts?	12b	X					
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe							
	in Schedule O how this is done	12c	X					
13	Does the organization have a written whistleblower policy?	13		X				
14	Does the organization have a written document retention and destruction policy?	14	X					
15	Did the process for determining compensation of the following persons include a review and approval by independent							
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	-]	7,				
а	The organization's CEO, Executive Director, or top management official	15a		X				
b	Other officers or key employees of the organization	15b		X				
40	If "Yes" to line 15a or 15b, describe the process in Schedule O (See instructions.)							
162	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a	40-	-	X				
	taxable entity during the year?	16a		<u> </u>				
D	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	16b						
Sec	exempt status with respect to such arrangements? tion C. Disclosure	IOD	<u> </u>					
	List the states with which a copy of this Form 990 is required to be filed ►MA , CA	-						
17 18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available	for						
.0	public inspection. Indicate how you make these available. Check all that apply							
	Own website							
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, a	nd fina	incial					
	statements available to the public							
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization.	tion:	•					
	GUNNAR LINK - 617-619-1543							
	ONE EDUCATION STREET, CAMBRIDGE, MA 02141							

Form	aan	(2010)	

HULT INTERNATIONAL BUSINESS SCHOOL, INC.

04-3348440

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

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid
 - List all of the organization's current key employees, if any See instructions for definition of "key employee"
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

List persons in the following order: individual trustees or directors; institutional trustees; officers, key employees; highest compensated employees; and former such persons.

(A)	(B)				C)			(D)	(E)	(F)
Name and Title	Average		Position		Reportable	Reportable	Estimated			
	hours per	(cl	heck	all 1	that	арр	ly)	compensation	compensation	amount of
	week	ctor						from	from related	other
	(describe hours for	ıal trustee or director	١			pa		the organization	organizations (W-2/1099-MISC)	compensation from the
	related	stee o	nstee		_	ensal		(W-2/1099-MISC)	(***2/1099*141130)	organization
	organizations	al tru	nal t		loyee	Comi		(** 2, *********************************		and related
	ın Schedule	Individu	Institutional trustee	Officer	Key employee	Highest compensated employee	огшег			organizations
STEPHEN HODGES	O)	-	_	Ĕ	Ě		<u> </u>			
PRESIDENT	2.00	x						0.	0.	0.
PHILIP HULT		Ħ	\vdash	┢			\vdash	- "		-
CHAIRMAN	2.00	x						O.	0.	0.
DR. DAVID COLLIS		T		_						
DIRECTOR	2.00	x						10,000.	0.	0.
JAMES SINTROS, ESQ.						_				
DIRECTOR	2.00	X					İ	0.	0.	0.
CHRISTOPHER AHLBERG			\vdash	T						
DIRECTOR	2.00	Х						0.	0.	0.
MAKTOUM HASHER MAKTOUM AL MAKTOUM										
DIRECTOR	2.00	X	ĺ					0.	0.	0.
TIM PENASACK								·		
DIRECTOR	2.00	Х						0.	0.	0.
WINNIE TO							Г			
DIRECTOR	2.00	X						0.	0.	0.
RAJA ASSILI										
DIRECTOR	2.00	X						0.	0.	0.
NICHOLAS BARBER										
DIRECTOR	2.00	X						0.	0.	0.
RICHARD JOSEPH									-	
PROVOST	40.00			X		X		311,925.	0.	16,338.
HENRIK TOTTERMAN	ľ									
DEAN	40.00	<u>L</u>		X		<u></u>		0.	0.	0.
LOUISE HELLESTAM									_	_
FINANCIAL MANAGER	40.00			X			<u> </u>	78,659.	0.	5,915.
MICHELLE BERGLAND								_	_	
EXECUTIVE DIRECTOR	40.00	L		Х				0.	0.	0.
LISA TENORIO										_
EXECUTIVE DIRECTOR	40.00	<u>L</u>	_	Х	<u> </u>	L.	L.	0.	0.	0.
LUIS TIMMS	,, ,,			l	1					_
DEAN	40.00	<u> </u>	_	Х	<u> </u>	<u> </u>		0.	0.	0.
MUKUL KUMAR	1000			,,					_	_
CHIEF ACADEMIC OFFICER AND CHIEF OPE	40.00			X		<u> </u>	L.,	0.	0.	0.

HULT INTERNATIONAL BUSINESS SCHOOL, INC.

Part VIII-Section A. Officers, Directors, Tr		mple	oyee			High	est		ees (continuea)					
(A)	(B)	(C) ne Position						(D) (E)				(F)		
Name and title	Average hours per	10				n app	١٧٨	Reportable	Reportable			timat		
	week	(0	rieci	(all	ırıaı	арр	(VI)	compensation from	compensation from related		ar	nount other		
	(describe	director						the	organization		COL	pensa		
	hours for	or dire	_			<u> </u>		organization	(W-2/1099-MIS			om th		
	related	stee o	nste			ensa		(W-2/1099-MISC)		/		anıza		
	organizations	al trus	nal tr		loyee	Comp		'			_	d rela		
	in Schedule O)	Individual	Institutional trustee	Officer	Key employee	Highest compensated employee	ormer ormer				orga	anızat	ions	
HITENDRA PATEL	 	=	٥	l°	ž	# 5	<u>.</u>							
FACULTY MEMBER	40.00					x		145,620.		0.	1	4,9	63.	
JAMES MORRISON		T	T		T									
DIRECTOR OF CAREER SERVICES	40.00			L		X		112,863.		0.		6,6	13.	
FARHOUD KAFI	1			1		l		100 405		•	١.,			
SENIOR ASSOCIATE DEAN	40.00	<u> </u>	ļ		<u> </u>	X		130,435.		0.	<u> </u>	0,3	09.	
DAVID NIHILL	1 40 00					.		120 027		0.		7	80.	
OPERATIONS MANAGER	40.00	-	-	┢	┝	X	H	138,827.		<u> </u>	<u> </u>		80.	
					İ									
		t	一	T	H	 						_		
	1	١												
			П						_					
			L	╙	<u> </u>	<u> </u>	L							
		<u> </u>	┢	<u> </u>	┝	╁	-	-						
			l											
1b Sub-total	1	Щ.	<u>. </u>	<u> </u>	<u> </u>	_		928,329.		0.	5	4.9	18.	
c Total from continuation sheets to Part V	II. Section A							0.		0.		_,_	0.	
d Total (add lines 1b and 1c)	, 000					<u> </u>	<u> </u>		928,329.		0.	5	4,9	18.
2 Total number of individuals (including but	not limited to th	nose	liste	ed a	bov	e) wl	no r	eceived more than \$100	0,000 in reportab	le				
compensation from the organization							_						5	
										1		Yes	No	
3 Did the organization list any former officer			e, ke	y en	nplo	yee,	or h	highest compensated er	nployee on			-	x	
line 1a? If "Yes," complete Schedule J for					a t .a.		d a+	har campanagtion from	the organization		3		_	
4 For any individual listed on line 1a, is the s and related organizations greater than \$15									the organization	,	4	X	-	
5 Did any person listed on line 1a receive or									idual for services	, 1	,			
rendered to the organization? If "Yes," con								_			5		X	
Section B. Independent Contractors														
1 Complete this table for your five highest of the organization. NONE	ompensated in	dep	ende	ent c	cont	racto	ors 1	that received more than	\$100,000 of con	npens	ation	rom		
(A)								(B)			((
Name and business	s address						_	Description of s	services	C	ompe	nsatio	n	
							┥							
	·					-								
							\dashv				<u>.</u>			
2 Total number of independent contractors		not I	ımıte	d to		_	stec	d above) who received n	nore than					
\$100,000 in compensation from the organ	ization >					0								

13216206.

11516206.

12

d All other revenue

Total. Add lines 11a-11d

Total revenue. See instructions.

0.

Part IX Statement of Functional Expenses

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

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

	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and		<u> </u>	gondanonponos	0.00.000
•	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				
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	422,837.	328,263.	94,574.	
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	5,328,437.	5,251,464.	76,973.	
8	Pension plan contributions (include section 401(k)				
	and section 403(b) employer contributions)				
9	Other employee benefits	278,887.	269,369.	9,518.	
10	Payroll taxes	246,564.	238,427.	8,137.	
11	Fees for services (non-employees):			Ī	
а	Management				
b	Legal				
C	Accounting				
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17		· · · }	·	
f	Investment management fees				
g	Other _	109,286.		109,286.	
12	Advertising and promotion	104 464	26 100		
13	Office expenses	431,461.	36,189.	395,272.	
14	Information technology				
15	Royalties	1 202 577	1 206 525	7 040	
16	Occupancy	1,393,577.	1,386,535.	7,042.	
17	Travel	398,508.	398,508.		
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials			···	
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates	81,213.	30,088.	51,125.	
22	Depreciation, depletion, and amortization	01,413.	30,000.	J1,14J.	
23	Insurance Other expenses, Itemize expenses not covered				
24	above. (List miscellaneous expenses in line 24f. If line	^	,		*
	24f amount exceeds 10% of line 25, column (A)	,	<i>'</i>		
а	amount, list line 24f expenses on Schedule 0.) COURSE EXPENSES	1,052,164.	1,052,164.		
	STUDENT EVENTS	181,352.	181,352.		
b c	MISC COSTS	164,068.	129,759.	34,309.	
d	EOUIPMENT COSTS	115,188.	123,7,331	115,188.	
u e	DUES AND SUBSCRIPTIONS	96,928.	96,928.		
f	All other expenses	156,711.	43,473.	113,238.	
25	Total functional expenses. Add lines 1 through 24f	10,457,181.	9,442,519.	1,014,662.	0
26	Joint costs. Check here I 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			ļ	
					F 990 (0010

4,355,356. Form 990 (2010)

1,357,152.

32

-1,401,873.

8,023,102.

32

33

Retained earnings, endowment, accumulated income, or other funds

Total net assets or fund balances

Total liabilities and net assets/fund balances

Form	990 (2010) HULT INTERNATIONAL BUSINESS SCHOOL, INC.	04-33	40440	Pa	ge IZ		
Pa	t XI Reconciliation of Net Assets						
	Check if Schedule O contains a response to any question in this Part XI				<u> </u>		
	·						
1	Total revenue (must equal Part VIII, column (A), line 12)	_1	13,21				
2	Total expenses (must equal Part IX, column (A), line 25)	2	10,45 2,75				
3							
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	-1,40	1,8			
5	Other changes in net assets or fund balances (explain in Schedule O)	5			<u>0.</u>		
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	1,35	<u>7,1</u>	<u>52.</u>		
Pa	t XII Financial Statements and Reporting				_		
	Check if Schedule O contains a response to any question in this Part XII				ᆜ		
			_	Yes	No		
1	Accounting method used to prepare the Form 990. Lash X Accrual Cother		-		l .		
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O						
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X		
b	Were the organization's financial statements audited by an independent accountant?		2b	X	<u> </u>		
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audıt,					
	review, or compilation of its financial statements and selection of an independent accountant?		2c		X		
	If the organization changed either its oversight process or selection process during the tax year, explain in School	edule O.					
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issue	d on a					
	separate basis, consolidated basis, or both:				· '		
	Separate basis Consolidated basis Both consolidated and separate basis			,			
За	3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit						
	Act and OMB Circular A-133?		3a		X		
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ	ired audit					
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b				

Form **990** (2010)

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service **Public Charity Status and Public Support**

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

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

2010

Open to Public Inspection

Name of the organization

HULT INTERNATIONAL BUSINESS SCHOOL, INC. Employer identification number 04-3348440

Part I	Reason	for Public Char	ty Status (All organiz	ations mu	st complet	e this part) See ins	tructions.					
he organ	ization is not a	private foundation l	pecause it is: (For lines	1 through 1	11, check	only one b	ox.)			 			
1	A church, cor	nvention of churches	s, or association of chur	ches desc	nbed in se	ction 170	(b)(1)(A)(i)	·-					
2 X	A school des	cribed in section 17	0(b)(1)(A)(ii). (Attach Sc	hedule E.)									
з 🔲	A hospital or	a cooperative hospit	tal service organization of	described	ın section	170(b)(1)(A)(iii).						
4	A medical res	search organization	perated in conjunction	with a hos	pital desci	nbed in se	ction 170	(b)(1)(A)(ii	i). Enter t	the hospital's name,			
	city, and state												
5	•		benefit of a college or ur	niversity ov	wned or op	erated by	a govern	nental uni	t describ	ed in			
	section 170	(b)(1)(A)(iv). (Comple	ete Part II.)										
6 🗔	A federal, sta	te, or local governme	ent or governmental uni	t described	d ın sectio	n 170(b)(1	I)(A)(∨).						
7	An organizati	on that normally rec	eives a substantial part	of its supp	ort from a	governme	ntal unit c	r from the	general	public described in			
	section 170(b)(1)(A)(vi). (Comple	te Part II.)										
8 📖	A community	trust described in s	ection 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 u	inrelated business ta	axable income (less sect	tion 511 ta	x) from bu	sinesses a	cquired b	y the orga	nization	after June 30, 1975			
	See section	509(a)(2). (Complete	Part III)										
10	An organizati	on organized and op	erated exclusively to te	st for publi	c safety. S	See sectio	n 509(a)(4	I).					
11 🔲	An organizati	on organized and or	erated exclusively for th	ne benefit (of, to perfo	orm the fur	nctions of,	or to carr	y out the	purposes of one or			
	more publicly	supported organiza	itions described in secti	on 509(a)(1) or section	on 509(a)(2). See se c	tion 509(a)(3). Che	eck the box that			
	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		Type II c		e III - Fund		egrated		a 🗀	Type III - Other			
е 🔲	By checking	this box, I certify tha	t the organization is not	controlled	directly o	r indirectly	by one o	r more dis	qualified	persons other than			
	, ,	•	han one or more publicly		=	-	-		-				
f		-	ten determination from t						, ,, ,				
	•	rganization, check th			•								
g		-	rganization accepted ar	ny gift or co	ontribution	from any	of the foll	owing pers	sons?				
•			rectly controls, either al							Yes No			
	• • •	-	upported organization?	Ŭ		•		.,		11g(i)			
	_		described in (i) above?	1						11g(ii)			
			person described in (i)		e?					11g(iii)			
h	• •	-	about the supported or							<u> </u>			
••	. rovido aro r	ono mi g mi omi anom	and a copperior	9	(-)								
(i) Nama	of supported	(ii) EIN	(iii) Type of	(iv) Is the o	rganization	(v) Did voi	notify the	(vi) Is	the	(vii) Amount of			
. ,	anization	(11) = 114	organization		sted in your	organizat	•	organizatio (i) organiz	on in col. ed in the l	support			
0,90	amzanon		(described on lines 1-9 above or IRC section	governing	document?	(i) of your	support?	(',' s' s' i's	.7	обро.			
			(see instructions))	Yes	No	Yes	No	Yes	No				
										-			
				İ									
				ļ <u>.</u>									
						-		·					
otal													

Schedule A (Form 990 or 990 EZ) 2010 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.)

Sec	ction A. Public Support						
Cale	ndar 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 organ-						
	ization'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	Ĵ					
	on line 1 that exceeds 2% of the						
	amount shown on line 11,	4		,			
	column (f)						
6	Public support. Subtract line 5 from line 4	′ (.x.	,			*	
	ction B. Total Support	-					
Cale	ndar 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			` ` ` ` ` `				
12		etc. (see instructi	ons)		**************************************	12	
13	First five years. If the Form 990 is for	· ·	•	d, fourth, or fifth t	ax year as a section	on 501(c)(3)	
	organization, check this box and stop	here					<u> </u>
Se	ction C. Computation of Publ	ic Support Pe	rcentage				
14	Public support percentage for 2010 (line 6, column (f) d	ivided by line 11, o	column (f))		14	%
15	Public support percentage from 2009	Schedule A, Part	II, line 14			15	%
16a	33 1/3% support test - 2010.If the o	rganization did no	t check the box or	line 13, and line	14 is 33 1/3% or n	nore, check this bo	x and
	stop here. The organization qualifies	as a publicly supp	orted organization	1			
b	33 1/3% support test - 2009.If the o	rganization did no	t check a box on li	ne 13 or 16a, and	line 15 is 33 1/3%	or more, check th	is box
	and stop here. The organization qua	ifies as a publicly	supported organiz	ation			
17a	10% -facts-and-circumstances tes	t - 2010.If the orga	anization did not c	heck a box on line	e 13, 16a, or 16b, a	and line 14 is 10%	or more,
	and if the organization meets the "fac	ts-and-circumstan	ces" test, check th	his box and stop i	nere. Explain in Pa	rt IV how the organ	nization
	meets the "facts-and-circumstances"						
t	10% -facts-and-circumstances tes	t - 2009. If the orga	anızatıon dıd not c	heck a box on line	e 13, 16a, 16b, or	17a, and line 15 is ⁻	10% or
	more, and if the organization meets to						
	organization meets the "facts-and-cire	cumstances" test	The organization of	qualifies as a publ	icly supported org	anızatıon	▶□
18	Private foundation. If the organization	n did not check a	box on line 13, 16	a, 16b, 17a, or 17	b, check this box	and see instruction	s 🕨 🗌
				· 		edule A (Form 990	

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

Sec	ction A. Public Support	elow, please comp	Diete Fart II /				
_	endar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
	Gifts, grants, contributions, and	<u> </u>	(2) 200.	(3) = 300	157 = 333	1,157 = 3.15	(1) 1014
·	membership fees received (Do not	,					
	include any "unusual grants ")]		
2	Gross receipts from admissions,						
_	merchandise sold or services per-						
	formed, or facilities furnished in						
	any activity that is related to the organization's tax-exempt purpose	ļ					
3	Gross receipts from activities that						-
3	are not an unrelated trade or bus-						
	iness under section 513	ļ					
4	Tax revenues levied for the organ- ization'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						
	Total. Add lines 1 through 5						
7 8	Amounts included on lines 1, 2, and						
	3 received from disqualified persons	<u> </u>		<u> </u>		 	
	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			<u> </u>			<u> </u>
	Add lines 7a and 7b		<u> </u>	<u> </u>			
	Public support (Subtract line 7c from line 6.)	<u> </u>	<u> </u>	<u> </u>	L	1 -	<u>L</u>
	ction B. Total Support			1 / 1 2222	1 , , , , , , ,	1 1 2010	(a
	endar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
	Amounts from line 6						
าบล	Gross income from interest, dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources						
k	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975				ļ		
	Add lines 10a and 10b						
11	Net income from unrelated business activities not included in line 10b,						
	whether or not the business is						
	regularly carned on						
12	Other income. Do not include gain or loss from the sale of capital				ļ		
	assets (Explain in Part IV.)						
13	Total support (Add lines 9, 10c, 11, and 12)			<u> </u>	<u> </u>	<u> </u>	<u> </u>
14	First five years. If the Form 990 is for	the organization's	s first, second, thi	rd, fourth, or fifth t	ax year as a secti	on 501(c)(3) organı	zation,
	check this box and stop here						
	ction C. Computation of Publ						
	Public support percentage for 2010 (•	column (f))		15	%
	Public support percentage from 2009					16_	%
_	ction D. Computation of Inve				. ,.	1. i	
	Investment income percentage for 20			ne 13, column (f))		17	%
	Investment income percentage from					18	%
19	a 33 1/3% support tests - 2010. If the	organization did r	not check the box	on line 14, and line	e 15 is more than	33 1/3%, and line	17 is not
	more than 33 1/3%, check this box a	nd stop here. The	e organization qua	lifies as a publicly	supported organi	zation	▶□
ŀ	o 33 1/3% support tests - 2009. If the	organization did r	not check a box or	n line 14 or line 19a	a, and line 16 is m	ore than 33 1/3%,	and
	line 18 is not more than 33 1/3%, che		-	•		-	▶Щ
20	Private foundation. If the organization	in did not check a	box on line 14, 19	a, or 19b, check th	his box and see in	nstructions	<u> </u>

SCHEDULE D

(Form 990).

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements ► Complete if the organization answered "Yes," to Form 990,

Part IV, line 6, 7, 8, 9, 10, 11, or 12.

► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047 Open to Public Inspection

Name of the organization

Employer identification number

	HULT INTERNATIONAL BUSINESS SCHOOL, INC		04-3348440
Pai	rt I Organizations Maintaining Donor Advised Funds or Other Similar Funds	or Acco	ounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, line 6		
	(a) Donor advised funds	(b) Fu	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 advise	ed 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 can be	used only	
_	for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose	•	
	impermissible private benefit?	J	Yes No
Pai		art IV, line	:
1	Purpose(s) of conservation easements held by the organization (check all that apply).		-
•	Preservation of land for public use (e.g., recreation or education) Preservation of an hist	orically im	portant land area
	Protection of natural habitat	•	
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of	of a conser	vation easement on the last
	day of the tax year		
	22, 0. 1.10 , 0.11		Held at the End of the Tax Year
а	Total number of conservation easements	2a	
b		2b	
C		2c	
d		re 🗀	
	listed in the National Register	2d	
3	Number of conservation easements modified, transferred, released, extinguished, or terminated by the	organizati	on during the tax
	year ▶		
4	Number of states where property subject to conservation easement is located		
5	Does the organization have a written policy regarding the periodic monitoring, inspection, handling of		
	violations, and enforcement of the conservation easements it holds?		☐ Yes ☐ No
6	Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements du	iring the ye	ear >
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)(ı)	
	and section 170(h)(4)(B)(ii)?		└── Yes
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 t	he organız	ation's accounting for
	conservation easements.		
Pa	rt III Organizations Maintaining Collections of Art, Historical Treasures, or Ot	her Sim	ilar Assets.
	Complete if the organization answered "Yes" to Form 990, Part IV, line 8		
1a	If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statem	ent and ba	alance sheet works of art,
	historical treasures, or other similar assets held for public exhibition, education, or research in furtherar	ice of publ	ic 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 (ASC 958), to report in its revenue statement	and balan	ce sheet works of art, historical
	treasures, or other similar assets held for public exhibition, education, or research in furtherance of public	lic 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	gaın, prov	ıde
	the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:		
а	Revenues included in Form 990, Part VIII, line 1	>	\$
b	Assets included in Form 990, Part X	>	\$

		rernational					348440 Page 2
Par	t III Organizations Maintaining C						
3	Using the organization's acquisition, accessi	on, and other record	s, check any of the	following that	are a sign	ificant use of its	collection items
	(check all that apply)						
а	Public exhibition	d		hange progran	าธ		
b	Scholarly research	е	Other				
С	Preservation for future generations						
4	Provide a description of the organization's co						rt XIV.
5	During the year, did the organization solicit o	r receive donations o	of art, historical trea	sures, or other	sımılar as	ssets	
	to be sold to raise funds rather than to be ma						Yes No
Par	t IV Escrow and Custodial Arran		ete if the organization	n answered "Y	es" to Fo	rm 990, Part IV,	line 9, or
	reported an amount on Form 990, Par						
1a	Is the organization an agent, trustee, custodi	an or other intermed	liary for contribution	is or other asse	ets not in	cluded	
	on Form 990, Part X?					L.	∐ Yes
ь	If "Yes," explain the arrangement in Part XIV	and complete the fo	llowing table:				
							Amount
С	Beginning balance					1c	
d	Additions during the year					1d	
е	Distributions during the year					1e	
f	Ending balance					1f	
2 a	Did the organization include an amount on Fe	orm 990, Part X, line	21?				_ Yes
	If "Yes," explain the arrangement in Part XIV.						
Par	t V Endowment Funds. Complete					<u></u>	γ
		(a) Current year	(b) Prior year	(c) Two years		Three years back	(e) Four years back
1a	Beginning of year balance	7,110.	7,110.	7,	110.		
b	Contributions			<u> </u>			
С	Net investment earnings, gains, and losses						
d	Grants or scholarships						
e	Other expenditures for facilities						
	and programs						
f	Administrative expenses						<u> </u>
g	End of year balance	7,110.	7,110.	7,	110.		<u> </u>
2	Provide the estimated percentage of the year	r end balance held a	ıs'				
а	Board designated or quasi-endowment		_%				
b	Permanent endowment ► 100.00	<u></u> %					
С	Term endowment	%					
3a	Are there endowment funds not in the posse	ession of the organiza	ation that are held a	nd administere	ed for the	organization	
	py.						Yes No
	(i) unrelated organizations						3a(i) X
	(ii) related organizations						3a(ii) X
b	If "Yes" to 3a(II), are the related organizations						3b
4	Describe in Part XIV the intended uses of the						·
Pa	rt VI Land, Buildings, and Equipm			····		··· · · · · · · · · · · · · · · · · ·	
	Description of investment	(a) Cost or o basis (investr	1 ' '	or other (other)	` '	umulated eciation	(d) Book value
1a	Land						
b	Buildings						FA - 2 - 2 - 7
С	Leasehold improvements			9,274.		1,255.	78,019.
d	Equipment		50	1,178.	30	5,754.	195,424.
e	Other						
Tota	I. Add lines 1a through 1e (Column (d) must e	qual Form 990, Part	X, column (B), line	10(c).)			273,443.

Sche	dule D (Form 990) 2010 HULT INTERNATIONAL BUSINESS SCHOOL,	INC	. ()4-:	3348440	Page 4
Pai	t XI. Reconciliation of Change in Net Assets from Form 990 to Audited Finar	ncial S	Stater	nent	s	
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1			13,216	,206.
2	Total expenses (Form 990, Part IX, column (A), line 25)	2			10,457	,181.
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3			2,759	,025.
4	Net unrealized gains (losses) on investments	4				
5	Donated services and use of facilities	5				
6	Investment expenses	6				
7	Prior period adjustments	7				
8	Other (Describe in Part XIV.)	8				
9	Total adjustments (net). Add lines 4 through 8	9				0.
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	10			2,759	,025.
Par	t XII Reconciliation of Revenue per Audited Financial Statements With Reve	nue p	er Re	eturn		
1	Total revenue, gains, and other support per audited financial statements			1	13,216	,206.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:					
а	Net unrealized gains on investments 2a		- 1			
b	Donated services and use of facilities 2b					
С	Recoveries of prior year grants 2c					
d	Other (Describe in Part XIV.)					
е	Add lines 2a through 2d			2e		0.
3	Subtract line 2e from line 1			3	13,216	,206.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:					
а	Investment expenses not included on Form 990, Part VIII, line 7b			- 1		
b	Other (Describe in Part XIV.)			- 1		
c	Add lines 4a and 4b			4c		0.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		F	5	13,216	,206.
	t XIII Reconciliation of Expenses per Audited Financial Statements With Expenses	enses	per l	Retu		
1	Total expenses and losses per audited financial statements		İ	1	10,457	,181.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25					<u></u>
-	Donated services and use of facilities 2a					
b	Prior year adjustments 2b	•		- 1		
c	Other losses 2c		\neg			
d	Other (Describe in Part XIV.)			i		
e	Add lines 2a through 2d			2e		0.
3	Subtract line 2e from line 1			3	10,457	.181.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		F			•
a	Investment expenses not included on Form 990, Part VIII, line 7b					
	Other (Describe in Part XIV.)					
	Add lines 4a and 4b			4c		0.
	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)		-	5	10,457	
	rt XIV Supplemental Information					<u>, </u>
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; P	art IV. li	nes 1b	and 2	b: Part V. line	4: Part
	e 2; Part XI, line 8, Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also complete this part to pro	-				.,
	RT X, LINE 2: ACCOUNTING PRINCIPLES GENERALLY ACCEPT		•			
ST	ATES OF AMERICA REQUIRE THE SCHOOL TO EVALUATE TAX I	POSI	TION	ıs ı	CAKEN A	ND
RE	COGNIZE A TAX LIABILITY (OR ASSET) IF THE SCHOOL HAS	TA	KEN	AN	UNCERT	AIN
TA	K POSITION THAT MORE LIKELY THAN NOT WOULD BE SUSTAI	NED	UPC)N E	EXAMINA	TION
ΒY	TAXING AUTHORITIES. THE SCHOOL HAS ANALYZED THE TAX	C PO	SITI	ONS	TAKEN	,
				•		
ANI	HAD CONCLUDED THAT, AS OF SEPTEMBER 30, 2011, THEF	RE A	RE N	10 t	MCERTA:	IN_
POS	SITIONS TAKEN OR EXPECTED TO BE TAKEN THAT WOULD REQ	QUIR	E RE	COC	NITION	OR
	TARTITMY (OR AGGEM) OR REGGLOCITE IN MUE ETNANGIAL	a==			_	_
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SCHEDULE E

Department of the Treasury Internal Revenue Service

(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.

OMB No 1545-0047

2010

Open to Public Inspection

Name of the organization

HULT INTERNATIONAL BUSINESS SCHOOL, INC.

Employer identification number 04-3348440

Nest No organization have a racially nondiscriminatory policy toward students by statement in its charler, 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 winter 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. THE HULT INTERNATIONAL BUSINESS SCHOOL, INC. INCLUDES A STATEMENT OF ITS RACIALLY NONDISCRIMINATORY POLICIES IN ALL OF ITS PROMOTIONAL MATERIALS AND ADVERTISING. 4 Does the organization maintain the following? a Records indicating the racial composition of the student body, faculty, and administrative staft? b Racords columenting 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. 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? 5 SA X 5 SA X 5 SA X 5 SA X 5 SA X 5 SA X 5 SA X 5 SA X 5 SA X 5 SA X 5 SA X 5 SA X 5 SA X 5 SA X 6 SA X 6 SA X 6 SA X 6 SA X 6 SA X 6 SA X 6 SA X 6 SA X 6 SA X 6 SA X 6 SA X 6 SA X 6 SA X 6 SA X 6 SA X 6 SA X	Par	ti			
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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. 5 Does the organization discriminate by race in any way with respect to: a Students' rights or privileges? 5 Admissions policies? c Employment of faculty or administrative staff? 5 Sc X Scholarships or other financial assistance? e Educational policies? f Use of facultities? g Athletic programs? h Other extracumcular activities? If you answered "Yes" to any of the above, please explain If you need more space, use Part II. 6a Does the organization receive any financial and 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 4 01 through 4.05 of					
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7 Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4.05 of	b		- OD		
	_				
	7		,	x	

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	<u>-</u>
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SCHEDULE J (Form 990)

Compensation Information

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

► Complete if the organization answered "Yes" to Form 990, Part IV, line 23.

➤ Attach to Form 990. ➤ See separate instructions.

INC.

OMB No 1545-0047

Open to Public Inspection

Name of the organization

Department of the Treasury

Internal Revenue Service

HULT INTERNATIONAL BUSINESS SCHOOL,

Employer identification number 04-3348440

Pa	art I Questions Regarding Compensation			
_			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990,			
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			ŀ
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			1
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)			
		.		
þ	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or	_		Í (
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors,			
	trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	2		
3	Indicate which, if any, of the following the organization uses to establish the compensation of the organization's		\ \	
	CEO/Executive Director. Check all that apply.			
	Compensation committee Written employment contract	`		
	Independent compensation consultant Compensation survey or study			
	Form 990 of other organizations X 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	5.	,	
	organization or a related organization:			
а	- the state of the	4a		X
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		X
С	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		Х
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.	1		
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			\ \ \ \
	contingent on the revenues of:		*	
а	The organization?	5a		X
b	Any related organization?	5b		X
	If "Yes" to line 5a or 5b, describe in Part III			1
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the net earnings of			
а	The organization?	6a		X
b	Any related organization?	6b		Х
	If "Yes" to line 6a or 6b, describe in Part III.		ì	
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments			1
	not described in lines 5 and 6? If "Yes," describe in Part III	7		X
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 Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		X
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53.4958-6(c)?	9		

Schedule J (Form 990) 2010 HUL

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.

		(B) Breakdown of	(B) Breakdown of W-2 and/or 1099-MISC compensation	3C compensation	(0)	(Q)	(E)	(F)
(A) Name		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	Retirement and other deferred compensation	Nontaxable benefits	Total of columns (B)(i)-(D)	Compensation reported in prior Form 990 or Eorm 990 or
					,		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
	Ξ	311,925.		0	0	16,338.	328,26	0
1 RICHARD JOSEPH	(ii)			0.	0.	0		0
	(1)	145,620.	• 0	0.	0.	14,963.	160,58	0.
2 HITENDRA PATEL	(ii)	0	0	0.	• 0	0.	0.	0.
	Ξ							-
3	(ii)							
	Ξ							
4	€							
	(j)							
5	(ii)							
	(3)							
9	(ii)							
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7	(ii)							
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Schedule J (Form 990) 2010

SCHEDULE M (Form 990)

Noncash Contributions

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

Open to Public Inspection

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization Attach to Form 990.

HULT INTERNATIONAL BUSINESS SCHOOL. INC.

Employer identification number 04-3348440

Par	t I Types of Property						
		(a) Check if	(b) Number of	(c) Noncash contribution	Mathadia	(d)	
		applicable	contributions or	amounts reported on		of determining tribution amoun	nts
			items contributed	Form 990, Part VIII, line 1g			
1	Art - Works of art						
2	Art - Historical treasures						
3	Art - Fractional interests				-		
4	Books and publications	_					
5	Clothing and household goods						
6	Cars and other vehicles						
7	Boats and planes						
8	Intellectual property			<u> </u>			
9	Securities - Publicly traded Securities - Closely held stock		<u>. </u>	<u></u>			
10 11	Securities - Closely field stock 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		ļ				
23	Scientific specimens			<u></u>			
24	Archeological artifacts	37	1	1 200 000	DECORDED	773 T T T O T	3 T T
25	Other (FORGIVENESS O)	X		1,200,000.	RECORDED	VALUE OF	<u>, 171</u>
26	Other ()	-					
27	Other ()						
<u>28</u> 29	Other () Number of Forms 8283 received by the organi	zation durin	a the tax year for a	contributions			
29	for which the organization completed Form 82						
	To Which the organization completed to one or	00,1 41111,	50,100,1011,011,00	goo.k		Yes	No
30a	During the year, did the organization receive b	v contributio	on any property rei	ported in Part I. lines 1-28 th	at it must hold for	- - - - - - - - -	1
	at least three years from the date of the initial						^
	the entire holding period?		•	•		30a	X
b	If "Yes," describe the arrangement in Part II						
31	Does the organization have a gift acceptance	policy that r	equires the review	of any non-standard contrib	utions?	31	X
32a	Does the organization hire or use third parties	or related or	rganizations to sol	icit, process, or sell noncash			
	contributions?					32a	X
b	If "Yes," describe in Part II.						
33	If the organization did not report an amount in	column (c)	or a type of prope	rty for which column (a) is ch	ecked,		
	describe in Part II.						<u> </u>

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 990-EZ or to provide any additional information.

Attach to Form 990 or 990-EZ.

2010
Open to Public Inspection

Name of the organization

HULT INTERNATIONAL BUSINESS SCHOOL, INC.

Employer identification number 04-3348440

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

EXCEPTIONALLY VALUABLE AND ENDURING EDUCATION THAT BRINGS TOGETHER

PEOPLE, CULTURES, AND IDEAS FROM ALL AROUND THE WORLD. THE SCHOOL

ENCOURAGES PERSONAL GROWTH, INTELLECTUAL INTEGRITY, GLOBAL SENSITIVITY,

LOCAL ENGAGEMENT, AND CIVIC VALUES, SO THAT STUDENTS ARE ABLE TO

FLOURISH IN THE GLOBAL ECONOMY AND ARE EMPOWERED TO CONTRIBUTE

MEANINGFULLY TO THEIR BUSINESS AND COMMUNITY.

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

INTEGRITY, GLOBAL SENSITIVITY, LOCAL ENGAGEMENT AND CIVIC VALUES, SO

THAT STUDENTS ARE ABLE TO FLOURISH IN THE GLOBAL ECONOMY AND ARE

EMPOWERED TO CONTRIBUTE MEANINGFULLY TO THEIR BUSINESS AND COMMUNITY.

FORM 990, PART VI, SECTION B, LINE 11: THE ORGANIZATION'S PRESIDENT,

TREASURER AND OTHER MEMBERS OF THE BOARD OF DIRECTORS REVIEW A DRAFT OF THE

FORM 990, WHICH IS PREPARED BY THE ORGANIZATION'S INDEPENDENT ACCOUNTANTS.

ANY RESULTANT COMMENTS AND CHANGES ARE DISCUSSED WITH THE INDEPENDENT

ACCOUNTANTS AND IF APPROPRIATE, INCORPORATED INTO THE FINAL VERSION OF FORM

990.

FORM 990, PART VI, SECTION B, LINE 12C: ALL DIRECTORS, OFFICERS AND

EMPLOYEES ARE PROVIDED WITH COPIES OF THE POLICY. DIRECTORS AND OFFICERS

ARE REQUIRED TO DISCLOSE CONFLICTS OF INTEREST AT BOARD MEETINGS. EMPLOYEES

ARE REQUIRED TO DISCLOSE CONFLICTS OF INTEREST DURING THEIR ANNUAL REVIEW.

BASED UPON APPROVAL BY THE BOARD OF DIRECTORS. FOR OTHER KEY EMPLOYEES AND OFFICERS, COMPENSATION IS BASED ON A FIXED SUM AGREED UPON AT THE TIME OF EMPLOYMENT. THIS SUM REFLECTS AN EMPLOYEE'S LEVEL OF EXPERIENCE AND EXPERTISE WHEN (S)HE JOINS THE ORGANIZATION. SALARIES WITHIN THE ORGANIZATION ARE STRICLTY CONFIDENTIAL AND NEGOTIATED INDIVIDUALLY.

FORM 990, PART VI, SECTION C, LINE 19: THE SCHOOL'S AUDITED FINANCIAL

STATEMENTS ARE AVAILABLE TO THE GENERAL PUBLIC VIA AN INFORMATION WEBSITE

(GUIDESTAR) WHICH SERVICES THE NON-PROFIT INDUSTRY, THE MASSACHUSETTS

ATTORNEY GENERAL'S OFFICE AND UPON REQUEST. THE SCHOOL'S GOVERNING

DOCUMENTS AND CONFLICTS OF INTEREST POLICY ARE MADE AVAILABLE TO THE PUBLIC UPON REQUEST.

FORM 990, OTHER RELEVANT INFORMATION

THE SCHOOL HAS ENTERED INTO A SERVICES AGREEMENT WITH HULT

INTERNATIONAL BUSINESS SCHOOL, LTD. ("HULT LTD."), A HONG KONG

CORPORATION, TO PROVIDE EDUCATIONAL AND ACADEMIC SERVICES TO STUDENTS

RECRUITED BY HULT, LTD. WHO ATTEND HULT INTERNATIONAL BUSINESS SCHOOL,

INC. THE SCHOOL'S CHAIRMAN OF THE BOARD OF DIRECTORS HAS AN OWNERSHIP

INTERST IN HULT, LTD. THE SCHOOL RECEIVES A PROGRAM FEE FROM HULT, LTD.

FOR DELIVERY OF THESE EDUCATIONAL SERVICES. PROGRAM FEES FROM HULT,

LTD. TOTALED \$10,311,123 FOR THE YEAR ENDED SEPTEMBER 30, 2011.

HULT, LTD. HAS ALSO INCURRED EXPENSES ON BEHALF OF OR MADE NON-INTEREST

BEARING ADVANCES TO THE SCHOOL IN THE NORMAL COURSE OF OPERATIONS. AS

OF SEPTEMBER 30, 2011, THE SCHOOL OWED HULT, LTD. \$132,677. THE SCHOOL

HAS RECEIVED A FINANCIAL COMMITMENT FROM HULT, LTD. THAT REPAYMENT OF

THE AMOUNT DUE WILL NOT BE REQUIRED PRIOR TO OCTOBER 1, 2012.

Schedule	0	Form	990	or	990-EZ)	(2010)

Page **2**

Name of the organization HULT INTERNATIONAL BUSINESS SCHOOL, INC.	Employer identification number 04-3348440
·	
THE SCHOOL HAS ENTERED INTO AN AGREEMENT WITH EF INSTITUT	E FOR CULTURAL
EXCHANGE, INC. ("EF INSTITUTE"), WHEREBY EF INSTITUTE PRO	VIDES CERTAIN
GENERAL AND ADMINISTRATIVE SERVICES TO THE SCHOOL. THE AG	REEMENT
EXPIRES OCTOBER 1, 2012 AND IS SUBJECT TO ANNUAL RENEWAL.	THE SCHOOL
WAS CHARGED \$590,666 BY EF INSTITUTE FOR THESE SERVICES D	URING THE YEAR
ENDED SEPTEMBER 30, 2011. AT SEPTEMBER 30, 2011, THE SCHO	OL OWED EF
INSTITUTE \$7,147.	
THE SCHOOL ENTERED INTO AN AGREEMENT WITH EFEKTA SCHOOLS,	INC.
("EFEKTA") IN 2006 TO LEASE CLASSROOM AND ADMINISTRATIVE	SPACE IN
CAMBRIDGE, MASSACHUSETTS. RENT EXPENSE UNDER THE LEASE AG	REEMENT
TOTALED \$391,226 FOR THE YEAR ENDED SEPTEMBER 30, 2011. T	HE LEASE
STATES THAT THE NUMBER OF SQUARE FEET RENTED AND RELATED	RENT EXPENSE
PAID BY THE SCHOOL MAY BE AMENDED PERIODICALLY THROUGHOUT	THE LEASE
TERM. AT SEPTEMBER 30, 2011, THE SCHOOL WAS OWED \$72,106	FOR CERTAIN
COSTS TO BE REIMBURSED BY EFEKTA.	

Form **8868**

(Rev. January 2011)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

► File a separate application for each return.

OMB No. 1545-1709

Form 8868 (Rev. 1-2011)

• If yo	ou are filing for an Automatic 3-Month Extension, complet	e only Pa	rt I and check this box		>	X
	ou are filing for an Additional (Not Automatic) 3-Month Ext					
	t complete Part II unless you have already been granted a					
	onic filing (e-file). You can electronically file Form 8868 if y					
	ed to file Form 990-T), or an additional (not automatic) 3-mor					
	e to file any of the forms listed in Part I or Part II with the exc					
	nal Benefit Contracts, which must be sent to the IRS in pap		(see instructions). For more details on t	ne elec	tronic filing of this fo	orm,
_	ww.irs.gov/efile and click on e-file for Charities & Nonprofits					
Par						
-	poration required to file Form 990-T and requesting an autor	natic 6-mc	onth extension - check this box and con	plete	_	Γ
Part I	-	101			even of time	
	er corporations (including 1120-C filers), partnerships, REM income tax returns.	ics, and ti	usts must use Form 7004 to request ar	exteri	sion or time	
Гуре	or Name of exempt organization			Empl	oyer identification	number
print						
lle by t	HULT INTERNATIONAL BUSINESS			0	4-3348440	
due dat iling yo eturn S	e for Number, street, and room or suite no. If a P.O. box, so ur ONE EDUCATION STREET	ee instruc	tions.			
nstruct		reign add	ress, see instructions.			
	0.22.2.2.2.					
Enter	the Return code for the return that this application is for (file	e a separa	te application for each return)			0 1
Applie	cation	Return	Application			Return
s For		Code	Is For			Code
Form	990	01	Form 990-T (corporation)			07
Form	990-BL	02	Form 1041-A			08
Form	990-EZ	01	Form 4720			09
Form	990-PF	04	Form 5227			10
Form	990-T (sec. 401(a) or 408(a) trust)	05	Form 6069			11
Form	990-T (trust other than above)	06	Form 8870			12
	GUNNAR LINK		n campathor wa 00	1 4 1		
• Th	e books are in the care of ONE EDUCATION S	STREE	$\frac{1 - CAMBRIDGE, MA 02}{FAXNo} \triangleright 617-746-1991$	141		
	ephone No 617-619-1543		· · · · · · · · · · · · · · · · · · ·			
	he organization does not have an office or place of business					
_	his is for a Group Return, enter the organization's four digit				the whole group, c	
box					ers the extension is	ior.
1	I request an automatic 3-month (6 months for a corporation MAY 15, 2012 , to file the exemp		to file Form 990-1) extension of time unit		The extension	
		t Organiza	tion return for the organization named a	DOVE	THE EXCENSION	
	is for the organization's return for: ▶					
	► X tax year beginning OCT 1, 2010	an	d ending SEP 30, 2011			
	LEE tax year beginning	, aii	d chang		- •	
2	If the tax year entered in line 1 is for less than 12 months, c	heck reas	on. Initial return Fina	al retun	n	
_	Change in accounting period	noon roue	5/1 / 1/1/16/1/ / 1/1/16/1/		•	
	Change in accounting period					
3a	If this application is for Form 990-BL, 990-PF, 990-T, 4720,	or 6069, e	nter the tentative tax, less any			
	nonrefundable credits. See instructions			За	\$	0.
b	If this application is for Form 990-PF, 990-T, 4720, or 6069,	enter any	refundable credits and		<u></u>	
	estimated tax payments made. Include any prior year overp	ayment a	llowed as a credit	3b	\$	0.
С	Balance due. Subtract line 3b from line 3a. Include your pa					_
	by using EFTPS (Electronic Federal Tax Payment System)			3c	\$	0.
	en. If you are going to make an electronic fund withdrawal i	with this E	orm 9969, see Form 9453-FO and Form	8870.	EO for payment ineti	auctions

LHA For Paperwork Reduction Act Notice, see Instructions.