EXTENSION ATTACHED

Form **990**

Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

OMB No 1545-0047

2008

Open to Public Inspection

A For the 2008 calendar year, or tax year beginning JUL 1, 2008 and ending JUN 30, 2009

B Check if applicable.
- ☐ Address change
- ☐ Name change
- ☐ Initial return
- ☐ Termination
- ☐ Amended return
- ☐ Application pending

Please use IRS label or print or type. See Specific Instructions

C Name of organization
INTERNATIONAL COLLEGE - BEIRUT

Doing Business As

Number and street (or P.O. box if mail is not delivered to street address) Room/suite
215 PARK AVENUE SOUTH 2016

City or town, state or country, and ZIP + 4
NEW YORK, NY 10022

D Employer identification number
13-1935349

E Telephone number
(212)529-3005

G Gross receipts $ 64,693,019.

F Name and address of principal officer. WILLIAM TURNER
215 PARK AVENUE SOUTH STE 2016, NEW YORK, N

H(a) Is this a group return for affiliates? ☐ Yes ☒ No

H(b) Are all affiliates included? ☐ Yes ☐ No
If "No," attach a list (see instructions)

I Tax-exempt status: ☒ 501(c)(3)◀ (insert no.) ☐ 4947(a)(1) or ☐ 527

J Website: ▶ WWW.IC.EDU.LB

H(c) Group exemption number ▶

K Type of organization: ☒ Corporation ☐ Trust ☐ Association ☐ Other ▶

L Year of formation: 1934 M State of legal domicile: MA

Part I Summary

1 Briefly describe the organization's mission or most significant activities: THE PRIMARY PURPOSE OF THE ORGANIZATION IS TO PROVIDE TEACHERS AND ADMINISTRATORS AS WELL AS

2 Check this box ▶ ☐ if the organization discontinued its operations or disposed of more than 25% of its assets.

3	Number of voting members of the governing body (Part VI, line 1a)	3	34
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	34
5	Total number of employees (Part V, line 2a)	5	24
6	Total number of volunteers (estimate if necessary)	6	34
7a	Total gross unrelated business revenue from Part VIII, line 12, column (C)	7a	0.
b	Net unrelated business taxable income from Form 990-T, line 34	7b	-2,819.

		Prior Year	Current Year
8	Contributions and grants (Part VIII, line 1h)		2,863,980.
9	Program service revenue (Part VIII, line 2g)		23,014,370.
10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		-5,179,556.
11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		15,999,744.
12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		36,698,538.
13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		
14	Benefits paid to or for members (Part IX, column (A), line 4)		
15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		12,629,135.
16a	Professional fundraising fees (Part IX, column (A), line 11e)		
b	Total fundraising expenses (Part IX, column (D), line 25) ▶ 1,303,037.		
17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)		16,947,017.
18	Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)		29,576,152.
19	Revenue less expenses Subtract line 18 from line 12		7,122,386.

		Beginning of Year	End of Year
20	Total assets (Part X, line 16)	68,811,798.	95,658,121.
21	Total liabilities (Part X, line 26)	11,694,368.	34,976,750.
22	Net assets or fund balances Subtract line 21 from line 20	57,117,430.	60,681,371.

SCANNED JUN 2 0 2010

RECEIVED
MAY 17 2010
OGDEN, UT
IRS

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 — Date: 05/11/10

▶ WILLIAM TURNER, CHAIRMAN
Type or print name and title

Paid Preparer's Use Only

Preparer's signature ▶	Date 04/30/10	Check if self-employed ▶ ☐	Preparer's identifying number (see instructions)
Firm's name (or yours if self-employed), address, and ZIP + 4 ▶ RSM MCGLADREY, INC. 1185 AVENUE OF THE AMERICAS NEW YORK, NY 10036-2602		EIN ▶	
		Phone no. ▶ 212-372-1000	

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

SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

G15

4

Part III Statement of Program Service Accomplishments (see instructions)

1 Briefly describe the organization's mission. SEE SCHEDULE O FOR CONTINUATION
THE MISSION OF INTERNATIONAL COLLEGE IS TO EDUCATE YOUNG MEN AND WOMEN TO BE COMPASSIONATE AND SELF-RELIANT, CAPABLE OF INITIATIVE AND CRITICAL THINKING, AND WHO WILL SERVE AS ROLE MODELS IN SOCIETY. THE CURRICULUM AIMS FOR EXCELLENCE AT ALL LEVELS AND EMBRACES THE

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 $ 21,038,889. including grants of $ 770,174.) (Revenue $ 26,667,744.)
OPERATION OF A PRIVATE PRIMARY AND SECONDARY COEDUCATIONAL (PRESCHOOL THROUGH LEBANESE BACCALAUREATE, FRENCH BACCALAUREATE AND THE COLLEGE PREPATORY SCHOOL DIPLOMA), NOT-FOR-PROFIT, NON-SECTARIAN, LIBERAL ARTS SCHOOL FOR THE INTERNATIONAL COMMUNITY IN BEIRUT, LEBANON. THE SCHOOL PROVIDES TEACHERS AND ADMINISTRATORS AS WELL AS FACILITIES. APPROXIMATELY 3,350 STUDENTS SERVED.

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** ▶ $ 21,038,889. *(Must equal Part IX, Line 25, column (B))*

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? *If "Yes," complete Schedule A*	1	X	
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? *If "Yes," complete Schedule C, Part II*	4		X
5	**Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations.** Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? *If "Yes," complete Schedule C, Part III*	5		
6	Did the organization maintain any donor advised funds or any accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? *If "Yes," complete Schedule D, Part I*	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, 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 hold assets in term, permanent, or quasi-endowments? *If "Yes," complete Schedule D, Part V*	10	X	
11	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? *If "Yes," complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable*	11	X	
12	Did the organization receive an audited financial statement for the year for which it is completing this return that was prepared in accordance with GAAP? *If "Yes," complete Schedule D, Parts XI, XII, and XIII*	12	X	
13	Is the organization a school as 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 U.S ?	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 U S.? *If "Yes," complete Schedule F, Part I*	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, Part II*	15		X
16	Did the organization report on Part IX, column (A), line 3, more than $5,000 of aggregate grants or assistance to individuals located outside the United States? *If "Yes," complete Schedule F, Part III*	16	X	
17	Did the organization report more than $15,000 on Part IX, column (A), line 11e? *If "Yes," complete Schedule G, Part I*	17		X
18	Did the organization report more than $15,000 total on Part VIII, lines 1c and 8a? *If "Yes," complete Schedule G, Part II*	18		X
19	Did the organization report more than $15,000 on Part VIII, line 9a? *If "Yes," complete Schedule G, Part III*	19		X
20	Did the organization operate one or more hospitals? *If "Yes," complete Schedule H*	20		X
21	Did the organization report more than $5,000 on Part IX, column (A), line 1? *If "Yes," complete Schedule I, Parts I and II*	21		X
22	Did the organization report more than $5,000 on Part IX, column (A), line 2? *If "Yes," complete Schedule I, Parts I and III*	22		X
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? *If "Yes," complete Schedule J*	23	X	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than $100,000 as of the last day of the year, that was issued after December 31, 2002? *If "Yes," answer questions 24b-24d and complete Schedule K. If "No", go to question 25*	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	**Section 501(c)(3) and 501(c)(4) organizations.** Did the organization engage in an excess benefit transaction with a disqualified person during the year? *If "Yes," complete Schedule L, Part I*	25a		X
b	Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a prior year? *If "Yes," complete Schedule L, Part I*	25b		X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? *If "Yes," complete Schedule L, Part II*	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial contributor, or to a person related to such an individual? *If "Yes," complete Schedule L, Part III*	27		X

Part IV Checklist of Required Schedules *(continued)*

			Yes	No
28	During the tax year, did any person who is a current or former officer, director, trustee, or key employee.			
a	Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other person(s) listed in Part VII, Section A)? *If "Yes," complete Schedule L, Part IV*	28a		X
b	Have a family member who had a direct or indirect business relationship with the organization? *If "Yes," complete Schedule L, Part IV*	28b		X
c	Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional corporation) doing business with the organization? *If "Yes," complete Schedule L, Part IV*	28c		X
29	Did the organization receive more than $25,000 in non-cash contributions? *If "Yes," complete Schedule M*	29	X	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? *If "Yes," complete Schedule M*	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? *If "Yes," complete Schedule N, Part I*	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? *If "Yes," complete Schedule N, Part II*	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301 7701-3? *If "Yes," complete Schedule R, Part I*	33		X
34	Was the organization related to any tax-exempt or taxable entity? *If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1*	34		X
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? *If "Yes," complete Schedule R, Part V, line 2*	35		X
36	**Section 501(c)(3) organizations.** Did the organization make any transfers to an exempt non-chantable related organization? *If "Yes," complete Schedule R, Part V, line 2*	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? *If "Yes," complete Schedule R, Part VI*	37		X

Part V Statements Regarding Other IRS Filings and Tax Compliance

				Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable	1a	8		
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		X
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a	24		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?		2b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to *e-file* this return (see instructions)				
3a	Did the organization have unrelated business gross income of $1,000 or more during the year covered by this return?		3a		X
b	If "Yes," has it filed a Form 990-T for this year? *If "No," provide an explanation in Schedule O*		3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?		4a	X	
b	If "Yes," enter the name of the foreign country ▶ LEBANON See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.				
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		5b		X
c	If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?		5c		
6a	Did the organization solicit any contributions that were not tax deductible?		6a		X
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).**				
a	Did the organization provide goods or services in exchange for any quid pro quo contribution of more than $75?		7a		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d			
e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		7f		X
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?		7g		X
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?		7h		X
8	**Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.** Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?		8		X
9	**Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.**				
a	Did the organization make any taxable distributions under section 4966?		9a		X
b	Did the organization make a distribution to a donor, donor advisor, or related person?		9b		X
10	**Section 501(c)(7) organizations.** Enter: N/A				
a	Initiation fees and capital contributions included on Part VIII, line 12	10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b			
11	**Section 501(c)(12) organizations.** Enter: N/A				
a	Gross income from members or shareholders	11a			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b			
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 N/A	12b			

Part VI Governance, Management, and Disclosure *(Sections A, B, and C request information about policies not required by the Internal Revenue Code)*

Section A. Governing Body and Management

			Yes	No
	For each "Yes" response to lines 2-7b below, and for a "No" response to lines 8 or 9b below, describe the circumstances, processes, or changes in Schedule O. See instructions.			
1a	Enter the number of voting members of the governing body	1a 34		
b	Enter the number of voting members that are independent	1b 34		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		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 organizational documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		X
6	Does the organization have members or stockholders?	6		X
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a		X
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
a	The governing body?	8a	X	
b	Each committee with authority to act on behalf of the governing body?	8b	X	
9a	Does the organization have local chapters, branches, or affiliates?	9a	X	
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?	9b	X	
10	Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations must describe in Schedule O the process, if any, the organization uses to review the Form 990	10	X	
11	Is there any officer, director or 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*	11		X

Section B. Policies

			Yes	No
12a	Does the organization have a written conflict of interest policy? *If "No," go to line 13*	12a	X	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X	
c	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:			
a	The organization's CEO, Executive Director, or top management official?	15a	X	
b	Other officers or key employees of the organization? Describe the process in Schedule O. (see instructions)	15b	X	
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		X
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?	16b		

Section C. Disclosure

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

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

☐ Own website ☒ Another's website ☐ Upon request

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

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

TALAL JUNDI - 009613-898787
PO BOX 113-5373 HAMRA, BEIRUT LEBANON 1107 2020

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

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

1a Complete this table for all persons required to be listed Use Schedule J-2 if additional space is needed

- List all of the organization's **current** officers. directors trustees (whether individuals or organizations), regardless of amount of compensation, and **current** key employees. Enter -0- in columns (D), (E), and (F) if no compensation was paid
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than $100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than $100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than $10,000 of reportable compensation from the organization and any related organizations

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

☐ Check this box if the organization did not compensate any officer, director, trustee, or key employee

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
GERRIT M. KEATOR TRUSTEE	5.00							0.	0.	0.
RAYMOND W. AUDI TRUSTEE	5.00							0.	0.	0.
T.M. DEFORD TRUSTEE	5.00							0.	0.	0.
BAYARD DODGE TRUSTEE	5.00							0.	0.	0.
MONA BAWARSHI TRUSTEE	5.00							0.	0.	0.
AMAL A. GHANDOUR MEMBER	5.00							0.	0.	0.
FOUAD MALOUF VICE CHAIRMAN/TRUSTEE	5.00							0.	0.	0.
JOHN G. MCCARTHY, JR. TRUSTEE	5.00							0.	0.	0.
MIRNA NOUJAIM TRUSTEE	5.00							0.	0.	0.
RICHARD S. WARD SECRETARY/TRUSTEE	5.00							0.	0.	0.
DONALD J. SELINGER ASST. SECRETARY-TREASURE	5.00							0.	0.	0.
IMAD TAHER TRUSTEE	5.00							0.	0.	0.
WILLIAM H. TURNER CHAIRMAN/TRUSTEE	5.00							0.	0.	0.
SAID S. DARWAZAH TRUSTEE	5.00							0.	0.	0.
ANWAR AL MULLA TRUSTEE	5.00							0.	0.	0.
FREDERICK O. CRAWFORD TRUSTEE	5.00							0.	0.	0.
IAN REED TRUSTEE	5.00							0.	0.	0.

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

(A) Name and title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
MATTHEW REYNOLDS TRUSTEE	5.00							0.	0.	0.
SAFWAN MASRI TRUSTEE	5.00							0.	0.	0.
MARWAN MARSHI TRUSTEE	5.00							0.	0.	0.
FOTINI LIOUZIS OFFICE MANAGER	40.00							57,865.	0.	0.
PETER GERARD TREASURER/TRUSTEE	5.00							50,000.	0.	0.
WAEL BAYAZID TRUSTEE	5.00							0.	0.	0.
MARWAN GHANDOUR TRUSTEE	5.00							0.	0.	0.
JAMES KNOX HOLMAN TRUSTEE	5.00							0.	0.	0.
ANTHONY JONES TRUSTEE	5.00							0.	0.	0.
YOUSUF KAN'AN TRUSTEE	5.00							0.	0.	0.
1b Total ▶								525,801.	0.	548,941.

2 Total number of individuals (including those in 1a) who received more than $100,000 in reportable compensation from the organization ▶ 2

		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		X
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	X	
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? *If "Yes," complete Schedule J for such person*	5		X

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
ETS NABIL ABDALLAH , MOUNT LEBANON LEBANON, LEBANON	CONTRACTOR	891,710.
FLANSBURGH ARCHITECTS 77 NO WASHINGTON ST, BOSTON , MA 02114	ENGINEERING SERVICES	371,612.
MERRILL LYNCH, 2 PICKWICK PLAZA 3RD FL, GREENWICH , CT 06830	INVESTMENT SERVICES	189,328.
SERVAUMATIC , BEIRUT LEBANON, LEBANON	CONTRACTOR	183,245.
ELLENZWEIG, 1280 MASSACHUSETTS AVE, CAMBRIDGE , MA 02138	ENGINEERING SERVICES	157,371.

2 Total number of independent contractors (including those in 1) who received more than $100,000 in compensation from the organization ▶ 5

SEE SCHEDULE J-2 FOR PART VII, SECTION A CONTINUATION

Part VIII Statement of Revenue

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513 or 514
Contributions, gifts, grants and other similar amounts	1a Federated campaigns	1a				
	b Membership dues	1b				
	c Fundraising events	1c				
	d Related organizations	1d				
	e Government grants (contributions)	1e	673,618.			
	f All other contributions, gifts, grants, and similar amounts not included above	1f	2190362.			
	g Noncash contributions included in lines 1a-1f $ 101,355.					
	h Total. Add lines 1a-1f	▶	2,863,980.			
Program Service Revenue		Business Code				
	2a STUDENT TUITION & FEES	611710	21488615.	21488615.		
	b MATERIAL	611710	706,003.	706,003.		
	c AUX ACTIV-BUS SERVICE	611710	656,113.	656,113.		
	d AUX ACTIV-BOOK STORE	611710	116,228.	116,228.		
	e AUX ACTIV-FOOD SVCS	611710	47,411.	47,411.		
	f All other program service revenue					
	g Total. Add lines 2a-2f	▶	23014370.			
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)	▶	1,310,065.			1310065.
	4 Income from investment of tax-exempt bond proceeds	▶				
	5 Royalties	▶				
		(i) Real	(ii) Personal			
	6a Gross Rents					
	b Less: rental expenses					
	c Rental income or (loss)					
	d Net rental income or (loss)	▶				
		(i) Securities	(ii) Other			
	7a Gross amount from sales of assets other than inventory	21504860				
	b Less: cost or other basis and sales expenses	27994481				
	c Gain or (loss)	-6489621				
	d Net gain or (loss)	▶	-6489621.	-6489621.		
	8a Gross income from fundraising events (not including $ _____ of contributions reported on line 1c). See Part IV, line 18	a				
	b Less: direct expenses	b				
	c Net income or (loss) from fundraising events	▶				
	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 GAIN ON EXCHANGE OF CA	611710	15268000.	15268000.		
	b MISCELLANEOUS	611710	731,744.			731,744.
	c					
	d All other revenue					
	e Total. Add lines 11a-11d	▶	15999744.			
	12 Total Revenue. Add lines 1h, 2g, 3, 4, 5, 6d, 7d, 8c, 9c, 10c, and 11e	▶	36698538.	31792749.	0.	2041809.

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				
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	663,306.		184,292.	479,014.
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	11,965,829.	11,764,540.	201,289.	
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
9 Other employee benefits				
10 Payroll taxes				
11 Fees for services (non-employees)				
a Management				
b Legal				
c Accounting				
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other				
12 Advertising and promotion				
13 Office expenses				
14 Information technology				
15 Royalties				
16 Occupancy				
17 Travel				
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization				
23 Insurance				
24 Other expenses. Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.)				
a INSTRUCTION	6,722,779.	6,722,779.		
b GENERAL ADMINISTRATION	6,519,131.		5,695,108.	824,023.
c GENERAL INSTITUTIONAL S	1,153,537.		1,153,537.	
d STUDENT AID	1,063,089.	1,063,089.		
e STUDENT SERVICES	745,991.	745,991.		
f All other expenses	742,490.	742,490.		
25 **Total functional expenses.** Add lines 1 through 24f	29,576,152.	21,038,889.	7,234,226.	1,303,037.
26 **Joint Costs.** Check here ▶ ☐ if following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X Balance Sheet

				(A) Beginning of year		(B) End of year
Assets	1	Cash - non-interest-bearing		5,187.	1	5,198.
	2	Savings and temporary cash investments		6,019,544.	2	5,423,115.
	3	Pledges and grants receivable, net			3	
	4	Accounts receivable, net		237,698.	4	116,246.
	5	Receivables from current and former officers, directors, trustees, key employees, or other related parties. Complete Part II of Schedule L			5	
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L			6	
	7	Notes and loans receivable, net			7	
	8	Inventories for sale or use		109,579.	8	86,864.
	9	Prepaid expenses and deferred charges		547,118.	9	524,064.
	10a	Land, buildings, and equipment cost basis	10a 67,006,271.			
	b	Less. accumulated depreciation. Complete Part VI of Schedule D	10b 12,442,702.	14,531,625.	10c	54,563,569.
	11	Investments - publicly traded securities			11	
	12	Investments - other securities. See Part IV, line 11		45,074,716.	12	34,785,561.
	13	Investments - program-related. See Part IV, line 11			13	
	14	Intangible assets			14	
	15	Other assets. See Part IV, line 11		2,286,331.	15	153,504.
	16	**Total assets.** Add lines 1 through 15 (must equal line 34)		68,811,798.	16	95,658,121.
Liabilities	17	Accounts payable and accrued expenses		2,794,181.	17	3,787,948.
	18	Grants payable			18	
	19	Deferred revenue			19	
	20	Tax-exempt bond liabilities			20	
	21	Escrow 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	20,550,727.
	24	Unsecured notes and loans payable			24	
	25	Other liabilities Complete Part X of Schedule D		8,900,187.	25	10,638,075.
	26	**Total liabilities.** Add lines 17 through 25		11,694,368.	26	34,976,750.
Net Assets or Fund Balances		**Organizations that follow SFAS 117, check here ▶ [X] and complete lines 27 through 29, and lines 33 and 34.**				
	27	Unrestricted net assets		49,780,826.	27	54,093,779.
	28	Temporarily restricted net assets		1,247,406.	28	233,766.
	29	Permanently restricted net assets		6,089,198.	29	6,353,826.
		Organizations that do not follow SFAS 117, check here ▶ [ ] 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		57,117,430.	33	60,681,371.
	34	Total liabilities and net assets/fund balances		68,811,798.	34	95,658,121.

Part XI Financial Statements and Reporting

			Yes	No
1	Accounting method used to prepare the Form 990: [ ] Cash [X] Accrual [ ] Other			
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	
c	If "Yes" to lines 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c	X	
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?	3b	X	

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

To be completed by all section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts.

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

OMB No 1545-0047

2008

Open to Public Inspection

Name of the organization	Employer identification number
INTERNATIONAL COLLEGE - BEIRUT	13-1935349

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 (Please check only **one** organization.)

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).** (Attach Schedule H)

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 the Part III)

10 ☐ An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).** (see instructions)

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?

		Yes	No
(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?	11g(i)	
(ii)	A family member of a person described in (i) above?	11g(ii)	
(iii)	A 35% controlled entity of a person described in (i) or (ii) above?	11g(iii)	

h Provide the following information about the organizations the organization supports.

(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? Yes	(iv) No	(v) Did you notify the organization in col. (i) of your support? Yes	(v) No	(vi) Is the organization in col. (i) organized in the U.S.? Yes	(vi) No	(vii) Amount of support
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.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(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 - 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) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
7 Amounts from line 4						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
11 **Total support.** Add lines 7 through 10						

12 Gross receipts from related activities, etc (see instructions) . . 12

13 **First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** ▶ ☐

Section C. Computation of Public Support Percentage

14 Public support percentage for 2008 (line 6, column (f) divided by line 11, column (f)) . . 14 %

15 Public support percentage from 2007 Schedule A, Part IV-A, line 26f . . 15 %

16a **33 1/3% support test - 2008.** 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 - 2007.** If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☐

17a **10% -facts-and-circumstances test - 2008.** 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 - 2007.** 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.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(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 - 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 1% of the total of lines 9, 10c, 11, and 12 for the year or $5,000						
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) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(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 2008 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2007 Schedule A, Part IV-A, line 27g	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for **2008** (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from **2007** Schedule A, Part IV-A, line 27h	18	%

19a **33 1/3% support tests - 2008.** 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 - 2007.** 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 ▶ ☐

INTERNATIONAL COLLEGE

June 30, 2009

SCHEDULE B, PART I, LINE 1-Contributors

Contributor Name	Address,City,Zip Code	Amount of contribution	Type of Gift -cash/noncash
		$6,000 00	CASH
		$9,990 00	CASH
		$10,000 00	CASH
		$9,990 00	CASH
		$10,000 00	CASH
		$6,850 00	CASH
		$10,000 00	CASH
		$5,000 00	CASH
		$6,000 00	CASH
		$10,000 00	CASH
		$6,000 00	CASH
		$5,000 00	CASH
		$26,466 75	CASH
		$10,000 00	CASH
		$10,000 00	CASH
		$5,000 00	CASH
		$5,000 00	CASH
		$6,900 00	CASH
		$11,000 00	CASH
		$10,000 00	CASH
		$10,000 00	CASH
		$5,000 00	CASH
		$10,000 00	CASH
		$5,000 00	CASH
		$5,000 00	CASH
		$5,000 00	CASH
		$5,000 00	CASH
		$10,000 00	CASH
		$10,000 00	CASH
		$5,500 00	CASH
		$5,000 00	CASH
		$10,000 00	CASH
		$10,000 00	CASH
		$10,000 00	CASH
		$10,000 00	CASH
		$10,000 00	CASH
		$20,500 00	CASH
		$10,000 00	CASH
		$10,000 00	CASH
		$5,000 00	CASH
		$20,000 00	CASH
		$10,000 00	CASH
		$20,000 00	CASH
		$100,000 00	CASH
		$5,000 00	CASH
		$162,840 90	CASH
		$10,000 00	CASH
		$50,000 00	CASH
		$20,000 00	CASH
		$5,000 00	CASH
		$5,000 00	CASH
		$75,000 00	CASH
		$5,000 00	CASH
		$5,000 00	CASH
		$50,000 00	CASH
		$40,000 00	CASH
		$100,000 00	CASH
		$10,000 00	CASH
		$500,000 00	CASH
		$10,000 00	CASH
		$5,000 00	CASH
		$10,000 00	CASH
		$10,000 00	CASH
		$10,000 00	CASH
		$25,000 00	CASH
		$10,000 00	CASH
		$10,000 00	CASH
		$10,000 00	CASH
		$5,000 00	CASH
		$5,000 00	CASH
	TOTAL	$1,653,037 65	

Schedule D (Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

▶ Attach to Form 990. To be completed by organizations that answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

OMB No 1545-0047

2008

Open to Public Inspection

Name of the organization

INTERNATIONAL COLLEGE - BEIRUT

Employer identification number

13-1935349

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 other 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)
☐ Protection of natural habitat
☐ Preservation of open space
☐ Preservation of an historically important land area
☐ Preservation of certified historic structure

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

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the 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, violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No

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

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

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

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

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

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

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

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

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

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

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

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
b ☐ Scholarly research
c ☐ Preservation for future generations
d ☐ Loan or exchange programs
e ☐ Other _____

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

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

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

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

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

		Amount
c	Beginning balance	1c
d	Additions during the year	1d
e	Distributions during the year	1e
f	Ending balance	1f

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

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

Part V Endowment Funds. Complete if 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	57117426.				
b	Contributions	3,563,945.				
c	Investment earnings or losses					
d	Grants or scholarships					
e	Other expenditures for facilities and programs					
f	Administrative expenses					
g	End of year balance	60681371.				

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

a Board designated or quasi-endowment ▶ 88.84 %
b Permanent endowment ▶ 9.29 %
c Term endowment ▶ 1.87 %

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

		Yes	No
(i)	unrelated organizations		X
(ii)	related organizations		X
b	If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?		

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

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) Depreciation	(d) Book value
1a	Land	6,749,695.			6,749,695.
b	Buildings	51,226,824.		5,630,557.	45,596,267.
c	Leasehold improvements				
d	Equipment	9,029,752.		6,812,145.	2,217,607.
e	Other				
	Total. Add lines 1a-1e *(Column (d) should equal Form 990, Part X, column (B), line 10(c).)* ▶				54,563,569.

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

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
Financial derivatives and other financial products		
Closely-held equity interests		
Other		
U.S. GOVERNMENT OBLIGATIONS	8,237,002.	END-OF-YEAR MARKET VALUE
U.S. CORPORATE BONDS	2,742,748.	END-OF-YEAR MARKET VALUE
U.S. COMMON AND PREFERRED STOCK	16,120,317.	END-OF-YEAR MARKET VALUE
PARTNERSHIPS	844,768.	END-OF-YEAR MARKET VALUE
MUTUAL FUNDS	5,023,637.	END-OF-YEAR MARKET VALUE
US PREFERRED STOCKS	1,817,089.	END-OF-YEAR MARKET VALUE
Total. (Col (b) should equal Form 990, Part X, col (B) line 12.) ▶	34,785,561.	

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. (Col (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
Total. *(Column (b) should equal Form 990, Part X, col (B) line 15.)* ▶	

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

(a) Description of liability	(b) Amount
Federal income taxes	
ACCRUED RETIREMENT INDEMNITIES	8,120,054.
DEFERRED REVENUES	2,518,021.
Total. *(Column (b) should equal Form 990, Part X, col (B) line 25.)* ▶	10,638,075.

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

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

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	36,698,538.
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	29,576,152.
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3	7,122,386.
4	Net unrealized gains (losses) on investments	4	-3,558,445.
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	-3,558,445.
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	3,563,941.

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	31,887,676.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
a	Net unrealized gains on investments	2a	-3,558,445.		
b	Donated services and use of facilities	2b			
c	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIV)	2d			
e	Add lines 2a through 2d			2e	-3,558,445.
3	Subtract line 2e from line 1			3	35,446,121.
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			
b	Other (Describe in Part XIV)	4b	1,252,417.		
c	Add lines 4a and 4b			4c	1,252,417.
5	Total revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)			5	36,698,538.

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

1	Total expenses and losses per audited financial statements			1	28,323,735.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
a	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
c	Losses reported on Form 990, Part IX, line 25	2c			
d	Other (Describe in Part XIV)	2d			
e	Add lines 2a through 2d			2e	0.
3	Subtract line 2e from line 1			3	28,323,735.
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			
b	Other (Describe in Part XIV)	4b	1,252,417.		
c	Add lines 4a and 4b			4c	1,252,417.
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)			5	29,576,152.

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.

PART XII, LINE 4B - OTHER ADJUSTMENTS:

STUDENT AID NETTED IN REVENUE: 1063089.

INVESTMENT EXPENSES NETTED IN REVENUE: 189328.

PART XIII, LINE 4B - OTHER ADJUSTMENTS:

STUDENT AID NETTED IN REVENUE: 1063089.

INVESTMENT EXPENSES NETTED IN REVENUE: 189328.

SCHEDULE E (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Schools

▶ To be completed by organizations that answer "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

2008

Open to Public Inspection

Name of the organization: INTERNATIONAL COLLEGE - BEIRUT

Employer identification number: 13-1935349

			YES	NO
1	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?	1	X	
2	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	2		X
3	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe If "No," please explain	3		X
	SEE STATEMENT 1			
4	Does the organization maintain the following?			
a	Records indicating the racial composition of the student body, faculty, and administrative staff?	4a	X	
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	4b	X	
c	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	4c	X	
d	Copies of all material used by the organization or on its behalf to solicit contributions?	4d	X	
	If you answered "No" to any of the above, please explain. (If you need more space, attach a separate statement)			
5	Does the organization discriminate by race in any way with respect to:			
a	Students' rights or privileges?	5a		X
b	Admissions policies?	5b		X
c	Employment of faculty or administrative staff?	5c		X
d	Scholarships or other financial assistance?	5d		X
e	Educational policies?	5e		X
f	Use of facilities?	5f		X
g	Athletic programs?	5g		X
h	Other extracurricular activities?	5h		X
	If you answered "Yes" to any of the above, please explain. (If you need more space, attach a separate statement.)			
6a	Does the organization receive any financial aid or assistance from a governmental agency?	6a	X	
b	Has the organization's right to such aid ever been revoked or suspended?	6b		X
	If you answered "Yes" to either line 6a or line 6b, please explain using an attached statement. STATEMENT 2			
7	Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4 05 of Rev Proc 75-50, 1975-2 C B 587, covering racial nondiscrimination? If "No," attach an explanation	7	X	

LHA **For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.** **Schedule E (Form 990 or 990-EZ) 2008**

832061
03-23-09

Schedule F (Form 990)

Department of the Treasury
Internal Revenue Service

Statement of Activities Outside the United States

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

OMB No 1545-0047

2008

Open to Public Inspection

Name of the organization

INTERNATIONAL COLLEGE - BEIRUT

Employer identification number

13-1935349

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

1 **For grantmakers.** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? [X] Yes [ ] No

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

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

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures in region
LEBANON	1	500	ALL ACTIVITIES RELATED TO THE EDUCATION OF STUDENTS	EDUCATION	25,221,985.
Totals ▶	1	500			25,221,985.

LHA **For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.** **Schedule F (Form 990) 2008**

832071
12-18-08

Part II **Grants and Other Assistance to Organizations or Entities Outside the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any recipient who received more than $5,000. Check this box if no one recipient received more than $5,000 ▶ ☐

Use Schedule F-1 (Form 990) if additional space is needed

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)

2 Enter total number of organizations that are recognized as charities by the foreign country or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter ▶

3 Enter total number of other organizations or entities ▶

Schedule F (Form 990) 2008

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16
Use Schedule F-1 (Form 990) if additional space is needed

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
SCHOLARSHIPS	LEBANON	100	770,174.	CASH PAYMENTS	0.		

Part IV Supplemental Information

Complete this part to provide the information required by Part I, line 2, and any other additional information.

SCHEDULE F, PART I, LINE 2: GRANTS ARE PROVIDED TO VARIOUS CHARITIES AND INDIVIDUAL STUDENTS IN NEED OF FINANCIAL AID. GRANTS ARE APPROVED BY THE PRESIDENT AND THE CHIEF FINANCIAL OFFICER.

SCHEDULE J (Form 990)

Department of the Treasury
Internal Revenue Service

Compensation Information

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

▶ Attach to Form 990. To be completed by organizations that answered "Yes" to Form 990, Part IV, line 23.

OMB No 1545-0047

2008

Open to Public Inspection

Name of the organization: INTERNATIONAL COLLEGE - BEIRUT

Employer identification number: 13-1935349

Part 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.			
	☐ 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		
	☐ Discretionary spending account	☐ Personal services (e g , maid, chauffeur, chef)		
b	If line 1a is checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	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	☐ Approval by the board or compensation committee		
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a			
a	Receive a severance payment or change of control payment?	4a		X
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		X
c	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		X
	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 must complete lines 5-8.			
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?	5a		X
b	Any related organization?	5b		X
	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?	6a		X
b	Any related organization?	6b		X
	If "Yes" to line 6a or 6b, describe in Part III			
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III	7		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 Regs section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		X

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

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

Note. The sum of columns (B)(i)-(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) 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 compensation				
	(i)	215,667.	0.	0.	0.	0.	215,667.	0.
JOHN JOHNSON	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)	0.	0.	0.	0.	0.	0.	0.
MARIE CH. MOURANI	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
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SCHEDULE J-2
(Form 990)

Department of the Treasury
Internal Revenue Service

Continuation Sheet for Form 990

▶ Attach to Form 990 to list additional information for Form 990, Part VII, Section A, line 1a.

OMB No 1545-0047

2008

Open to Public Inspection

Name of the Organization

INTERNATIONAL COLLEGE - BEIRUT

Employer Identification number

13-1935349

Part I Continuation of Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
JOHN JOHNSON PRESIDENT	5.00							215,667.	0.	0.
AZMI MIKATI TRUSTEE	5.00							0.	0.	0.
AIDA REED (LUCE) TRUSTEE	5.00							0.	0.	0.
MOHAMMED S. H. AL-SOLEIM TRUSTEE	5.00							0.	0.	0.
NIMR IBRAHIM VP-ALUMNI & DEVELOPMENT	40.00							102,917.	0.	0.
CAMILLE COUTRAN TRUSTEE	5.00							0.	0.	0.
WALID DAOUK TRUSTEE	5.00							0.	0.	0.
FORD FRAKER TRUSTEE	5.00							0.	0.	0.
TALAL K. SHAIR TRUSTEE	5.00							0.	0.	0.
ISSAM SHAMMAS TRUSTEE	5.00							0.	0.	0.
MAYA TOHME (NASSAR) TRUSTEE	5.00							0.	0.	0.
MAKRA N. ALAMUDDIN TRUSTEE EMERITI	5.00							0.	0.	0.
GEORGE P. BENT 2ND TRUSTEE EMERITI	5.00							0.	0.	0.
EVERETT FISHER TRUSTEE EMERITI	5.00							0.	0.	0.
EDOUARD GHORRA TRUSTEE EMERITI	5.00							0.	0.	0.
THOMAS W. HILL TRUSTEE EMERITI	5.00							0.	0.	0.
ANNE R. HOTCHKISS TRUSTEE EMERITI	5.00							0.	0.	0.
SAEB N. JAROUDI TRUSTEE EMERITI	5.00							0.	0.	0.
WILLIAM H. KENT TRUSTEE EMERITI	5.00							0.	0.	0.
ROBERT W. PAGE TRUSTEE EMERITI	5.00							0.	0.	0.

SCHEDULE J-2
(Form 990)

Department of the Treasury
Internal Revenue Service

Continuation Sheet for Form 990

▶ Attach to Form 990 to list additional information for Form 990, Part VII, Section A, line 1a.

OMB No 1545-0047

2008

Open to Public Inspection

Name of the Organization

INTERNATIONAL COLLEGE - BEIRUT

Employer Identification number

13-1935349

Part I Continuation of Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
ELIE A. SEHNAOUI TRUSTEE EMERITI	5.00							0.	0.	0.
MUNIR H. SHAMMA'A TRUSTEE EMERITI	5.00							0.	0.	0.
STANLEY M. SMITH TRUSTEE EMERITI	5.00							0.	0.	0.
KHALID AL-TURKI TRUSTEE EMERITI	5.00							0.	0.	0.
BARRY ZORTHIAN TRUSTEE EMERITI	5.00							0.	0.	0.
MARIE CH. MOURANI SENIOR VP	40.00							0.	0.	171,333.
ELIE KURBAN VP FOR ADMINISTRATION	40.00							0.	0.	103,596.
YOUSSEF KORFALI DIRECTOR-SECONDARY	40.00							0.	0.	96,380.
MOUFID BEIDOUN VP FOR DEVELOPMENT	40.00							0.	0.	96,352.
TALAL EL JUNDI CFO	40.00							0.	0.	81,280.
LAMA KHEIR DIRECTOR PRESCHOOL AIN A	40.00							99,352.	0.	0.

SCHEDULE M (Form 990)

Department of the Treasury
Internal Revenue Service

NonCash Contributions

▶ To be completed by organizations that answered "Yes" on Form 990, Part IV, lines 29 or 30.

▶ Attach to Form 990.

OMB No 1545-0047

2008

Open to Public Inspection

Name of the organization: INTERNATIONAL COLLEGE - BEIRUT

Employer identification number: 13-1935349

Part I Types of Property

		(a) Check if applicable	(b) Number of contributions	(c) Revenues reported on Form 990, Part VIII, line 1g	(d) Method of determining revenues
1	Art - Works of art				
2	Art - Historical treasures				
3	Art - Fractional interests				
4	Books and publications				
5	Clothing and household goods				
6	Cars and other vehicles				
7	Boats and planes				
8	Intellectual property				
9	Securities - Publicly traded	X	3	101,355.	FAIR MARKET VALUE
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 Acknowledgment — 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		X
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		X
32a	Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?	32a		X
b	If "Yes," describe in Part II.			
33	If the organization did not report revenues in column (c) for a type of property for which column (a) is checked, describe in Part II			

SCHEDULE O
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990

▶ Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

OMB No 1545-0047

2008

Open to Public Inspection

Name of the organization

INTERNATIONAL COLLEGE - BEIRUT

Employer identification number

13-1935349

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

FACILITIES FOR A PRIMARY AND SECONDARY SCHOOL IN BEIRUT, LEBANON. THE MISSION OF THE COLLEGE IS TO PROVIDE ITS STUDENTS WITH EXEMPLARY CURRICULAR AND EXTRA CURRICULAR PROGRAMS WHICH REFLECT THE BEST PRACTICES IN AMERICAN AND INTERNATIONAL EDUCATION. INTERNATIONAL COLLEGE STRIVES TO INSTILL IN ITS STUDENTS THE SKILLS AND ATTITUDES NECESSARY FOR THEM TO BECOME RESPONSIBLE LEADERS IN SOCIETY.

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

EDUCATION OF THE WHOLE PERSON. GRADUATES OF IC WILL HAVE DEVELOPED SELF-DISCIPLINE, PROBLEM SOLVING ABILITIES, RESPONSIBILITY, SELF CONFIDENCE, AND AWARNESS OF THE INTERDEPENDENCE OF NATIONS IN ALL THEIR RESPONSIBILITY, SELF CONFIDENCE, AN AWARNESS OF THE INTERDEPENDENCE OF NATIONS IN ALL THEIR DIVERSITY, AND A SET OF VALUES LEADING TO RESPECT FOR OTHERS.

FORM 990, PART VI, SECTION A, LINE 10: OFFICERS CONDUCT A COMPREHENSIVE REVIEW PRIOR TO FILING.

FORM 990, PART VI, SECTION B, LINE 12C: USUALLY EACH DIRECTOR DISCLOSES THE WRONGDOING OF HIS/HER EMPLOYEES.

EMPLOYEES ARE ENCOURAGED TO DISCLOSE ANY WRONG DOING ABOUT A FELLOW EMPLOYEE OR DIRECTOR TO THE HUMAN RESOURCES, CFO, OR THE PRESIDENT . THIS IS TREATED IN A CONFIDENTIAL MATTER.

FORM 990, PART VI, SECTION B, LINE 15: FOR THE PRESIDENT POSITION THE

SCHEDULE O
(Form 990)

Department of the Treasury
Internal Revenue Service

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OMB No 1545-0047

2008

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Name of the organization

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13-1935349

BOARD DECIDES ON THE COMPENSATION PACKAGE BASED ON THE MARKET SCALE. FOR ALL OTHER POSITIONS, THE PRESIDENT AND HUMAN RESOURCES DECIDE ON THE COMPENSATION PACKAGE BASED ON THE MARKET SCALE AND THE EXISTING SCALE IN THE SCHOOL. ALL DIRECTOR, ASSISTANT DIRECTOR AND ,ASSOCIATE DIRECTOR POSITIONS ARE RECOMMENDED BY THE PRESIDENT AND APPROVED BY THE BOARD.

FORM 990, PART VI, SECTION C, LINE 19: THE COLLEGE MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST PLICY, AND FINANCIAL STATEMENT AVAILABLE AT ITS OFFICE DURING NORMAL BUSINESS HOURS.

FORM 990, PART VII CONTACT ADDRESSES FOR OFFICERS, DIRECTORS, ETC:

GERRIT M. KEATOR - 215 PARK AVE SO STE 2016
NEW YORK , NY 10003

RAYMOND W. AUDI - 215 PARK AVE SO STE 2016
NEW YORK, NY 10003

T.M. DEFORD - 215 PARK AVE SO STE 2016
SPRUCE HEANEW YORKD, NY 10003

BAYARD DODGE - 215 PARK AVE SO STE 2016
NEW YORK, NY 10003

MONA BAWARSHI - 215 PARK AVE SO STE 2016

SCHEDULE O
(Form 990)

Department of the Treasury
Internal Revenue Service

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NEW YORK, NY 10003

AMAL A. GHANDOUR - 215 PARK AVE SO STE 2016

NEW YORK, NY 10003

FOUAD MALOUF - 215 PARK AVE SO STE 2016

NEW YORK, NY 10003

JOHN G. MCCARTHY JR. - 215 PARK AVE SO STE 2016

NEW YORK, NY 10003

MIRNA NOUJAIM - 215 PARK AVE SO STE 2016

NEW YORK, NY 10003

RICHARD S. WARD - 215 PARK AVE SO STE 2016

NEW YORK, NY 10003

DONALD J. SELINGER - 215 PARK AVE SO STE 2016

NEW YORK, NY 10003

IMAD TAHER - 215 PARK AVE SO STE 2016

NEW YORK, NY 10003

WILLIAM H. TURNER - 215 PARK AVE SO STE 2016

NEW YORK, NY 10003

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SAID S. DARWAZAH - 215 PARK AVE SO STE 2016

NEW YORK, NY 10003

ANWAR AL MULLA - 215 PARK AVE SO STE 2016

NEW YORK, NY 10003

FREDERICK O. CRAWFORD - 215 PARK AVE SO STE 2016

NEW YORK, NY 10003

IAN REED - 215 PARK AVE SO STE 2016

NEW YORK, NY 10003

MATTHEW REYNOLDS - 215 PARK AVE SO STE 2016

NEW YORK, NY 10003

SAFWAN MASRI - 215 PARK AVE SO STE 2016

NEW YORK , NY 10003

MARWAN MARSHI - 215 PARK AVE SO STE 2016

NEW YORK, NY 10003

FOTINI LIOUZIS - 215 PARK AVE SO STE 2016

NEW YORK, NY 10003

PETER GERARD - 215 PARK AVE SO STE 2016

NEW YORK, NY 10003

SCHEDULE O
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WAEL BAYAZID - 215 PARK AVE SO STE 2016

NEW YORK, NY 10003

MARWAN GHANDOUR - 215 PARK AVE SO STE 2016

NEW YORK, NY 10003

JAMES KNOX HOLMAN - 215 PARK AVE SO STE 2016

NEW YORK, NY 10003

ANTHONY JONES - 215 PARK AVE SO STE 2016

NEW YORK, NY 10003

YOUSUF KAN'AN - 215 PARK AVE SO STE 2016

NEW YORK, NY 10003

JOHN JOHNSON - 215 PARK AVE SO STE 2016

NEW YORK, NY 10003

AZMI MIKATI - 215 PARK AVE SO STE 2016

NEW YORK, NY 10003

AIDA REED (LUCE) - 215 PARK AVE SO STE 2016

NEW YORK, NY 10003

MOHAMMED S. H. AL-SOLEIMAN - 215 PARK AVE SO STE 2016

SCHEDULE O
(Form 990)

Department of the Treasury
Internal Revenue Service

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NEW YORK, NY 10003

NIMR IBRAHIM - 215 PARK AVE SO STE 2016

NEW YORK , NY 10003

CAMILLE COUTRAN - 215 PARK AVE SO STE 2016

NEW YORK, NY 10003

WALID DAOUK - 215 PARK AVE SO STE 2016

NEW YORK, NY 10003

FORD FRAKER - 215 PARK AVE SO STE 2016

NEW YORK, NY 10003

TALAL K. SHAIR - 215 PARK AVE SO STE 2016

NEW YORK , NY 10003

ISSAM SHAMMAS - 215 PARK AVE SO STE 2016

NEW YORK, NY 10003

MAYA TOHME (NASSAR) - 215 PARK AVE SO STE 2016

NEW YORK, NY 10003

MAKRA N. ALAMUDDIN - 215 PARK AVE SO STE 2016

NEW YORK, NY 10003

SCHEDULE O
(Form 990)

Department of the Treasury
Internal Revenue Service

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OMB No 1545-0047

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GEORGE P. BENT 2ND - 215 PARK AVE SO STE 2016

NEW YORK, NY 10003

EVERETT FISHER - 215 PARK AVE SO STE 2016

NEW YORK, NY 10003

EDOUARD GHORRA - 215 PARK AVE SO STE 2016

NEW YORK, NY 10003

THOMAS W. HILL - 215 PARK AVE SO STE 2016

NEW YORK , NY 10003

ANNE R. HOTCHKISS - 215 PARK AVE SO STE 2016

NEW YORK, NY 10003

SAEB N. JAROUDI - 215 PARK AVE SO STE 2016

NEW YORK, NY 10003

WILLIAM H. KENT - 215 PARK AVE SO STE 2016

NEW YORK, PA 10003

ROBERT W. PAGE - 215 PARK AVE SO STE 2016

NEW YORK, NY 10003

ELIE A. SEHNAOUI - 215 PARK AVE SO STE 2016

NEW YORK, NY 10003

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(Form 990)

Department of the Treasury
Internal Revenue Service

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OMB No 1545-0047

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MUNIR H. SHAMMA'A - 215 PARK AVE SO STE 2016

NEW YORK, NY 10003

STANLEY M. SMITH - 215 PARK AVE SO STE 2016

NEW YORK, NY 10003

KHALID AL-TURKI - 215 PARK AVE SO STE 2016

NEW YORK , NY 10003

BARRY ZORTHIAN - 215 PARK AVE SO STE 2016

NEW YORK, NY 10003

MARIE CH. MOURANI - 215 PARK AVE SO STE 2016

NEW YORK, NY 10003

ELIE KURBAN - 215 PARK AVE SO STE 2016

NEW YORK, NY 10003

YOUSSEF KORFALI - 215 PARK AVE SO STE 2016

NEW YORK, NY 10003

MOUFID BEIDOUN - 215 PARK AVE SO STE 2016

NEW YORK, NY 10003

TALAL EL JUNDI - 215 PARK AVE SO STE 2016

SCHEDULE O
(Form 990)

Department of the Treasury
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NEW YORK, NY 10003

LAMA KHEIR - 215 PARK AVE SO STE 2016

NEW YORK, NY 10003

- 215 PARK AVE SO STE 2016

NEW YORK, NY 10003

THE AUDIT COMMITTEE CONTINUES TO ASSUME RESPONSIBILITY FOR OVERSIGHT OF THE AUDIT AND SELECTION OF AN INDEPENDENT ACCOUNTANT.

SCHEDULE E SCHOOLS - LINE 3 STATEMENT 1

SEE ARTICLE VII OF THE BY-LAWS ATTACHED, FOR A STATEMENT COVERING THE SCHOOL'S NONDISCRIMINATORY POLICY. INTERNATIONAL COLLEGE, IN BEIRUT, LEBANON, SERVES A PREDOMINANTLY ARAB COMMUNITY IN WHICH A DIFFERENCE OF RELIGION IS MORE LIKELY A SOURCE OF DISCRIMINATION THAN IN RACE. ALL BROCHURES, ETC., DESCRIBING THE COLLEGE, ANNOUNCE THE NON-SECTARIAN NATURE OF THE SCHOOL.

SCHEDULE E GOVERNMENT FINANCIAL ASSISTANCE STATEMENT STATEMENT 2
LINE 6

RECEIVES FROM THE FOLLOWING: (1) ASHA, (2) AID GRANT, (3) US GOVERNMENT SECURITY GRANT

Form 990
Schedule E

Line 3

ARTICLE VI
VOTES

At any meeting of the Trustees, each Trustee shall be entitled to one vote.

ARTICLE VII
NON-DISCRIMINATION

The College admits students of any race, color, sex, religion, national or ethnic origin to all the rights, privileges, programs and activities accorded or made available to the students at the College. It does not discriminate on the basis of race, color, sex, religion, physical handicap, national or ethnic origin in administration of its educational policies, admissions policies, scholarship and loan programs, and athletic and other school-oriented programs.

ARTICLE VIII
PRIVATE INUREMENT AND DISSOLUTION

No part of the assets or net earnings of the Corporation shall inure to the benefit of or be distributed to its Trustees, officers or other private persons or be appropriated for any purpose other than the purposes of the Corporation as set forth in the Articles of Organization.

Upon any liquidation, dissolution, or winding up of the affairs of the Corporation, its entire assets remaining after providing for the payment of its debts and obligations shall be expended exclusively for the purposes of the Corporation in such manner, or distributed to such organization or organizations organized and operated exclusively for charitable, educational or scientific purposes as shall at the time qualify as an exempt organization or organizations under section 501 (c) (3) of the Internal Revenue Code of 1986, as amended, and to which contributions are deductible under sections 170 (c), 2055 (a) and 2522 (a) of said code, as the Board of Trustees shall determine in accordance with the laws of Massachusetts. Any of the assets not so disposed of shall be expended exclusively for such purposes, or distributed to such organizations organized and operated exclusively for such purposes, as shall be determined by a court in Massachusetts having jurisdiction

Form **8868**
(Rev. April 2009)
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

- If you are filing for an **Automatic 3-Month Extension, complete only Part I** and check this box ▶ [X]
- If you are filing for an **Additional (Not Automatic) 3-Month Extension, complete only Part II** (on page 2 of this form).

Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868.

Part I **Automatic 3-Month Extension of Time.** Only submit original (no copies needed).

A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete Part I only ▶ [ ]

All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Electronic Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extension of time to file one of the returns noted below (6 months for a corporation required to file Form 990-T) However, you cannot file Form 8868 electronically if (1) you want the additional (not automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or consolidated Form 990-T. Instead, you must submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic filing of this form, visit *www.irs.gov/efile* and click on *e-file for Charities & Nonprofits.*

Type or print	Name of Exempt Organization	Employer identification number
File by the due date for filing your return See instructions	INTERNATIONAL COLLEGE - BEIRUT	13-1935349
	Number, street, and room or suite no. If a P.O. box, see instructions. 215 PARK AVENUE SOUTH, NO. 2016	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. NEW YORK,, NY 10022	

Check type of return to be filed (file a separate application for each return):

[X] Form 990	[ ] Form 990-T (corporation)	[ ] Form 4720
[ ] Form 990-BL	[ ] Form 990-T (sec 401(a) or 408(a) trust)	[ ] Form 5227
[ ] Form 990-EZ	[ ] Form 990-T (trust other than above)	[ ] Form 6069
[ ] Form 990-PF	[ ] Form 1041-A	[ ] Form 8870

- The books are in the care of ▶ TAXPAYER 215 PARK AVE SO. STE 2016 - NEW YORK, NY 10003
  Telephone No ▶ 212 529-3005 FAX No. ▶
- If the organization does not have an office or place of business in the United States, check this box ▶ [ ]
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____. If this is for the whole group, check this box ▶ [ ]. If it is for part of the group, check this box ▶ [ ] and attach a list with the names and EINs of all members the extension will cover.

1 I request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time until FEBRUARY 15, 2010, to file the exempt organization return for the organization named above. The extension is for the organization's return for:
▶ [ ] calendar year _____ or
▶ [X] tax year beginning JUL 1, 2008, and ending JUN 30, 2009.

2 If this tax year is for less than 12 months, check reason: [ ] Initial return [ ] Final return [ ] Change in accounting period

3a	If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a	$
b	If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit	3b	$
c	**Balance Due.** Subtract line 3b from line 3a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions	3c	$ N/A

Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

- If you are filing for an **Additional (Not Automatic) 3-Month Extension, complete only Part II** and check this box ▶ [X]

Note. Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868

- If you are filing for an **Automatic 3-Month Extension, complete only Part I** (on page 1).

Part II **Additional (Not Automatic) 3-Month Extension of Time.** Only file the original (no copies needed).

Type or print / File by the extended due date for filing the return See instructions	Name of Exempt Organization		Employer identification number
	INTERNATIONAL COLLEGE - BEIRUT		13-1935349
	Number, street, and room or suite no If a P.O box, see instructions 215 PARK AVENUE SOUTH, NO. 2016		For IRS use only
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. NEW YORK, NY 10022		

Check type of return to be filed (File a separate application for each return)

[X] Form 990 [ ] Form 990-EZ [ ] Form 990-T (sec. 401(a) or 408(a) trust) [ ] Form 1041-A [ ] Form 5227 [ ] Form 8870
[ ] Form 990-BL [ ] Form 990-PF [ ] Form 990-T (trust other than above) [ ] Form 4720 [ ] Form 6069

STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.

- The books are in the care of ▶ TALAL JUNDI PO BOX 113-5373 HAMRA - BEIRUT LEBANON 1107 2020
  Telephone No ▶ 009613-898787 FAX No ▶
- If the organization does not have an office or place of business in the United States, check this box ▶ [ ]
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____. If this is for the whole group, check this box ▶ [ ]. If it is for part of the group, check this box ▶ [ ] and attach a list with the names and EINs of all members the extension is for.

4 I request an additional 3-month extension of time until MAY 15, 2010.

5 For calendar year _____, or other tax year beginning JUL 1, 2008, and ending JUN 30, 2009

6 If this tax year is for less than 12 months, check reason. [ ] Initial return [ ] Final return [ ] Change in accounting period

7 State in detail why you need the extension
INFORMATION FROM OUTSIDE SOURCES NECESSARY FOR A TIMELY FILING HAS NOT BEEN RECEIVED.

8a	If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits See instructions	8a	$	
b	If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868.	8b	$	
c	**Balance Due.** Subtract line 8b from line 8a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System) See instructions	8c	$	N/A

Signature and Verification

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

Signature ▶ Title ▶ CPA Date ▶