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

Open to Public

benefit trust or private foundation) ➤ The organization may have to use a copy of this return to satisfy state reporting requirements. Inspection

OMB No. 1545-0047

A	For the	= 2008 calendar year, or tax year beginning $$ JUL 1 , 2008 $$ and ending	JUN 30, 2009	9
В	Check if applicabl	Please C Name of organization	D Employer identit	ication number
ć		use ins		
	Addre chang	e print or DADSON COLLEGE		
	Name chang	be type. Doing Business As	04-2	2103544
	Initial return	See Number and street (or P.O. box if mail is not delivered to street address) Room/	suite E Telephone numb	er
	Termination	Specific linstruc 231 FOREST ST.	781.	239.5298
	Amen	ded tions. City or town, state or country, and ZIP + 4	G Gross receipts \$	258,761,780.
	Application	DADSON FARR, MA 0245/ 0510	H(a) Is this a group	return
	pendir	F Name and address of principal officer:LEONARD SCHLESINGER	for affiliates?	Yes X No
		231 FOREST STREET, BABSON PARK, MA 02457	H(b) Are all affiliates in	cluded? Yes No
T	Гах-ех	empt status: X 501(c) (3	If "No," attach a	a list. (see instructions)
		e: ▶ WWW.BABSON.EDU	H(c) Group exemption	on number 🕨
K	Type of	organization: X Corporation Trust Association Other ▶ L	Year of formation: 1919	M State of legal domicile: MA
Pa		Summary		
ø	1	Briefly describe the organization's mission or most significant activities: ${f SEE SCHE}$	EDULE O	
Activities & Governance				
Ē	2	Check this box 🕨 📖 if the organization discontinued its operations or disposed of		
Š		Number of voting members of the governing body (Part VI, line 1a)	3	46
∞ಶ		Number of independent voting members of the governing body (Part VI, line 1b)		42
es		Total number of employees (Part V, line 2a)		2068
Ĭ		Total number of volunteers (estimate if necessary)		1734
Act		Total gross unrelated business revenue from Part VIII, line 12, column (C)		4
	b	Net unrelated business taxable income from Form 990-T, line 34		
			Prior Year	Current Year
e		Contributions and grants (Part VIII, line 1h)	14,805,802.	
Revenue		Program service revenue (Part VIII, line 2g)	147,839,703.	
Re		nvestment income (Part VIII, column (A), lines 3, 4, and 7d)	9,527,977.	
	ı	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	1,097,250.	
_	_	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	173,270,732.	
		Grants and similar amounts paid (Part IX, column (A), lines 1-3)	22,879,115.	25,562,877.
		Benefits paid to or for members (Part IX, column (A), line 4)	76,963,751.	01 272 002
Ses		Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	10,303,731.	81,372,983.
Expenses	10a	Professional fundraising fees (Part IX, column (A), line 11e)		
EX	4-7 D	Fotal fundraising expenses (Part IX, column (D), line 25) 4,098,503.	66,809,986.	65,281,912.
		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	166,652,852.	
		Fotal expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) Revenue less expenses. Subtract line 18 from line 12	6,617,880.	2,098,663.
-S	19	nevertue less expenses. Subtract line 16 from line 12		End of Year
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	Beginning of Year 432,654,379.	
Ass	21	Fotal liabilities (Part X, line 26)	163,573,776.	
L L	22	Net assets or fund balances. Subtract line 21 from line 20	269,080,603.	
Pa	rt II	Signature Block	203,000,003.	231,003,1031
	1	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and stateme	nts, and to the best of my knowled	ge and belief, it is true, correct,
		and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowle	edge.	
Sign				
Here	I	Signature of officer	Date	
		N PHILIP N. SHAPIRO, VP FINANCE & CFO		
		Type or print name and title		
Della		Preparer's Date		er's identifying number structions)
Paid		signature	self- employed > (see ins	
•		Firm's name (or PRICEWATERHOUSECOOPERS LLP vours if	EIN ▶	
Use	۱ ""	self-employed), 125 HIGH STREET		
		BOSTON, MA 02110	Phone no. ► (617)530-5000
May	the IR	S discuss this return with the preparer shown above? (see instructions)		X Yes No

Pa	art III Statement of Program Service Accomplishments (see instructions)	
1	Briefly describe the organization's mission: BABSON COLLEGE EDUCATES MEN AND WOMEN TO BE ENTREPRENEURIAL LEADERS	
	A RAPIDLY CHANGING WORLD. WE PREPARE THEM, IDENTIFY OPPORTUNITIES AND	D
	INITIATE ACTIONS THAT RESULT IN GENUINE ACCOMPLISHMENT.	
2	Did the organization undertake any significant program services during the year which were not listed on	
_	U	X No
	the prior Form 990 or 990-EZ? If "Yes", describe these new services on Schedule O.	140
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	X No
•	If "Yes", describe these changes on Schedule O.	140
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.	
	anosations to strips, the total superiose, and revenue, if any, for sacin program solvings reported.	
4a	(Code:) (Expenses \$ 149889918. including grants of \$ 25,562,877.) (Revenue \$ 15478833	13.
	BABSON COLLEGE ENROLLS APPROXIMATELY 1,800 UNDERGRADUATE AND 1,600	
	GRADUATE STUDENTS FROM THE UNITED STATES AND MORE THAN 60 COUNTRIES	
	WORLDWIDE. THE COLLEGE OFFERS EDUCATION IN BUSINESS AND LIBERAL ARTS	,
	AND IT GRANTS THE BACHELOR OF SCIENCE DEGREE THROUGH ITS UNDERGRADUAT	
	PROGRAM. THE COLLEGE ALSO GRANTS MASTER OF BUSINESS ADMINISTRATION	,
	DEGREES AND CUSTOM MASTER OF SCIENCE DEGREES THROUGH THE F.W.OLIN	
	GRADUATE SCHOOL OF BUSINESS AT BABSON COLLEGE. ADDITIONALLY, BABSON	
	OFFERS DISTINCT EXECUTIVE EDUCATION PROGRAMS TO HELP COMPANIES REACH	
	THEIR STRATEGIC GOALS.	
4b	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
4c	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
A 43	Other present continue (Decembe in Schodule O.)	
4d	Other program services. (Describe in Schedule O.)	
4-	(Expenses \$ including grants of \$) (Revenue \$)	
4e	Total program service expenses ▶\$ 149,889,918. (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	<u> </u>
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	<u> </u>
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	ļ	X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4	X	<u> </u>
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and	1		
	reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		<u> </u>
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	<u> </u>
12	Did the organization receive an audited financial statement for the year for which it is completing this return that was	Ì		Ì
	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	Х	
14a	Did the organization maintain an office, employees, or agents outside of the U.S.?	14a		X
b				
	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	1 1		
	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	Х	
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	Х	
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	77
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		X
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease		1	v
	any tax-exempt bonds?	24c		X
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		<u> </u>
∠ 38	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a	OF.		Х
	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
Q	Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a	06.		v
ne	prior year? If "Yes," complete Schedule L, Part I	25b		<u>X</u>
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified			х
27	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial			Y
	contributor, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		<u> </u>

Part IV | Checklist of Required Schedules (continued)

			Yes	No
28 a	During the tax year, did any person who is a current or former officer, director, trustee, or key employee: 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	х	
С	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	х	
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	X	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		х
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		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		х
34	Was the organization related to any tax-exempt or taxable entity?			
	If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		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-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		Х

	990 (2008) BABSON COLLEGE		04-2103	544	ļ F	age !
Pai	rt 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	348			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0	-110		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and	reporta	able 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,				A S	
	filed for the calendar year ending with or within the year covered by this return	2a	2068			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax reti	ums?_		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	e instru	ictions)			
За	Did the organization have unrelated business gross income of \$1,000 or more during the year cover	red by	this return?	За	X	L
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O			3b	X	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or othe	r autho	rity over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial	l accou	ınt)?	4a		X
b	If "Yes," enter the name of the foreign country: ▶					
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign	Bank	and			
	Financial Accounts.		1000 1100 1100 1100			
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 trans	action	?	5b		X
С	If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity	y Rega	rding 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 contribu	ıtions c	or gifts			
	were not tax deductible?			6b		
7	Organizations that may receive deductible contributions under section 170(c).					
а	Did the organization provide goods or services in exchange for any quid pro quo contribution of mo	re than	\$75?	7a	X	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b	X	
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it v	vas rec	juired			
	to file Form 8282?			7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d				
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a	person	al			
	benefit contract?		F	7e		X
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit confidence of the organization of the organizat			7f		X
_	For all contributions of qualified intellectual property, did the organization file Form 8899 as required			7g		X
	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-			7h		X
8	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and sec					
	supporting organizations. Did the supporting organization, or a fund maintained by a sponsoring or	-	ļ .			
	excess business holdings at any time during the year?			8		
	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.		Į.	2.10		
	Did the organization make any taxable distributions under section 4966?			9a		<u> </u>
	Did the organization make a distribution to a donor, donor advisor, or related person?			9b		
	Section 501(c)(7) organizations. Enter: N/A	ή				
	Initiation fees and capital contributions included on Part VIII, line 12	10a				
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b				
	Section 501(c)(12) organizations. Enter: N/A	1 1				
	Gross income from members or shareholders	11a				
	Gross income from other sources (Do not net amounts due or paid to other sources against					
	amounts due or received from them.)	11b				

Form **990** (2008)

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

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

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

Sec	ction 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	J J J J J J J J J J J J J J J J J J J		E.	
b	Enter the number of voting members that are independent 1b 4	2		
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	11		
	governing body?	7a	<u> </u>	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	100		
	by the following:			
а	• • • • • • • • • • • • • • • • • • • •	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		
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	<u> </u>	X
<u>Sec</u>	tion B. Policies		T	
			Yes	No
	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	<u> </u>
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	in Schedule O how this is done	12c	X	<u> </u>
13	Does the organization have a written whistleblower policy?	13	Х	
14	Does the organization have a written document retention and destruction policy?	14	X	
15	Did the process for determining compensation of the following persons include a review and approval by independent		au 2	
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision:			
	The organization's CEO, Executive Director, or top management official?	15a	X.	
b	Other officers or key employees of the organization?	15b	X	NICE IN
40	Describe the process in Schedule O. (see instructions)			
10a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			37
	taxable entity during the year?	16a		X
þ	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	1250.5		لـــــا
2	exempt status with respect to such arrangements?	16b		
	tion C. Disclosure			
17 10	List the states with which a copy of this Form 990 is required to be filed 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	ior		
	public inspection. Indicate how you make these available. Check all that apply.			
40	Own website Another's website X Upon request	1 A*	!_!	
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, a	na fina	ncial	
00	statements available to the public.	d ►		
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organiza RICHARD BOWMAN - 781.239.5298	ion: 🗩		
	NICHOLS BUILDING, BABSON COLLEGE, BABSON PARK, MA 02457-0301			
	MICHORD DOIDDING, DADDON CODDEGE, DADDON FARK, MW 0743/-0301			

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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.

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

- 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.

(A) (B)			(C)					(D)	(E)	(F)		
Name and Title	Average		Position					Reportable	Reportable	Estimated		
	hours	(с	(check all tha			app	oly)	compensation	compensation	amount of		
	per week	ector						from the	from related organizations	other compensation		
	WOOK	ndividual trustee or director	88			Highest compensated employee	İ	organization	(W-2/1099-MISC)	from the		
		rustee	Institutional trustee		æ	mpen		(W-2/1099-MISC)		organization		
		idual	tution	, p	Key employee	est co	je j			and related organizations		
		μģ	Inst	Officer	Key	芸品				0.ga		
KELLY A. AYOTTE												
TRUSTEE	1.20	Х					L	0.	0.	0.		
JOSEPH P. CAMPANELLI							Г					
TRUSTEE	1.20	X			L			0.	0.	0.		
THE HONOR. CRAIG BENSON								_	_	_		
TRUSTEE	1.20	X		L	<u> </u>		<u> </u>	0.	0.	0.		
THOMAS J. BLISCHOK										_		
TRUSTEE	1.20	X				L_		0.	0.	0.		
WILLIAM G. BURRILL	1 00									•		
TRUSTEE	1.20	X	_					0.	0.	0.		
KAREN K. CHANDOR	1 20		ŀ							0		
TRUSTEE STEPHEN D. CUTLER	1.20	Х					_	0.	0.	0.		
TRUSTEE	1.20	х						0.	0.	0.		
WILLIAM BYGRAVE	1.20	Δ						V •	0.	0.		
TRUSTEE	1.20	х						36,715.	0.	0.		
ANTHONY R. CHIASSON	1.20	23	-					50,715.	0.			
TRUSTEE	1.20	х						0.	0.	0.		
THOMAS F. GILBANE, JR												
TRUSTEE	1.20	х						0.	0.	0.		
GLORIA M. GUTIERREZ				\neg								
TRUSTEE	1.20	Х						0.	0.	0.		
MUHAMMAD H. HABIB												
TRUSTEE	1.20	X						0.	0.	0.		
BRUCE T. HERRING												
TRUSTEE	1.20	X						0.	0.	0.		
N. LYLE HOWLAND			ı		ı			_	_	_		
TRUSTEE	1.20	X			_			0.	0.	0.		
ANN B. HUTCHINS	4 00		l	ĺ	- 1					•		
TRUSTEE	1.20	Х		_		_		0.	0.	0.		
ESTEFANO E. ISAIAS, SR.	1 2	,,							_	0		
TRUSTEE	1.20	Х	_	_	_		_	0.	0.	0.		
THEODORE A CLARK	1 20	. l						_	۱ ۸	^		
TRUSTEE	1.20	X						0.	0.	0.		

832007 12-18-08

Form 990 (2006) DABSON C									04-2103	744 Page 6	
Part VII Section A. Officers, Directors, Tr	ustees, Key E	mple	оуес	es, a	ınd	High	nes	t Compensated Employ	yees (continued)		
(A)	(B)			(0	C)			(D)	(E)	(F)	
Name and title	Average			Pos	ition	1		Reportable	Reportable	Estimated	
		, ,				app	oly)	compensation	compensation	amount of	
	per week	cto						from the	from related organizations	other compensation	
	Week	or dire			l	pet		organization	(W-2/1099-MISC)	from the	
		stee	truste		l a	pens		(W-2/1099-MISC)	(**************************************	organization	
		ual tri	jonal		Pg o	t co a				and related	
		Individual trustee or director	Institutional trustee	Officer	Кеу етріоуее	Highest compensated employee	Former			organizations	
ERIC G. JOHNSON		╁	 		<u> </u>	\vdash	╁╴				
TRUSTEE	1.20	X						0.	0.	0.	
KATHRYN D. KARLIC, CFA						Ī	П				
TRUSTEE	1.20	X				<u> </u>		0.	0.	0.	
CLEVE L. KILLINGSWORTH											
TRUSTEE	1.20	X						0.	0.	0.	
PAUL W. CHISHOLM								_	_	_	
TRUSTEE	1.20	X		<u> </u>				0.	0.	0.	
DAVID F. LAMERE											
TRUSTEE	1.20	X		L		<u></u>	<u> </u>	0.	0.	0.	
ANDRONICO LUKSIC	1						l		_		
TRUSTEE	1.20	Х		<u> </u>	ļ		<u> </u>	0.	0.	0.	
DR. MYRA M. HART	1 20	,,									
TRUSTEE	1.20	X				ļ	<u> </u>	0.	0.	0.	
WILLIAM F. MARKEY, JR	1.20	x						0.	0.	0	
TRUSTEE STEVEN A. GAKLIS	1.20	^				_		0.	0.	0.	
TRUSTEE	1.20	х						0.	0.	0.	
DR. RICHARD K. MILLER	1.20	^				-	\vdash	0.	0.	0.	
TRUSTEE	1.20	X						0.	0.	0.	
.11. 42 . 1							<u> </u>	5,537,717.	0.	574,370.	
2 Total number of individuals (including thos						n \$1	00		0 •]	3, 1, 3, 0 .	
compensation from the organization	·								•	146	
Compensation from the organization								·····	***************************************	Yes No	

compensation from the organization

146

Yes No

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

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

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
	Description of services	Compensation
BIGELOW & FLEMING, LLC		
14 NORFOLK AVENUE, EASTON, MA 02375	CONSTRUCTION	307,745.
WATERTOWN FLOOR COVERING, LLC		
P O BOX 204, WATERTOWN, MA 02471	FLOORING SERVICES	293,896.
BANC OF AMERICA LEASING & CAPITAL LLC		
ONE FINANCIAL PLAZA , PROVIDENCE, RI 02903	FINANCIAL LEASING	223,799.
PRICEWATERHOUSECOOPERS, LLP		
P O BOX 7247-8001, PHILADELPHIA, PA 19170	EXTERNAL AUDITOR	193,279.
INTERPRO SOLUTIONS, LLC, 301 NORTH AVE.		
2ND FLOOR, WAKEFIELD, MA 01880	CONSULTING FIRM	192,321.
2 Total number of independent contractors (including those in 1) who received mo	ore than \$100,000 in compensation	
from the organization 10		

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

rm 9				טעע				04-2103	544 Pag
art	VII	I Statement of Reve	nue						
						(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded fro tax under sections 51 513, or 514
and other similar amounts	1 a	Federated campaigns		-					
₫		Membership dues	_	_					
티	С	Fundraising events		_	61,225.				
蔨	d	Related organizations							
Ē	е	Government grants (contribu	tions) 1	e 8	70,077.				
9	f	All other contributions, gifts, gran							
		similar amounts not included abo	ove1	f 22	466387.				
2		Noncash contributions included in lines				00000000			
<u></u>	h	Total. Add lines 1a-1f				23397689.			1 5 m
					Business Code		116060056		
1 2	2 a	TUITION & FEES				116260956.			
의			T 717 7		900099		18974519.		
5		ED/NON-ED PROG.			900099	18743190.		640 606	
9		OTHER ED PROG/A			713990	642,696.		642,696.	
Revenue		OTHER ED PROG/A			721000	158,889.		158,889.	
		All other program service reve				154780250.			
+	_	Total. Add lines 2a-2f				134/60230.			
1 3	3	Investment income (including				2 276 400		149,324.	212716
Ι.		other similar amounts) Income from investment of ta				2,276,490.		149,324.	20,25
4			•	•		20,232.			40,43
5	•	Royalties	(i) Rea			EXPENSION AND A SEC	STATE OF THE BOOK	NAMES AND THE PARTY.	
_ ا		Gross Rents	12183	3 3	(ii) Personal				
١٠	3 a	Gross Rents	12103	٠,٠					
	b	Less: rental expenses	12183	2 2					
		Net rental income or (loss)				1,218,333.			121833
١,		Gross amount from sales of	(i) Securi		(ii) Other	1,210,333.			121033
'	a	assets other than inventory	76261						
	h	Less: cost or other basis	70201	000					
	-		84374	558					
	c	Gain or (loss)	-8112	750					
	ď	Net gain or (loss)				-8112750.			-811275
8		Gross income from fundraising					-7-2-10-2-2-2-2		
	_	including \$ 61,2							
		contributions reported on line							
		Part IV, line 18		а	35,380.				
0	b	Less: direct expenses			48,470.				
		Net income or (loss) from fund				-13,090.			-13,09
9	а	Gross income from gaming ac	tivities. See	, [
		Part IV, line 19			30,380.				
	b	Less: direct expenses		_ b[22,317.				
İ	С	Net income or (loss) from gam	ing activitie	s		8,063.	8,063.		
10	a	Gross sales of inventory, less	returns						
		and allowances		. a					
	b	Less: cost of goods sold		. b[
	С	Net income or (loss) from sales	s of invento	ry	>	TO MENTSWELL STUDIES.			an 4
		Miscellaneous Revenu		I	Business Code				
11	а	NET GAIN-FINANC	ING	_ [900099	741,198.	302	200 - 601 - 1	741,19
	b			ļ					
	С			[
	d	All other revenue		[
	е	Total. Add lines 11a-11d				741,198.		West that said and	
		Total Revenue. Add lines 1h, 2g, 3, 4		0- 40-	and tto	1 7 4 3 1 6 4 3 5 . 1	L53986728.	950 909.I	-4018891

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Part IX | Statement of Functional Expenses

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

	All other organizations must com				
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and				
	organizations in the U.S. See Part IV, line 21				
2	Grants and other assistance to individuals in	05 560 055	05 560 055		
	the U.S. See Part IV, line 22	25,562,877.	25,562,877.		
3	Grants and other assistance to governments,				
	organizations, and individuals outside the U.S.				
	See Part IV, lines 15 and 16		ļ	NA ERMORENTEN	
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	2 266 220	700 040	2 154 524	410 450
_	trustees, and key employees	3,366,220.	792,240.	2,154,524.	419,456
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and	244 224	102 446	E1 000	
	persons described in section 4958(c)(3)(B)	244,334.	192,446. 53,318,346.		2,312,541
7	Other salaries and wages	01,/31,/30.	33,310,340.	0,140,003.	4,314,341
8	Pension plan contributions (include section 401(k)	1 520 614	3,894,609.	452,861.	181,144
_	and section 403(b) employer contributions)				294,581
9	Other employee benefits	4,117,538.	6,333,488.		164,701
10	Payroll taxes	4,111,330.	3,341,003.	411,/34.	104,/01
11	Fees for services (non-employees):				
_	Management	179,808.		179,808.	
b	Legal	154,791.		154,791.	
	Accounting	134,751.		134,791	
	Lobbying Professional fundraising services. See Part IV, line 17				
e f	Investment management fees				#
g	Other				
12	Advertising and promotion	2,412,898.	2,309,357.	103,541.	
13	Office expenses	5,983,365.	4,531,326.	1,195,838.	256,201
14	Information technology	6,678,376.	6,290,296.	362,036.	26,044
15	Royalties	0,0.0,0.0	0,200,200	332,0331	
16	Occupancy	7,311,869	7,185,403.	95,613.	30,853
7	Travel	4,928,514.		1,128,248.	325,480
	Payments of travel or entertainment expenses	, ,			,
	for any federal, state, or local public officials				
9	Conferences, conventions, and meetings	1,291,710.	1,210,370.	69,987.	11,353
20	Interest	6,370,875.	6,370,875.		
21	Payments to affiliates		1	· · · · · · · · · · · · · · · · · · ·	
2	Depreciation, depletion, and amortization	9,582,137.	9,416,404.	125,300.	40,433
3	Insurance				
-	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.)				
	FOOD & BEVERAGE SERVICE	7,476,202.	7,476,202.		
	OTHER EXPENSES	5,338,177.	2,239,640.	3,085,448.	13,089
	PROFESSIONAL CONSULTING	3,060,018.	2,511,964.	525,427.	22,627
	ROOM, CONF. & ADMIN.	2,663,836.	2,663,836.		
	PURCHASED SERVICES	1,849,336.	574,370.	1,274,966.	
f	All other expenses				
		172,217,772.	149,889,918.	18,229,351.	4,098,503
	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			21	
	educational campaign and fundraising solicitation				
	12-18-08	<u> </u>			Form 990 (2008

					(A) Beginning of year		(E End o		
	т.				34,955,254	+-	42,75		
	1	Cash - non-interest-bearing			34,333,234	1 2	44,15	, ,	**3
	2	Savings and temporary cash investments	22,716,880		31,89	16	263		
	3	Pledges and grants receivable, net	6,583,573		5,19				
	4	Accounts receivable, net Receivables from current and former officers, dir			0,303,373	+	3,12	- F	100
	5					_			
		employees, or other related parties. Complete Pa				5			
	6	Receivables from other disqualified persons (as a							
		4958(f)(1)) and persons described in section 495 Part II of Schedule L				6			
"	7	Part II of Schedule L Notes and loans receivable, net	3,910,189.		4,00	7.	522		
Assets	1		3,310,103.	8	1,00	, , , ,	,		
As	9	Inventories for sale or use			2,996,867		3,61	6.3	382
		Land, buildings, and equipment: cost basis	10a	298,327,806.		1 1			, , ,
	1	Less: accumulated depreciation. Complete	IUa	230/32//000.					
	"	Part VI of Schedule D	10h	161 966 398.	141 783 852	100	136.36	1 4	108
	11	Investments - publicly traded securities			152,186,736	111	117,00	9.8	309
	12	Investments - other securities. See Part IV, line 1			64,189,786.		55,25		
	13	Investments · program-related. See Part IV, line 1				13	00,1		
	14	Intangible assets				14			
	15	Other assets. See Part IV, line 11			3,331,242.		2,58	5.0)43.
	16	Total assets. Add lines 1 through 15 (must equa			432,654,379.		398,68		
	17	Accounts payable and accrued expenses			14,824,398.		14,04		
	18	Grants payable		18					
	19	Deferred revenue	12,188,283.		12,02	1.3	396.		
	20	Tax-exempt bond liabilities	95,042,195.		92,74				
w	21	Escrow account liability. Complete Part IV of Sch		21	,	, -			
Liabilities	22	Payables to current and former officers, directors		DE ST					
펿	-	highest compensated employees, and disqualifie							
Ë		of Schedule L		22		4			
	23	Secured mortgages and notes payable to unrela			29,840,000.		29,17	5,0	00.
	24			,		24			***************************************
	25	Other liabilities. Complete Part X of Schedule D		11,678,900.	25	15,82	9,3	80.	
	26	Total liabilities. Add lines 17 through 25			163,573,776.		163,81	6,0	88.
		Organizations that follow SFAS 117, check he				8 7			NEW YEAR
S		lines 27 through 29, and lines 33 and 34.							
nces	27	Unrestricted net assets			111,325,956.				
ala	28	Temporarily restricted net assets			77,894,715.	28	52,33		
8	29				79,859,932.	29	91,03	0,0	27.
Net Assets or Fund Bala		Organizations that do not follow SFAS 117, ch						4	-3.57
₽		complete lines 30 through 34.							
ets	30	Capital stock or trust principal, or current funds		*************		30			
SS	31	Paid-in or capital surplus, or land, building, or equ	uipme	nt fund		31	,		
et/	32	Retained earnings, endowment, accumulated inc	ome,	or other funds		32			
Ž	33	Total net assets or fund balances		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	269,080,603.		234,86		
	34	Total liabilities and net assets/fund balances			432,654,379.	34	398,68	5,1	91.
Pai	rt XI	Financial Statements and Reporting							
	3.6				_			Yes	No
1	Acco	unting method used to prepare the Form 990: $\;\; igsqcup$	Ca	ash X Accrual	Other				
2a	Were	the organization's financial statements compiled	or revi	iewed by an independent a	accountant?		2a		X
b	Were	the organization's financial statements audited by	an in	dependent accountant?			2b	X	_
С	If "Yes" to lines 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit,								
		w, or compilation of its financial statements and se						_X	<u></u>
3a		result of a federal award, was the organization req							
		nd OMB Circular A-133?			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			X	
b	If "Ye	s." did the organization undergo the required audi	t or au	udits?				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

Open to Public Inspection

Name of the organization

Employer identification number

		BABSON	COLLEGE						04	<u>-2103</u>	544	
Part I	Reason	for Public Cha	arity Status (All organi	izations m	ust comple	te this pa	rt.) (see ins	structions)				
The orga 1	A church, co A school de A hospital of A medical re	onvention of church scribed in section r a cooperative hos search organization	n because it is: (Please c nes, or association of chu 170(b)(1)(A)(ii). (Attach So pital service organization n operated in conjunction	rches des chedule E. described	cribed in se) I in section	ection 170 n 170(b)(1	(A)(iii). (A	ttach Sch		ne hospital	's nam	10,
5	section 170 A federal, st An organizar section 170 A communit An organizar activities rela income and See section An organizar An organizar more publicl	tion operated for the D(b)(1)(A)(iv). (Compate, or local governation that normally referred to its exempt from the compated to its exempt from the compated to its exempt from the compated to its exempt from organized and the companized and the companized and the companized organized and the companized organized organized and the companized organized organized organized organized and the companized organized	ment or governmental un eceives a substantial part elete Part II.) section 170(b)(1)(A)(vi). eceives: (1) more than 33 functions - subject to cert staxable income (less sec	nit describe t of its supplements (Complete 1/3% of it tain except ction 511 to est for publishe benefit tion 509(a)	ed in section and ax) from but lic safety. of, to perf(1) or sections.	on 170(b)(a government of the control of the contro	1)(A)(v). ental unit of ributions, r e than 33 acquired to on 509(a)(- inctions of	or from the membersh 1/3% of it by the org. 4). (see in:	e general p ip fees, and s support fi anization at structions) ry out the p	ublic desc d gross rec rom gross fter June 3 ourposes c	ceipts invest 80, 197	from ment '5.
ef	a Type By checking foundation n If the organiz	I b L this box, I certify the thin the	Type II nat the organization is no r than one or more public ritten determination from	c Typ t controlled ly supported the IRS th	oe III - Fund d directly o ed organiz at it is a Ty	ctionally in or indirectl ations des ope I, Type	y by one o scribed in s e II, or Type	section 50 e III	equalified po 9(a)(1) or so		ner tha	n
Ū	(i) A perso	on who directly or in	ndirectly controls, either a	lone or tog	gether with	persons	described	in (ii) and	(iii) below,		Yes	No
			supported organization?							11g(i)		
	-		on described in (i) above?									
			a person described in (i)									
h			n about the organizations									
	e of supported	(ii) EIN	(ill) Type of		organization	<u> </u>	ப notify the	(yl) !!	s the	(vii) Am	ount of	
	panization	(,	organization (described on lines 1-9 above or IRC section	governing	sted in your document?	(I) of you	tion in col. r support?	organizáti (i) organiz U.S	red in the i.?	sup		
			(see instructions))	Yes	No	Yes	No	Yes	No			
				_								
												
					y							
				ļ								
otal									* .			

Schedule A (Form 990 or 990-EZ) 2008

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

Pa	Support Schedule for (Complete only if you checke	-			0(b)(1)(A)(iv) ar	nd 170(b)(1)(A)(\	/i)
Se	ction A. Public Support	<i>*************************************</i>					
Cal	endar 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 organ-						
	ization's benefit and either paid to						
	or expended on its behalf			- Inches			
3	The value of services or facilities						
	furnished by a governmental unit to				1		
	the organization without charge						g.
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)						
	Public Support. Subtract line 5 from line 4.		Mark Mark 19				
	endar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
	America Angelo Book A	(a) 2004	(b) 2003	(0) 2000	(4) 2007	(6) 2000	(i) iotai
	Gross income from interest,						
G	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	j					
10	Other income. Do not include gain		i				
-	or loss from the sale of capital						
	assets (Explain in Part IV.)						
11	Total support. Add lines 7 through 10						
	Gross receipts from related activities,	etc. (see instructi	ons)			12	
13	First five years. If the Form 990 is for	the organization's	s first, second, th	ird, fourth, or fifth t	ax year as a section	on 501(c)(3)	
	organization, check this box and stop	here					▶□
Sec	ction C. Computation of Publ	c Support Pe	rcentage				
14	Public support percentage for 2008 (I	ine 6, column (f) di	ivided by line 11,	column (f))			%
	Public support percentage from 2007						<u>%</u>
16a	33 1/3% support test - 2008. If the o	-					
	stop here. The organization qualifies						
b	33 1/3% support test - 2007. If the o	_					
	and stop here. The organization quali						
17a	10% -facts-and-circumstances test						
	and if the organization meets the "fac		•	•	•	•	
	meets the "facts-and-circumstances"						
b	10% -facts-and-circumstances test						0% or
	more, and if the organization meets th				•		
	organization meets the "facts-and-circ		•	•		***************************************	> -
18	Private foundation. If the organization	n did not check a l	box on line 13, 16	ia, 16b, 17a, or 17	b, check this box a	and see instructions	

Schedule A (Form 990 or 990-EZ) 2008

Sch	edule A (Form 990 or 990-EZ) 2008 art III Support Schedule for C	<u>Tranizations</u>	Described in	Section 509/a	1/2) (Complete onl	wif you abacked the b	Page 3
	ction A. Public Support	nyamzauons	Described in	Section sosta	(Complete on	y if you checked the b	ox on line 9 of Part I
	endar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
	• , , ,	(a) 2004	(b) 2005	(6) 2006	(a) 2007	(e) 2006	(1) TOTAL
1	Gifts, grants, contributions, and membership fees received. (Do not						
	include any "unusual grants.")						
_							
2	Gross receipts from admissions, merchandise sold or services per- formed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that						
	are not an unrelated trade or bus-						
	iness under section 513	:					
4	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf	<u> </u>					
5	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge	Į					
6	Total. Add lines 1 · 5						
7 <i>a</i>	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						_
t	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						
	Add lines 7a and 7b						
	Public support (Subtract line 7c from line 6.)						
	ction B. Total Support				111111111111111111111111111111111111111		
Cal	endar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
9	Amounts from line 6						***************************************
10 <i>a</i>	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.)						
	First five years. If the Form 990 is for	the organization's	first, second, thir	d, fourth, or fifth ta	ax year as a secti	on 501(c)(3) organiz	ation,
	check this box and stop here						>
Sec	ction C. Computation of Publi	c Support Per	rcentage				
15	Public support percentage for 2008 (li	ne 8, column (f) di	vided by line 13, o	column (f))		15	%
	Public support percentage from 2007					16	%
Sec	tion D. Computation of Inves	tment Income	e Percentage				
17	Investment income percentage for 200	38 (line 10c, colum	nn (f) divided by lir	ne 13, column (f))		17	%
	Investment income percentage from 2					18	%
19a	33 1/3% support tests - 2008. If the	organization did n	ot check the box	on line 14, and line	15 is more than	33 1/3%, and line 1	7 is not
	more than 33 1/3%, check this box ar	id stop here. The	organization quali	fies as a publicly s	supported organiz	ation	▶□
b	33 1/3% support tests - 2007. If the	organization did n	ot check a box on	line 14 or line 19a	, and line 16 is m	ore than 33 1/3%, a	ind
	line 18 is not more than 33 $1/3\%$, chec		-				
20	Private foundation. If the organization	n did not check a l	box on line 14, 19	a, or 19b, check th	is box and see in	structions	>

Schedule A (Form 990 or 990-EZ) 2008

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

Open to Public Inspection

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

► To be completed by organizations described below.

Attach to Form 990 or Form 990-EZ.

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

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

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

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

 If the organization answered "Ye Section 501(c)(4), (5), or (6) org 	es," to Form 990, Part IV, line 5 (Prox panizations: Complete Part III	xy Tax), then		
Name of organization	garizationo: Complete r are im		Emp	oloyer identification numbe
BABS	ON COLLEGE			04-2103544
	ed by all organizations exem	npt under section	n 501(c) and section 5	27 organizations.
See the instruction	s for Schedule C for details.			
1 Provide a description of the o	organization's direct and indirect politi	cal campaign activitie	s in Part IV.	
				\$
Doubl B. To be complete	ed by all organizations exem	ent under coetie	n F01/a\/2\	
	s for Schedule C for details.	ipi under section	11 30 1(0)(3).	
1 Enter the amount of any exci-	se tax incurred by the organization un	der section 4955	>:	\$
2 Enter the amount of any exci-	se tax incurred by organization manag	ers under section 49	55	\$
	section 4955 tax, did it file Form 4720			
4a Was a correction made?				Yes No
b If "Yes," describe in Part IV.				
Part I-C To be complet	ed by all organizations exem	npt under sectio	n 501(c), except section	on 501(c)(3).
See the instruction	s for Schedule C for details.			
1 Enter the amount directly exp	ended by the filing organization for se	ection 527 exempt fur	nction activities > 9	<u> </u>
2 Enter the amount of the filing	organization's funds contributed to o	ther organizations for	section 527	
exempt function activities			> \$	B
3 Total of direct and indirect ex	empt function expenditures. Add lines	s 1 and 2 and enter h		
	Form 1120-POL for this year?			
	and employer identification number (E			
	dicate if the amount was paid from the			
	ed to a separate political organization,	such as a separate s	egregated fund or a political	action committee (PAC).
if additional space is needed,	provide information in Part IV.		1	T
(a) Name	(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political contributions received and
			filing organization's funds. If none, enter -0	1
			Tariao. Il riorio, oritor o .	delivered to a separate
				political organization. If none, enter -0
				ii iiono, enter o .

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

Schedule C (Form 990 or 990-EZ) 2008

Schedule C (Form 990 or 990-EZ) 2008

Part II-B To be completed by organizations exempt under section 501(c)(3) that have NOT filed Form 5768 (election under section 501(h)). See the instructions for Schedule C for details.

		(a) [(t))
		Yes	No	Amo	ount
1	During the year, did the filing organization attempt to influence foreign, national, state or				
	local legislation, including any attempt to influence public opinion on a legislative matter		. 67		
	or referendum, through the use of:				
а	Volunteers?		Х		
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?		X		
C	Media advertisements?		X		
d	Mailings to members, legislators, or the public?		X		
е	Publications, or published or broadcast statements?		X		
f	Grants to other organizations for lobbying purposes?		X		
g	Direct contact with legislators, their staffs, government officials, or a legislative body?		X		
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means?		X		
i.	Other activities? If "Yes," describe in Part IV	X	homounios.) = (1) = (1 = (1) = (1)	1.
j	Total lines 1c through 1i				1.
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		X		
b	If "Yes," enter the amount of any tax incurred under section 4912		WEST HOLD		
	If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
Part	III-A To be completed by all organizations exempt under section 501(c)(4)	section	501(c)(5),	or sect	ion
	501(c)(6). See the instructions for Schedule C for details.				
				Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?		1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		2		
	Did the organization agree to carryover lobbying and political expenditures from the prior year?				1-constraints
Part	III-B To be completed by all organizations exempt under section 501(c)(4),				ion
	501(c)(6) if BOTH Part III-A, questions 1 and 2 are answered "No" OR	if Part III	-A, quest	tion 3 is	
	answered "Yes." See Schedule C instructions for details.				
	Dues, assessments and similar amounts from members		1		
	Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of politi	cal			
	expenses for which the section 527(f) tax was paid).				
	Current year				
	Carryover from last year				
	Total				
	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3		
	f notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exc				
	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and p	olitical			
	expenditure next year?		4		
_	Faxable amount of lobbying and political expenditures (line 2c total minus 3 and 4)		5		
Part					
•	ete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; an	d Part II-B, li	ne 1i. Also,	complete	this part
つと つわい					
	additional information.				
	r II-B, LINE 1(I), OTHER LOBBYING ACTIVITIES:				
PAR'		IZATIO	NS WHI	CH MA	Y
'AR'	F II-B, LINE 1(I), OTHER LOBBYING ACTIVITIES: ORGANIZATION PAYS MEMBERSHIP DUES TO MEMBER ORGAN				
PAR'	r II-B, LINE 1(I), OTHER LOBBYING ACTIVITIES:				
PAR'	F II-B, LINE 1(I), OTHER LOBBYING ACTIVITIES: ORGANIZATION PAYS MEMBERSHIP DUES TO MEMBER ORGAN				

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.

2008
Open to Public Inspection

Name of the organization

Employer identification number

	BABSON COLLEGE		U4-21U3544
Pa	rt I Organizations Maintaining Donor Advised	l Funds or Other Similar Fund	s 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 w	riting that the assets held in donor advi	sed funds
	are the organization's property, subject to the organization's e		
6	Did the organization inform all grantees, donors, and donor ad	visors in writing that grant funds may b	e used only
	for charitable purposes and not for the benefit of the donor or	donor advisor or other impermissible pr	rivate benefit? Yes No
Pa	rt II Conservation Easements. Complete if the orga		
1	Purpose(s) of conservation easements held by the organization		
	Preservation of land for public use (e.g., recreation or ple		storically important land area
	· · · · ·	· —	
	Protection of natural habitat	Preservation of certif	ied historic structure
	Preservation of open space		
2	Complete lines 2a-2d if the organization held a qualified conse	rvation contribution in the form of a cor	servation easement on the last day
	of the tax year.		
			Held at the End of the Year
а	Total number of conservation easements		2a
b			
	and the second s		
C			
đ	Number of conservation easements included in (c) acquired af		
3	Number of conservation easements modified, transferred, release	ased, extinguished, or terminated by th	e organization during the taxable
	year >		
4	Number of states where property subject to conservation ease	ement is located >	
5	Does the organization have a written policy regarding the period	odic monitoring, inspection, violations, a	and
	enforcement of the conservation easements it holds?		
6	Staff or volunteer hours devoted to monitoring, inspecting, and		
7	Amount of expenses incurred in monitoring, inspecting, and er		
	Does each conservation easement reported on line 2(d) above		
8	·		
	and section 170(h)(4)(B)(ii)?		
9	In Part XIV, describe how the organization reports conservation	·	
	include, if applicable, the text of the footnote to the organization	on's financial statements that describes	the organization's accounting for
	conservation easements.		
Pa	rt III Organizations Maintaining Collections of	Art, Historical Treasures, or C	ther Similar Assets.
	Complete if the organization answered "Yes" to Form 99	90, Part IV, line 8.	
10	If the organization elected, as permitted under SFAS 116, not t	to report in its revenue statement and h	alance sheet works of art, historical
ıa	treasures, or other similar assets held for public exhibition, edu	•	
			iblic service, provide, in Fart Arv, the text of
	the footnote to its financial statements that describes these ite		
b	If the organization elected, as permitted under SFAS 116, to re	port in its revenue statement and balar	nce sheet works of art, historical treasures,
	or other similar assets held for public exhibition, education, or r	research in furtherance of public service	e, 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 treas		ı gan, provide
	the following amounts required to be reported under SFAS 116	_	
а	Revenues included in Form 990, Part VIII, line 1		
b	Assets included in Form 990, Part X		> \$
LHA	For Privacy Act and Paperwork Reduction Act Notice, see the	he Instructions for Form 990.	Schedule D (Form 990) 2008

Pa	rt III Organizations Maintaining C	Collections of A	t, His	torical Tr	easures,	or Othe	r Simil	ar Ass	ets (cont	inued)
3	Using the organization's accession and other	r records, check any	of the	following tha	at are a signi	ficant use	of its col	lection it	ems (che	ck all	
	that apply):										
а	Public exhibition	d		Loan or exc	hange progr	rams					
b	Scholarly research	е		Other							
С	Preservation for future generations										
4	Provide a description of the organization's continuous	ollections and explair	n how t	hey further t	he organizat	tion's exer	npt purpo	ose in Pa	ırt XIV.		
5	During the year, did the organization solicit of	or receive donations o	of art, h	istorical trea	sures, or oth	ner similar	assets	_	_		_
	to be sold to raise funds rather than to be m	aintained as part of t	he orga	anization's co	ollection?			L	Yes		<u>No</u>
Pa	rt IV Trust, Escrow and Custodia reported an amount on Form 990, Pa		. Comp	lete if organ	ization answ	ered "Yes	s" to Form	1990, Pa	art IV, line	9, or	
1a	Is the organization an agent, trustee, custod	ian or other intermed	liary for	contribution	ns or other a	ssets not	included				
	on Form 990, Part X?							E	Yes		No
b	If "Yes," explain the arrangement in Part XIV										
	, ,	·							Amoun	t	
С	Beginning balance						1c				
d	Additions during the year						1 1				
е	Distributions during the year										
f	Ending balance										
2a	Did the organization include an amount on F								Yes		No
	If "Yes," explain the arrangement in Part XIV										
Pa	rt V Endowment Funds. Complete	f organization answe	red "Ye	es" to Form 9	990, Part IV,	line 10.					
		(a) Current year	(b)	Prior year	(c) Two year	rs back ((d) Three y	ears back	(e) Fou	r years	back
1a	Beginning of year balance	216376522.									
b	Contributions	4,043,573.									
c	Investment earnings or losses	-38842574.									
d	Grants or scholarships	-2143564.	E E								
е	Other expenditures for facilities										
	and programs	-8409675.									
f	Administrative expenses		NIV-5								
g	End of year balance	171024282.									更复为
2	Provide the estimated percentage of the year	r end balance held a	s:		AMILIAN =				7.757		
а	Board designated or quasi-endowment	39.00	%								
b	Permanent endowment ► 61.00	%	_								
c	Term endowment ▶										
За	Are there endowment funds not in the posse	ssion of the organiza	ation th	at are held a	nd administ	ered for th	ne organiz	ation			
	by:									Yes	No
	(i) unrelated organizations	***************************************							3a(i)		X
	(ii) related organizations								. 3a(ii)		X
b	If "Yes" to 3a(ii), are the related organizations										
4	Describe in Part XIV the intended uses of the	e organization's endo	wment	funds.							
Pa	t VI Investments - Land, Building	s, and Equipme	nt. S	e Form 990	, Part X, line	10.			*****		
	Description of investment	(a) Cost or ot basis (investm		(b) Cost basis	or other (other)	(c) De	epreciatio	n	(d) Boo	k valu	е
1a	Land				9,673.						73.
b	Buildings				5,289.	121,2	68,8	21.12	17,90	6,4	68.
c	Leasehold improvements			-							
d	Equipment			28,70	7,863.	27,4	32,13	16.	1,27	5,7	47.
	Other				4,981.				6,68	9,5	20.
	Add lines 1a-1e (Column (d) should equal Fo		mn (R)		········ · ···········		······································		36,36		

Part VII Investments - Other Securities. See	ə Form 990, Part X, li	ne 12.		
(a) Description of security or category (including name of security)	(b) Book value		(c) Method of valua	
Financial derivatives and other financial products	:			
Closely-held equity interests				
Other				
ALTERNATIVE INVESTMENTS	55,255,83	31. END-OF-Y	EAR MARKET	VALUE
	-			
Total. (Col (b) should equal Form 990, Part X, col (B) line 12.)	55,255,83	31.		TO WELL WEST AND STREET
Part VIII Investments - Program Related. Se				
	(b) Book value		(c) Method of valua	
(a) Description of investment type	(b) BOOK Value	Co	st or end-of-year mar	
Total. (Col (b) should equal Form 990, Part X, col (B) line 13.)				
Part IX Other Assets. See Form 990, Part X, line	15			
	Description			(b) Book value
Tatal (Calumn (b) should equal Form 990, Part Y, col (B) lin	151		>	
Total. (Column (b) should equal Form 990, Part X, col (B) line Part X Other Liabilities. See Form 990, Part X, li				
(a) Description of liability	110 23.	(b) Amount		
Federal income taxes				
GOVERNMENT ADVANCES FOR STUDEN	NT LOANS	2,934,689.		
MARKET VALUE OF INTEREST RATE				
CONTRACTS		12,894,691.		
Total (Column (b) should equal Form 990, Part X, col (B) line	-05)	15,829,380.		
L otal (Column In) snould edual Form 990. Part X. col (B) line	e 25) → t	TD.047.300 •1		

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. 832053 12-23-08

PART XII, LINE 2D - OTHER ADJUSTMENTS:

SCHEDULE E

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

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

Employer identification number

	BABSON COLLEGE 04-	-2103	3544	1
			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	Х	
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	
	BABSON COLLEGE PROHIBITS DISCRIMINATING ON THE BASIS OF RACE,	1888		
	COLOR, NATIONAL, OR ETHNIC ORIGIN, RELIGION, SEX, LIFESTYLE,			12.5
	SEXUAL ORIENTATION PREFERENCE, AGE, HANDICAP, OR VETERAN			
	STATUS.THIS POLICY IS PUBLISHED IN FACULTY & STAFF HANDBOOK.			
4	Does the organization maintain the following?			
а			X	
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	4b	X	
С	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student			
	admissions, programs, and scholarships?	. 4c	X	<u> </u>
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.)			
			12. 3	
5	Does the organization discriminate by race in any way with respect to:			77
	Students' rights or privileges?		<u> </u>	X
b	Admissions policies?	. <u>5b</u>	ļ	X
	Employment of faculty or administrative staff?		╄	X
	Scholarships or other financial assistance?		 	
e	Educational policies?		 	X
T	Use of facilities?			X
	Athletic programs?		-	X
n	Other extracurricular activities?	5h	The second	Λ
	If you answered "Yes" to any of the above, please explain. (If you need more space, attach a separate statement.)			
			Dies	1000

Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," attach an explanation LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

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

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

Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of

If you answered "Yes" to either line 6a or line 6b, please explain using an attached statement.

Schedule E (Form 990 or 990-EZ) 2008

STATEMENT 1

6b

X

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.

2008
Open to Public Inspection

Name of the organization

Employer identification number

Name of the organization						
BABSON COLLEGE					04-210354	
		ctivities Ou	tside the United States. Comp	lete if the organ	nization answered "	Yes"
grantees' eligibility for the	s the organization ne grants or assis	stance, and the	ds to substantiate the amount of the g	ants or assistar	nce?	Yes No
			procedures for monitoring the use of	grant lunus out	Side the Officed Sta	165.
3 Activities per Region. (L (a) Region	(b) Number of offices in the region		(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	is a pro- describe	vity listed in (d) gram service, e specific type ce(s) in region	(f) Total expenditures in region
CENTRAL AMERICA AND THE CARIBBEAN	0	0	FUNDRAISING/ALUMNI RELATIONS			0.
CENTRAL AMERICA AND THE CARIBBEAN	0	0	PROGRAM SERVICES	STUDENT STU PROGRAMS	DY ABROAD	0.
EAST ASIA AND THE PACIFIC	0	0	FUNDRAISING/ALUMNI RELATIONS			0.
EAST ASIA AND THE	0	0	PROGRAM SERVICES	EXECUTIVE E	DUCATION	0.
EAST ASIA AND THE	0	0	PROGRAM SERVICES	STUDENT STU PROGRAMS	DY ABROAD	0.
EUROPE	0		FUNDRAISING/ALUMNI RELATIONS			0.
EUROPE	O	0	PROGRAM SERVICES	EXECUTIVE E	DUCATION	0.
EUROPE	0	0	PROGRAM SERVICES	STUDENT STU PROGRAMS	DY ABROAD	0.
Fotale >						

832071 12-18-08 Schedule F (Form 990) 2008

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

Schedule F (Form 990) 2008		BABSON COLLEGE			04-2103544	03544		Page 2
Part II Grants and Oth recipient who re	er Assistance to Org	Grants and Other Assistance to Organizations or Entities C recipient who received more than \$5,000. Check this box if no	Dutside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any one recipient received more than \$5.000	Complete if the or e than \$5.000	rganization answered	1 "Yes" to Form 9	190, Part IV, line 15, for	^
Use Schedule F	-1 (Form 990) if additi	Use Schedule F-1 (Form 990) if additional space is needed.	The state of the s]
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)
 Enter total number of organizations section 501(c)(3) equivalency letter Enter total number of other organizations 	Enter total number of organizations that are recogniz section 501(c)(3) equivalency letter Enter total number of other organizations or entities	re recognized as charitie	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. Enter total number of other organizations or entities	or which the grant	tee or counsel has pr	ovided a		

Schedule F (Form 990) 2008

29

BABSON COLLEGE

Schedule F (Form 990) 2008 BABSON COLLEGE

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.

Page 3

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

ı		1	1	5 m	I	I	1	1	8
(h) Method of valuation (book, FMV, appraisal, other)			; :						Schedule F (Form 990) 2008
(h) Mala valt (bool apprais									e F (Forn
of									Schedul
(g) Description of non-cash assistance									
(g) De non-cas									
at of sh									
(f) Amount of non-cash assistance									
ner of irsement									
(e) Manner of cash disbursement									
8									
ount of grant									
(d) Amc cash									
(c) Number of (d) Amount of recipients cash grant									
(c) Nr rec									
gion									
(b) Region				i i					
-									
ssistance									
rant or a									
(a) Type of grant or assistance									
(a)									

SCHEDULE F-1 (Form 990)

Department of the Treasury Internal Revenue Service

Continuation Sheet for Schedule F (Form 990)

➤ Attach to Form 990 to list additional information for Part I, line 3; Part II, line 1; or Part III.

OMB No. 1545-0047

2008
Open to Public Inspection

Name of the organization

BABSON COLLEGE

Employer identification number

04-2103544

Part I Continuati	on of Activitie		n. (Schedule F (Form 990), Part I, line	3)	
(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
MIDDLE EAST AND			FUNDRAISING/ALUMNI		
NORTH AFRICA	C	0	RELATIONS		0
NORTH AMERICA		0	PROGRAM SERVICES	EXECUTIVE EDUCATION	0
NORTH AMERICA	0	0	PROGRAM SERVICES	STUDENT STUDY ABROAD PROGRAMS	0
RUSSIA AND NEWLY					1
INDEPENDENT STATES	0	0	PROGRAM SERVICES	EXECUTIVE EDUCATION	0
RUSSIA AND NEWLY				STUDENT STUDY ABROAD	
INDEPENDENT STATES	0	0	PROGRAM SERVICES	PROGRAMS	0
			FUNDRAISING/ALUMNI		
SOUTH AMERICA	0	0	RELATIONS		0
SOUTH AMERICA		0	PROGRAM SERVICES	EXECUTIVE EDUCATION	0
SOUTH AMERICA		<u> </u>	I KOOKAN DIKVICID	Discours Booking on	
				STUDENT STUDY ABROAD	
SOUTH AMERICA	0	0	PROGRAM SERVICES	PROGRAMS	0
			FUNDRAISING/ALUMNI		
SOUTH ASIA	0	0	RELATIONS		0
				CONTRACTOR OF THE PROPERTY OF	
VARIOUS	0	0	PROGRAM SERVICES	STUDENT STUDY ABROAD PROGRAMS	0
-	/				
Totala					
Totals	-		No lockworkland for Farm 000	2	(Farm 000) 000

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

Schedule F-1 (Form 990) 2008

SCHEDULE F-1 (Form 990)

Continuation Sheet for Schedule F (Form 990)

► Attach to Form 990 to list additional information for Part I, line 3; Part II, line 1; or Part III.

OMB No. 1545-0047

2008 Open to Public

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

.

Employer identification number

04-2103544 BABSON COLLEGE Continuation of Activities per Region. (Schedule F (Form 990), Part I, line 3) Part (b) Number of (e) If activity listed in (d) (f) Total (a) Region (c) Number of (d) Activities conducted in region expenditures is a program service, offices employees or (by type) (i.e., fundraising, in region describe specific type program services, grants to in the region agents in region recipients located in the region) of service(s) in region EUROPE INVESTMENT 0. CENTRAL AMERICA AND INVESTMENT 0. THE CARIBBEAN 0 **Totals**

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

Schedule F-1 (Form 990) 2008

SCHEDULE G (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

► Attach to Form 990 or Form 990-EZ. Must be completed by organizations that answer "Yes" to Form 990, Part IV, lines 17, 18, or 19, and by organizations that enter more than \$15,000 on Form 990-EZ, line 6a.

OMB No. 1545-0047

2008

Open To Public Inspection

Name of the organization							ntification number
	N COLLEGE					04-2103	544
	es. Complete if the organization ans					7.	
b If "Yes," list the ten highest paid i	e Solicit f Solicit g Speci	tation of tation of al fundra lal (includ profess rsuant to	non-g gover aising ding o ional f o agre	overnment grants nment grants events fficers, directors, trus fundraising services? ements under which	stees the fi	Yes	
(i) Name of individual or entity (fundraiser)	(ii) Activity	(iii) fundr have co or con contribu	ustody trol of	(iv) Gross receipts from activity	to (o	Amount paid or retained by) fundraiser ted in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No				
3-M0-7-M-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1							
- Total							
3 List all states in which the organiza		t funds o	r has	been notified it is ex	empt	from registration	on or licensing.
				Western Co.			
· · · · · · · · · · · · · · · · · · ·							
the state of the s							

Schedule G (Form 990 or 990-EZ) 2008

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

04-2103544 Page 2 Schedule G (Form 990 or 990-EZ) 2008 BABSON COLLEGE Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 on Form 990-EZ, line 6a. List events with gross receipts greater than \$5,000. (c) Other Events (a) Event #1 (b) Event #2 (d) Total Events PRESIDENT'S NONE (Add col. (a) through col. (c)) (total number) (event type) (event type) 96,605 96,605. Gross receipts 61,225. 61,225 2 Less: Charitable contributions 35,380. 35,380 Gross revenue (line 1 minus line 2) Cash prizes Non-cash prizes Direct Expenses 41,155. 41,155. Rent/facility costs 7,315. 7,315. Other direct expenses 48,470.) Direct expense summary. Add lines 4 through 7 in column (d) -13,090. Net income summary. Combine lines 3 and 8 in column (d) Gaming. Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a. (d) Total gaming (Add (b) Pull tabs/Instant (c) Other gaming (a) Bingo Revenue bingo/progressive bingo col. (a) through col. (c)) 30,380. 30,380. Gross revenue 18,648. 18,648. 2 Cash prizes Direct Expenses 1,351. 1,351. Non-cash prizes Rent/facility costs 2,318 2,318. Other direct expenses % Yes Yes Yes No 6 Volunteer labor 22,317. Direct expense summary. Add lines 2 through 5 in column (d) 8,063. 8 Net gaming income summary. Combine lines 1 and 7 in column (d) Yes No Enter the state(s) in which the organization operates gaming activities: MA X a Is the organization licensed to operate gaming activities in each of these states? b If "No," Explain: X 10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? 10a b If "Yes," Explain:

Schedule G (Form 990 or 990-EZ) 2008

11

X

X

Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to

administer charitable gaming?

Does the organization operate gaming activities with nonmembers?

organization's own exempt activities during the tax year > \$

SCHEDULE I			Grants and	Other Assistance	Grants and Other Assistance to Organizations			OMB No.	OMB No. 1545-0047
			Governm	Governments, and Individuals in the U.S.	luals in the U.S.	•		<u>۳</u>	2008
Department of the Treasury Iternal Revenue Service		► Comple	► Complete if the organization	n answered "Yes," on F ▶ Attach to Form 990.	," on Form 990, Pa m 990.	ganization answered "Yes," on Form 990, Part IV, lines 21 or 22. ▶ Attach to Form 990.		Open t	Open to Public Inspection
Ē	BABSON COLLEGE	EGE						Employer identification number 04-2103544	lentification number 04-2103544
Part I General Inform	General Information on Grants and Assistance	ssistance							
1 Does the organization	Does the organization maintain records to substantiate the amount of	ibstantiate the	amount of the grants	or assistance, the	grantees' eligibility	y for the grants or ass	the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection	ction	
criteria used to awar	criteria used to award the grants or assistance?	200						X Yes	≗
2 Describe in Part IV th	Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.	ures for monito	pring the use of grant	funds in the United	d States.				
_	Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any	ernments and	Organizations in the	United States. C	complete if the orga	anization answered "	res" on Form 990, Par	t IV, line 21, for any	
recipient that r	recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Part IV and Schedule I-1 (Form 990) if additional space is needed	00. Check this	box if no one recipien	it received more th	ian \$5,000. Use Pa	art IV and Schedule I-	1 (Form 990) if additio	nal space is needed	
1 (a) Name and address of organization or government	ss of organization ment	(p)	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance	grant ce
									}
2 Enter total number o	Enter total number of section 501(c)(3) and government organizations	overnment org	anizations					A	
-1	Enter total number of other organizations							A	
-HA For Privacy Act and	For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.	n Act Notice, s	see the Instructions 1	for Form 990.				Schedule I (Form 990) 2008	m 990) 2008

04-2103544

Page 2

Schedule I (Form 990) 2008 BABSON COLLEGE

Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.

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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
INSTITUTIONAL GRANTS/SCHOLARSHIP	1164	25,562,877.	.0		
Part IV Supplemental Information. Complete this part to provide the		n required in Part I,	line 2, and any other	information required in Part I, line 2, and any other additional information.	
SCHEDULE I, PART I, LINE 2: THE PR	PROCEDURES	FOR	NEED-BASED AWARDS	DS INCLUDE	
REVIEW AND RESOLUTION OF ALL FEDERAL-	AL-PROCE	PROCESSOR-IDENTIFIED		ELIGIBILITY	
CONFLICTS, AND 100% VERFICATION OF	REPORTED	D PARENT AND		STUDENT INCOMES. FOR	
ALL FUNDS THERE IS A SEPARATION OF	THE	RDING AND	AWARDING AND DISBURSEMENT	NT FUNCTIONS	
(DIFFERENT INDIVIDUALS RESPONSIBLE	FOR	EACH), MONTHL	MONTHLY RECONCILIATIONS	IATIONS	
BETWEEN STUDENT ACCOUNTS AND THE COLL	COLLEGE'S	GENERAL LEDGER,	EDGER, AND	AN ANNUAL	
AUDIT IN ACCORDANCE WITH OMB CIRCULAR	JLAR A-133.	3.			

SCHEDULE I, PART III: THE CASH GRANT IS REFLECTED ON STUDENTS' ACCOUNTS.

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Schedule I (Form 990) 2008

SCHEDULE J (Form 990)

Compensation Information

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

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

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

BABSON COLLEGE

Questions Regarding Compensation

Employer identification number 04-2103544

			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 X 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		X
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	X	
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.		lisse.	
	Compensation committee Written employment contract			
	Independent compensation consultant X Compensation survey or study			
	Form 990 of other organizations Approval by the board or compensation committee	Mine See		
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a:		=0.5	
	Receive a severance payment or change of control payment?	4a	X	
	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		X
С	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		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	17.1		
	contingent on the revenues of:			
а	The organization?	5a	X	
b	Any related organization?	5b		Х
	If "Yes," to line 5a or 5b, describe in Part III.			
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the net earnings of:			
а	The organization?	6a		<u>X</u>
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		<u>X</u>
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

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

Schedule J (Form 990) 2008

BABSON COLLEGE Schedule J (Form 990) 2008

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

Note. The sum of columns (B)(i)-(iii) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a.

		(B) Breakdown of W-2		and/or 1099-MISC compensation	(c)	(D)	(E)	(F)
(A) Name		(i) Base compensation	(ii) Bonus & incentive	(iii) Other compensation	compensation	benefits	(B)(i)-(D)	reported in prior
			compensation					Form 990-EZ
i	Ξ	235,702.	0	45,777.	2,139.	40,000.	323,618.	0
LEONARD A. SCHLESINGER	Ξ		0.	0	0	0	0	0
i	(3)	226,80	0.	25,566.	20,262.	0	272,632.	0
SHAHID ANSARI	Ξ		0	0	0	0	0	0
	Ξ	160,43	0	14,081.	2,139.	1,335.	177,988.	0
ROBERT V. FOGEL	Ξ		0.			0	0	0
	Ξ	194,20	0.	5,987.	21,949.	226.	222,370.	0
MARY ROSE	≘		0.	0.		0.1	0	0
	≘	206,91	0	26,891.	25,562.	1,711.	261,075.	0
RICHARD VOOS	≘		0.		1 1	0	0	0
	\equiv	215,66	0.	42,390.	25,562.	8,155.	291,769.	0
PHILIP SHAPIRO	≘		0.		0	0	0	0
	Ξ	167,72	0	20,368.	19,471.	5,155.	212,716.	0
JONATHAN MOLL	≘		0.	0.	0	0	1	0
	Ξ	138,77	• 0	19,085.	16,338.	586.	174,781.	0
CAROL HACKER	8		0.			0	0.	0
	Ξ	205,36	0	31,570.	25,078.	20,771.	282,784.	0
DENNIS HANNO	Ξ		0.				0	0
	Ξ	145,66	0.	8,127.	15,506.	1,711.	171,009.	0
SHELLEY KAPLAN	≘					0		0
	Ξ	281,02	43,94	6,391.	25,562.	2,659.	359,579.	0.
ELAINE EISENMAN	掔							0
	Ξ	379,01	0	23,809.	13,236.	5,155.	421,218.	0
JAY RAO			0.	J				0.
	≘	364,58	0	24,282.	15,132.	8,659.	412,662.	0
JOSEPH WEINTRAUB	=		0					0
	Ξ	346,66	0	18,526.	14,102.	6,155.	385,452.	0
PATRICIA GUINAN		,	0.				1 1	0
, , , , , , , , , , , , , , , , , , ,	Ξ	318,94	0	26,275.	23,101.	2,659.	370,979.	0.
MAKK KICE	≘		0		- 1			0
ייייים על יווים אייים Ξ	308,65	0.	21,891.	25,562.	11,155.	367,264.	0	
DAKOV GREWAL		0	0	0	0.	0	0.	0
				•			Schedul	Schedule J (Form 990) 2008

Schedule J (Form 990) 2008

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

PART I, LINE 1A: FIRST-CLASS TRAVEL:

THE COLLEGE POLICIES ALLOW THE PRESIDENT TO TRAVEL FIRST-CLASS UNDER

CERTAIN CIRCUMSTANCES.

TRAVEL FOR COMPANIONS:

THE PRESIDENT'S SPOUSE TRAVELS WITH THE PRESIDENT TO CERTAIN ON OCCASION,

BABSON COLLEGE FUNDRAISING AND NETWORKING EVENTS TO ASSIST IN THESE

ACTIVITIES WHICH FURTHER THE MISSION OF THE COLLEGE.

HOUSING ALLOWANCE:

THE PRESIDENT AND THE DEAN OF THE UNDERGRADUATE SCHOOL ARE REQUIRED TO LIVE

IN CAMPUS HOUSING AS A CONDITION OF EMPLOYMENT FOR THE CONVENIENCE OF THE

BABSON COLLEGE. THE FAIR MARKET VALUE OF HOUSING IS INCLUDED AS A

NON-TAXABLE BENEFIT.

HEALTH OR SOCIAL CLUB:

THE PRESIDENT RECEIVES AN ANNUAL MEMBERSHIP TO A LOCAL COUNTRY CLUB. THE

VALUE ATTRIBUTABLE TO THE PRESIDENT'S NON-BUSINESS USE IS INCLUDED IN HIS

Schedule J (Form 990) 2008

Schedule J (Form 990) 2008

Complete this part to provi	Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8. Also complete this part for any additional information.	
)
COMPENSATION.	N. (FY09 AMOUNT: NONE).	

INDIVIDUAL'S EMPLOYMENT CONTRACT AND APPROVED BY THE EXECUTIVE COMMITTEE OF PART I, LINE 1B: ALL THE ITEMS CHECKED ABOVE ARE INCLUDED AS PART OF THE THE BOARD OF TRUSTEES

LINE 4A: SCOTT TIMMINS RECEIVED SIX MONTHS OF COMPENSATION AS A RESULT OF HIS SEPARATION FROM BABSON COLLEGE. PART I,

PART I, LINE 5: ONE KEY EMPLOYEE HAS A INCENTIVE PLAN BASED ON THE PERFORMANCE OF CERTAIN PROGRAMS AT THE COLLEGE.

ON JUNE 30, 2008. LEONARD A. SCHLESINGER STARTED HIS TERM AS THE PRESIDENT FORMER PRESIDENT BRIAN M. BAREFOOT'S TERM WITH BABSON ENDED 2008. ON JULY 1, Schedule J (Form 990) 2008

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832113 12-23-08

SCHEDULE J-1 (Form 990)

► Attach to Form 990 to list additional information Continuation Sheet for Schedule J (Form 990)

2008 Open to Public Inspection

OMB No. 1545-0047

regarding compensation.

Employer identification number 0.4-21.03544Part I Continuation of Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (Schedule J, Part II) BABSON COLLEGE Department of the Treasury Internal Revenue Service

Name of the organization

				folding panonadin	co (Scriedaie 3, Fait II)			
		(b) Breakdown of W-2		and/or 1099-MISC compensation	(C) Deferred	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation		(a) (a)	reported in prior Form 990 or Form 990-EZ
	€	166,340.	0	13,382.	12,728.	57,786.	250,236.	0
BRIAN M. BAREFOOT	Ξ	1	0.		1	0	0	0
	Θ	293,727.		26,89	25,562.	379.	346,559.	0
PATRICIA GREENE	<u>(ii)</u>				1	0		
	Ξ	213,707.	0	41,172.	20,688.	3,226.	278,793.	
HENRY DENEAULT	(ii)		0.	0	0	0		
	(i)	183,615.	0	4,736.	18,945.	115.	207,411.	
MICHAEL FETTERS	(ii)		0	0	0	0	0	
	(1)	120,473.	0	135,856.	23,423.	4,725.	284,477.	
E. SCOTT TIMMINS	(ii)	0	0	0	0	0	0	0
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832191 12-23-08 LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instruction for Form 990.	Derwo	ork Reduction Act N	lotice, see the Instr	uctions3or Form 99			Schedule	Schedule J-1 (Form 990) 2008

SCHEDULE J-2 (Form 990)

Continuation Sheet for Form 990

Department of the Treasury Internal Revenue Service

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

2008
Open to Public Inspection

Name of the Organization

BABSON COLLEGE

Employer Identification number 04-2103544

BABSON C									04-210	
Part I Continuation of Officers, D		rus	tee			En	npl			
(A)	(B)				C)			(D)	(E)	(F)
Name and Title	Average				ition			Reportable	Reportable	Estimated
	hours	(C	hecl	(all	that	app	oly)	compensation from	compensation from related	amount of other
	per week			ĺ		g		the	organizations	compensation
	WCCK	ţ				ploy		organization	(W-2/1099-MISC)	from the
		dire				ed en		(W-2/1099-MISC)	(organization
		tee 0	ustee			ensat	ļ			and related
		al trus	nal tr		loyee	dwoo				organizations
		Individual trustee or director	nstitutional trustee	Officer	Key employee	Highest compensated employee	mer			
		Ĕ	Ĕ	ā	\$	Ĭ	요			
JEREMIAH J. NOONAN					İ	İ			_	_
TRUSTEE	1.20	X	1112					0.	0.	0.
RICHARD A. RENWICK									_	_
TRUSTEE	1.20	X						0.	0.	0.
THOMAS N. RILEY							l			
TRUSTEE	1.20	X						0.	0.	0.
GOBIND SAHNEY										
TRUSTEE	1.20	X						0.	0.	0.
THOMAS T. STALLKAMP										
TRUSTEE	1.20	Х						0.	0.	0.
JAMES W. TAYLOR										_
TRUSTEE	1.20	X						0.	0.	0.
GARY T. DICAMILLO										
TRUSTEE	1.20	X						0.	0.	0.
DELIA H. THOMPSON										
TRUSTEE	1.20	X						0.	0.	0.
AARON M. WALTON										
TRUSTEE	1.20	X						0.	0.	0.
LAWRENCE WEBER										
TRUSTEE	1.20	Х						0.	0.	0.
RONALD G. WEINER										
TRUSTEE	1.20	Х						0.	0.	0.
ROBERT E. WEISSMAN										
TRUSTEE	1.20	X						0.	0.	0.
JOSEPH L. WINN										· · · · · · · · · · · · · · · · · · ·
TRUSTEE	1.20	X						0.	0.	0.
ANTHONY C. WOODRUFF										
TRUSTEE	1.20	X	l					0.	0.	0.
CARY L. ZWERLING										
TRUSTEE	1.20	Х						0.	0.	0.
CARLETON F. KILMER				7	7					
TRUSTEE	1.20	Х				ľ		0.	0.	0.
KENNETH G. ROMANZI					7					
TRUSTEE	1.20	х		l		1		0.	0.	0.
WARREN K.K. LUKE			\neg							
TRUSTEE	1.20	$ \mathbf{x} $	ı					0.	0.	0.
LEONARD A. SCHLESINGER										
PRESIDENT	40.00	х		\mathbf{x}				281,479.	0.	42,139.
SHAHID ANSARI					\dashv			,	,	
ACT.PROV/DEAN OF FACULTY	40.00			х				252,370.	0.	20,262.
LHA For Privacy Act and Panerwork Reduction			tha	_						(Form 990) 2008

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

Schedule J-2 (Form 990) 2008

SCHEDULE J-2

Continuation Sheet for Form 990

(Form 990)

Department of the Treasury Internal Revenue Service ▶ Attach to Form 990 to list additional information for Form 990, Part VII, Section A, line 1a.

2008
Open to Public Inspection

Name of the Organization BABSON COLLEGE

Employer Identification number 04-2103544

BABSUN CO									04-210	
Part I Continuation of Officers, D	rectors, Ti	rus	tee	<u>s, F</u>	(ey	Er	npl	oyees, and Highes	t Compensated	Employees
(A)	(B)			(6	C)			(D)	(E)	(F)
Name and Title	Average			Pos				Reportable	Reportable	Estimated
	hours	(c	hecl	k all	that	app	oly)	compensation	compensation	amount of
	per							from	from related	other
	week	=				loyee		the	organizations	compensation
		rect			ĺ	dwa		organization	(W-2/1099-MISC)	from the
		9 01 0	<u>a</u>			sated		(W-2/1099-MISC)		organization and related
		ruste	trus		98	npen				organizations
		dual	tiona	L	oldn	st co				organization o
		ndividual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
ROBERT V. FOGEL		Ι-	-	<u> </u>	_	├-	+			
EXECUTIVE V.P./EXECUTIVE	40.00			x				174,514.	0.	2 171
	40.00			^	_	Ͱ	├	1/4,514.	0.	3,474.
MARY ROSE	40 00			,,			ĺ	200 105	0	00 175
V.P. FOR ADMINISTRATION	40.00	_		X		_	<u> </u>	200,195.	0.	22,175.
RICHARD VOOS				l	Ī				_	
VP FOR INST'L ADVANCE.	40.00	_		X		<u> </u>	<u> </u>	233,802.	0.	27,273.
PHILIP SHAPIRO										
VP FOR FINANCE & CFO	40.00			X				258,052.	0.	33,717.
JONATHAN MOLL										
VP AND GENERAL COUNSEL	40.00			Х				188,090.	0.	24,626.
CAROL HACKER										
CLERK	40.00			Х				157,857.	0.	16,924.
DENNIS HANNO										
DEAN OF UNDERGR. SCHOOL	40.00				х			236,935.	0.	45,849.
SHELLEY KAPLAN							\vdash			20 7 0 20 1
AVP FOR FACILITIES MANGT	40.00				х			153,792.	0.	17,217.
ELAINE EISENMAN	10.00							133,732.	· ·	17,217.
DEAN OF BABSON EXECUTIVE	40.00				Х			331,358.	0.	28,221.
JAY RAO	40.00		\dashv					331,330.	0.	20,221.
FACULTY	40.00					x		402,827.	0.	10 201
JOSEPH WEINTRAUB	40.00	\dashv		\dashv		Δ		402,027.	U •	18,391.
	40 00					٦,		200 071		00 701
FACULTY	40.00	_		-		X		388,871.	0.	23,791.
PATRICIA GUINAN	40.00	I	İ					265 405		
FACULTY	40.00			_		X		365,195.	0.	20,257.
MARK RICE										
FACULTY	40.00					X		345,219.	0.	25,760.
DHRUV GREWAL					ĺ	ı				
FACULTY	40.00					X		330,547.	0.	36,717.
BRIAN M. BAREFOOT										
FORMER PRESIDENT	40.00						\mathbf{x}	179,722.	0.	70,514.
PATRICIA GREENE										
FORMER PROVOST	40.00			- 1			\mathbf{x}	320,618.	0.	25,941.
HENRY DENEAULT			十		寸	1	Ŧ			
VICE PROVOST	40.00		-			- [\mathbf{x}	254,879.	0.	23,914.
MICHAEL FETTERS		\dashv	\dashv	\dashv	\dashv	\dashv				40,014.
FORMER PROVOST	40.00			1		J	x	188,351.	0.	19,060.
E. SCOTT TIMMINS	±0.00	\dashv	\dashv	\dashv	\dashv	\dashv	<u>^`</u>	100,331.	U •	17,000.
FORMER VP FOR MARKETING	40.00						\mathbf{x}	256,329.	0.	20 140
TOTALL VE FOR MARKETING	±0.00	\dashv	\dashv	\dashv	\dashv		^	430,343.	U •	28,148.
						ļ	ĺ			
LHA For Privacy Act and Paperwork Reduction	A . A1 .:						ᆛ			Earm 990) 2008
	MAT BIATIAN C	-00 1				·		- orms (ME)	Sanadula 197	LANGER (NA) OULO

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

Schedule J-2 (Form 990) 2008

SCHEDULE K (Form 990)

Department of the Treasury Internal Revenue Service
Name of the organization

Supplemental Information on Tax-Exempt Bonds

2008
Open to Public Inspection
Employer identification number OMB No. 1545-0047

Attach to Form 990. To be completed by organizations that answered "Yes" to Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information on Schedule O (Form 990).

BABSON CC	EGE						Employer identification number $04-2103544$	itification 3544	number
Part Bond Issues (Required for 2008) SEE	E SCHEDULE	O FOR	COLUMN (F) C	CONTINUATIONS	SNC				
(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue price	(f) Description of purpose	of purpose	(g) Defeased		(h) On behalf
							Yes	No Yes	2
MASSACHUSETTS A DEVELOPMENT FINANCE AGEN04-343181457583RCV5	104-3431814	57583RCV5	08/31/05	22996717	REFINANCE BONDS - ST	E 1995 STUDENT DOR	<u> </u>		ļ
INANCE	AGEN04-343181457583RSC0	57583RSC0	10/04/07	21336830	ANC	122	×		×
MASSACHUSETTS C DEVELOPMENT FINANCE AGEN04-	104-3431814	57583RVW3	04/17/08	REFIN 36475000.ISSUE	ANCE	2001 BOND	×		×
Q									
Ш									
Part II Proceeds (Optional for 2008)									
		A	В		၁	٥		ш	
1 Total proceeds of issue	***************************************								
2 Gross proceeds in reserve funds									
3 Proceeds in refunding or defeasance escrows									
4 Other unspent proceeds									
5 Issuance costs from proceeds									
6 Working capital expenditures from proceeds		· · · · · · · · · · · · · · · · · · ·							
7 Capital expenditures from proceeds									
8 Year of substantial completion									
		Yes No	o Yes	No	Yes No	Yes	<u> </u>	Yes	2
9 Were the bonds issued as part of a current refunding issue?	funding issue?								
10 Were the bonds issued as part of an advance refunding	refunding								
11 Has the final allocation of process of the second of th									
	יייייייייייייייייייייייייייייייייייייי								
	ns alla lecolus							-	
Part III Private Business Use (Optional for 2008)	3)						_		
		A	8		ပ	٥		ш	
1 Was the organization a partner in a partnership, or a member	p, or a member	Yes No	o Yes	No	Yes	Yes No		Yes	2
of an LLC, which owned property financed by tax-exempt bonds?	tax-exempt								
2 Are there any lease arrangements with respect to the financed property which may result in private business use?	t to the financed use?								
12-19-08 LHA For Privacy Act and Paperwork Reduction Act Notice, see	uction Act Notice, s	see the Instructio	the Instructions for Febra 990.				Schedule	Schedule K (Form 990) 2008	90) 2008

SCHEDULE L (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Transactions with Interested Persons

➤ Attach to Form 990 or Form 990-EZ.

► To be completed by organizations that answered "Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, lines 38a or 40b.

OMB No. 1545-0047

Open To Public Inspection

Name of the organization										Employe	r identif	ication	number
BA	BSON CC	LLEG	E							04 - 21	.0354	14	
Part I Excess Benefi	t Transact	ions (s	ection 5	01(c)(3) a	and sectio	n 501(c)	(4) organizati	ons only)					
To be completed b	y organization	is that a	nswered	d "Yes" c	on Form 99	90, Part I	V, line 25a or	25b, or	Form 9	90-EZ, Pa	ırt V, line	∍ 40b.	
1 (a) Name of d	ingualified per	con				/1-) Description	of trans	action			(c) Cor	rected?
(a) Name of d	isqualified per	5011				, (E	Description	OI HALIS	CHOIL			Yes	No
												<u> </u>	<u></u>
													<u> </u>
***************************************													ļ
***************************************									·····				
													<u> </u>
O F-4			*1										
2 Enter the amount of tax im section 4958	•	-		-			=			> \$			
3 Enter the amount of tax, if	any on line 2												
3 Lines the amount of tax, in	arry, orr inte 2,	above, i	i Gii i ibur	sed by ti	ie organiza	ation			•••••	• ¥			
Part II Loans to and/	or From Int	tereste	ed Per	sons.									
To be completed b					n Form 99	0, Part I	V, line 26, or	Form 990)-EZ, Pa	art V, line	38a.		
(a) Name of interested	(b) Loan				principal	$\overline{}$	alance due) In	(f) Ap	proved	(g) W	/ritten
person and purpose	the orga	nization'	?	ămoi		` ′		defa	ault?		oard or nittee?	agree	ment?
	То	Fron	n					Yes	No	Yes	No	Yes	No
													2
	11-					1000000							
										4			
										4			
			-					-					-
								C-00000					
Total Part III Grants or Assi	stance Rei	efitin	a Inte	rested	Person	9							
To be completed b		11-11-0					V line 27						
(a) Name of interested	·····	S triat ai					ested person	and	1	(c) Amou	int of ar	ant or tv	ne
(a) Name of interested	, poiooi,		(13)	riciationi		ganizatio		and			f assista		Po

			14-		K								
Part IV Business Trans													
To be completed by												(e) Sha	ring of
(a) Name of interested	person	(oetween in ne organiz		(c) Amo transa			Descript transacti		organiz	ation's
												Yes	No
JANICE BELL		S	POUS	E OF	ACTI	NG P	R 179	,945	.FAC	ULTY	MEM		Х
FIDELITY INVESTM	ENTS	C	IO 0	F FI	DELIT	Y & :	в 99	,402	MI.	ESTM	ENT		Х
FIDELITY INVESTM	ENTS	C	IO 0	F FI	DELIT	Y & 1	B 35	,386	.EXE	CUTI	VE E		Х
BLUE CROSS BLUE							A 5,135						X
BLUE CDACC BLUE	CHIETUD	ID.	DECT	חדאייי	/CEO	C BO	1/0	257	EYL	ידייוידי:	प्रस प्र	, T	Y

SEE SCHEDULE O FOR SCHEDULE L CONTINUATIONS

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

Schedule L (Form 990 or 990-EZ) 2008

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

BABSON COLLEGE

Employer identification number 04-2103544

Pa	rt I Types of Property							
L		(a) Check if applicable	(b) Number of contributions	(c) Revenues reported on Form 990, Part VIII, line 1g	(d) Method of de revenu	terminin	ıg	
1	Art - Works of art							
2	Art - Historical treasures							,
3	Art - Fractional interests							
4	Books and publications							
5	Clothing and household goods	7=11//15/5						
6	Cars and other vehicles	4			· · · · · · · · · · · · · · · · · · ·			
7	Boats and planes							
8	Intellectual property							
9	Securities - Publicly traded	X	23	1,262,659.	AVG. OF HI&L	OW-D	ATE	TR
10	Securities - Closely held stock							
11	Securities - Partnership, LLC, or							
••	trust interests							
12	Securities - Miscellaneous							
13	Qualified conservation contribution						•	
13	(historic structures)							
14	Qualified conservation contribution (other)				A			
	Real estate - Residential							
15	Real estate - Commercial		.					
16								***************************************
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	<u> </u>						
25	Other ()							
26	Other ()							
27	Other ()					····		
28	Other ()		_ *	(
29	Number of Forms 8283 received by the organ						0	
	for which the organization completed Form 82	83, Part IV,	Donee Acknov	vledgment 29			Yes	No
	Section 1919 Control of the control				2 that it much hald for		168	140
30a	During the year, did the organization receive b							
	at least three years from the date of the initial					00-		X
						30a		
	If "Yes," describe the arrangement in Part II.	,, ., .			Anile . di ma a O		v	
31	Does the organization have a gift acceptance					31	X	
32a	Does the organization hire or use third parties	or related or	ganizations to	solicit, process, or sell nonc	ash		پ	
	contributions?					32a	Х	
b	If "Yes," describe in Part II.							
33	If the organization did not report revenues in o	olumn (c) fo	r a type of prop	perty for which column (a) is	checked,			
	describe in Part II.							
LHA	For Privacy Act and Paperwork Reduction	Act Notice	, see the Instr	uctions for Form 990.	Schedule I	VI (Form	990)	2008

SCHEDULE O (Form 990)

Supplemental Information to Form 990

Department of the Treasury Internal Revenue Service ➤ 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.

2008 Open to Public Inspection

Name of the organization

BABSON COLLEGE

Employer identification number 04-2103544

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION: BABSON COLLEGE IS A GLOBAL LEADER IN MANAGEMENT EDUCATION WITH WE APPROXIMATELY 1800 UNDERGRADUATE AND 1600 GRADUATE ENROLLMENT. EDUCATE MEN AND WOMEN TO BE ENTREPRENEURIAL LEADERS IN A RAPIDLY THROUGHOUT THEIR CAREERS, WE PREPARE THEM TO IDENTIFY CHANGING WORLD. OPPORTUNITIES AND INITIATE ACTIONS THAT RESULT IN GENUINE ACCOMPLISHMENT. OUR INNOVATIVE CURRICULA CHALLENGE STUDENTS TO THINK CREATIVELY AND ACROSS DISCIPLINARY BOUNDARIES. WE CULTIVATE THE WILLINGNESS TO TAKE AND MANAGE RISK, THE ABILITY TO ENERGIZE OTHERS TOWARD A GOAL, AND THE COURAGE TO ACT RESPONSIBLY. OUR STUDENTS UNDERSTAND THAT LEADERSHIP REQUIRES BOTH TECHNICAL KNOWLEDGE AND A SOPHISTICATED APPRECIATION OF INSTITUTIONS, SOCIETIES, CULTURES, AND THEY WELCOME THE CHALLENGE OF LEARNING CONTINUOUSLY AND THE SELF. TAKING RESPONSIBILITY FOR THEIR CAREERS. OUR STUDENTS WILL BE KEY CONTRIBUTORS IN ESTABLISHED ENTERPRISES AS WELL AS EMERGING VENTURES.

FORM 990, PART VI, SECTION A, LINE 10: THE FORM 990 IS PREPARED INTERNALLY AND REVIEWED BY MANAGEMENT AND PRICEWATERHOUSECOOPERS, LLP "PWC". THE FULL 990 RETURN, INCLUDING SCHEDULE B, IS THEN REVIEWED BY SENIOR MANAGEMENT, AND THE AUDIT COMMITTEE. THE FINAL FORM 990, WITH THE EXCEPTION OF SCHEDULE B, IS THEN MADE AVAILABLE TO THE FULL BOARD OF TRUSTEES PRIOR TO FILING

FORM 990, PART VI, SECTION A, LINE 2: TWO TRUSTEES SIT ON THE BOARD OF

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

WITH THE IRS. PWC SIGNS THE RETURN AS PAID PREPARER.

ANOTHER NOT-FOR-PROFIT ORGANIZATION.

Schedule O (Form 990) 2008

SCHEDULE 0

(Form 990)

Supplemental Information to Form 990

Department of the Treasury Internal Revenue Service

➤ 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 Open to Public Inspection

Name of the organization

BABSON COLLEGE

Employer identification number 04-2103544

SECTION B, LINE 12C: EACH YEAR ALL TRUSTEES ARE FORM 990, PART VI, REQUIRED TO COMPLETE AND SIGN A CONFLICT OF INTEREST QUESTIONNAIRE AND STATEMENT OF COMPLIANCE. THEIR RESPONSE TO THE QUESTIONNAIRE IS REVIEWED BY MANAGEMENT. IN ADDITION, PAYROLL AND VENDOR FILES ARE REVIEWED FOR THE EXISTENCE OF TRANSACTIONS WITH RELATED PARTIES. IF A CONFLICT OCCURS THE BOARD MEMBER WILL RECUSE HIM OR HERSELF FROM ANY MATTERS RELATING TO THE TRANSACTION.

FORM 990, PART VI, SECTION B, LINE 15: COMPENSATION FOR THE PRESIDENT, OFFICERS AND KEY EMPLOYEES OF THE COLLEGE IS REVIEWED BY HUMAN RESOURCES AT LEAST ONCE A YEAR. THIS REVIEW INCLUDES COMPARING RELEVANT, MARKET COMPENSATION AND IS DOCUMENTED. THE EXECUTIVE COMMITTEE OF THE BOARD OF TRUSTEES IS PROVIDED APPROPRIATE INFORMATION INCLUDING A RECOMMENDATION FOR COMPENSATION (OR INCREASE IN COMPENSATION). ANY CHANGES TO COMPENSATION FOR THE PRESIDENT, OFFICERS AND KEY EMPLOYEES IS APPROVED BY THIS COMMITTEE.

FORM 990. PART VI. SECTION C. LINE 19: BABSON COLLEGE'S FINANCIAL STATEMENTS CAN BE FOUND AT WWW.BABSON.EDU. BABSON DOES NOT MAKE AVAILABLE TO THE PUBLIC OUR CONFLICT OF INTEREST POLICY, OR OTHER GOVERNING DOCUMENTS.

FORM 990, PART XI, LINE 2C

THE AUDIT COMMITTEE OF THE BOARD OF TRUSTEES IS RESPONSIBLE FOR

OVERSIGHT OF THE AUDIT. THE COMMITTEE REVIEWS AND APPROVES THE AUDITED

FINANCIAL STATEMENTS.

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

Schedule O (Form 990) 2008

SCHEDULE 0

(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.

2008
Open to Public Inspection

Employer identification number Name of the organization 04-2103544 BABSON COLLEGE SCHEDULE K, PART I, BOND ISSUES: (A) ISSUER NAME: MASSACHUSETTS DEVELOPMENT FINANCE AGENCY (F) DESCRIPTION OF PURPOSE: REFINANCE 1995 BONDS - STUDENT DORM CONSTRUCTION SCH L, PART IV, BUSINESS TRANSACTIONS INVOLVING INTERESTED PERSONS: (A) NAME OF PERSON: JANICE BELL (B) RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION: SPOUSE OF ACTING PROVOST AMOUNT OF TRANSACTION \$ 179945. DESCRIPTION OF TRANSACTION: FACULTY MEMBER SHARING OF ORGANIZATION REVENUES? = NO (E) (A) NAME OF PERSON: FIDELITY INVESTMENTS (B) RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION: CIO OF FIDELITY & BABSON TRUSTEE AMOUNT OF TRANSACTION \$ 99402. DESCRIPTION OF TRANSACTION: INVESTMENT FEE PAID SHARING OF ORGANIZATION REVENUES? = NO (A) NAME OF PERSON: FIDELITY INVESTMENTS RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION: CIO OF FIDELITY & BABSON TRUSTEE (C) AMOUNT OF TRANSACTION \$ 35386.

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

Schedule O (Form 990) 2008

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 Open to Public Inspection

Employer identification number

Name	of the organization BABSON COLLEGE	Employer identification number 04-2103544
(D)	DESCRIPTION OF TRANSACTION: EXECUTIVE EDUCATION FEES	RECEIVED
<u>(E)</u>	SHARING OF ORGANIZATION REVENUES? = NO	
(A)	NAME OF PERSON: BLUE CROSS BLUE SHIELD	
(B)	RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATI	ON:
	SIDENT/CEO & BOARD MEMBER ARE ALSO BABSON TRUSTEE & PR	ESIDENT EMERITUS
(C)	AMOUNT OF TRANSACTION \$ 5135123.	DATD
(D)	DESCRIPTION OF TRANSACTION: HEALTH INSURANCE PREMIUMS	PAID
<u>(E)</u>	SHARING OF ORGANIZATION REVENUES? = NO	
(A)	NAME OF PERSON: BLUE CROSS BLUE SHIELD	
(B)	RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATI	ON:
PRE	SIDENT/CEO & BOARD MEMBER ARE ALSO BABSON TRUSTEE & PR	ESIDENT EMERITUS
(C)	AMOUNT OF TRANSACTION \$ 140257.	
(D)	DESCRIPTION OF TRANSACTION: EXECUTIVE EDUCATION FEES	RECEIVED
(E)	SHARING OF ORGANIZATION REVENUES? = NO	· , ,

2008 DEPRECIATION AND AMORTIZATION REPORT FORM 990 PAGE 10

990

Description	Date Acquired	Method	Life	No.	Unadjusted Cost Or Basis	Bus % Excl	Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
BUILDINGS, EQUIPMENTS AND IMPROVEMENTS	VARIES		000.	16	294168113			2941681131	152384261		101,410.
190 PAGE 10					294168113		0	294168113	0.294168113152384261	0.	101,410.
	0										17
											II.

(D) - Asset disposed

* ITC, Section 179, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone

SCHEDULE E GOVERNMENT FINANCIAL ASSISTANCE STATEMENT 1
LINE 6

BABSON COLLEGE RECEIVES FEDERAL AID TO ENHANCE SCHOLARSHIP AND WORK STUDY PROGRAMS.