Form **990**

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

Open to Public Inspection

OMB No 1545-0047

benefit trust or private foundation) ▶ The organization may have to use a copy of this return to satisfy state reporting requirements A For the 2009 calendar year, or tax year beginning

	Check if	le Please	D Employer identific	cation number
г	Addre			
F	Ichang Name	type	f 52_1	818907
片	Ichang Initial	0. 1	1	
片	Ireturn Termii	n- Specific 1220 10mu CMDEEM NW	I — ,	861-8223
F	lated Amen	ded tions Canada and All 71D 4	G Gross receipts \$	5,120,866.
\vdash	return Applic		H(a) is this a group re	
_	tion pendii		for affiliates?	Yes X No
		SAME AS C ABOVE	H(b) Are all affiliates inc	
<u></u>	Tax-ex	empt status	-	list (see instructions)
		te: NWW.IHEP.ORG	H(c) Group exemption	
				State of legal domicile: DC
	art I	Summary		
	1	Briefly describe the organization's mission or most significant activities SEE PART	III, LINE 1	
Revenue Activities & Governance		,		
Se.	2	Check this box if the organization discontinued its operations or disposed of mor	e than 25% of its net as	sets
~ <u>~</u>	i	Number of voting members of the governing body (Part VI, line 1a)	3	9
>Ŏ	1	Number of independent voting members of the governing body (Part VI, line 1b)	4	9
Źς,	1	Total number of employees (Part V, line 2a)	5	19
~ <u>;</u> ĕ	1	Total number of volunteers (estimate if necessary)	6	9
ΠŞ	1	Total gross unrelated business revenue from Part VIII, column (C), line 12	7a	0.
Z ∢	1	Net unrelated business taxable income from Form 990-T, line 34	7b	0.
Ī			Prior Year	Current Year
١	8	Contributions and grants (Part VIII time 1h)	7,360,889.	4,862,241.
3	9	Program service-revenue (Part VIII, line 25)	53,798.	193,675.
ě	l .	Investment ncome (Part VIII, column (A), lines 3, 4, and 7d)	13,820.	46,792.
ď		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	23,187.	18,158.
		Total revenuel- add lines.8 through-11 (must equal Part VIII, column (A), line 12)	7,451,694.	5,120,866.
		Grants and Similar amounts paid (Rart IX, column (A), lines 1-3)	,,131,031.	957,495.
	I	Benefits paid to or-for members (Part IX, column (A), line 4)		33772331
Ø		Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	973,713.	727,557.
Expenses	1	Professional fundraising fees (Part IX, column (A), line 11e)	3,3,,13,	72173311
per		Total fundraising expenses (Part IX, column (D), line 25)		
Ä	1	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	1,831,016.	1,375,164.
	1	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	2,804,729.	3,060,216.
		Revenue less expenses. Subtract line 18 from line 12	4,646,965.	2,060,650.
es			eginning of Current Year	End of Year
ets (20		5,786,603.	7,892,181.
Asse	21	Total assets (Part X, line 16) Total liabilities (Part X, line 26)	238,275.	283,203.
Net Assets or Fund Balances	22	Net assets or fund balances Subtract line 21 from line 20	5,548,328.	7,608,978.
	rt II	Signature Block	3,340,320.	1,000,310.
<u></u>		Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements,	, and to the best of my knowledg	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 knowledge		· · · · · · · · · · · · · · · · · · ·
Cia	_	Soldle (In	1 10/2	7/10
Sign		Signature of officer	Date	110
Her	е	MICHELLE COOPER, PRESIDENT	24.0	
		Type or grint name and title	·	
			neck if Prepare	r's identifying number
Paid	l	10.70 I/ Se	elf- (see ins	tructions)
Prep	arer's	The state of the s	nployed	
Use	Only	yours of self-employed, 4550 MONTGOMERY AVE., SUITE 650 NORTH	EIN ►	
		address, and		301) 951-9090
	, the = 25		Phone no. ► (
		RS discuss this return with the preparer shown above? (see instructions)		X Yes No Form 990 (2009)
9320	01 02-0	04-10 LHA For Privacy Act and Paperwork Reduction Act Notice, see the separate in	su uctions.	FOIIII 330 (2009)

932002 02-04-10 Part IV Checklist of Required Schedules

	•		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?		:	
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		<u>X</u>
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4		<u>X</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	_	N/	7\
6	reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	_5_	14/	_
0	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	0		<u> </u>
•	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide			
	credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments?			
	If "Yes," complete Schedule D, Part V	10		X
11	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, VIII, IX, or X			
	as applicable	11	X	
•	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI.			
•	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
_	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII			
•	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
•	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			
•	Part X, line 16? If "Yes," complete Schedule D, Part IX			
•	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X			
•	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X			
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI, XII, and XIII.	12	X	
12A	Was the organization included in consolidated, independent audited financial statements for the tax year? Yes No			
	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional 12A X			
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a	-	X
D	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I	44h		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization	14b		A
.5	or entity located outside the United States? If "Yes," complete Schedule F, Part II	15		х
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 a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		<u>X</u>
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		X
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20	000	X_
		Form	99U (2009)

Part IV Checklist of Required Schedules (continued)

	·		Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the			
	United States on Part IX, column (A), line 17 If "Yes," complete Schedule I, Parts I and II	21	X	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX,			
	column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		<u>X</u>
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J .	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K If "No", go to line 25	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		<u> </u>
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a			
	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified	İ		
	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete			
	Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties, (see Schedule L, Part IV	1		
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
С	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was			
	an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?		i	
	If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32	ļ	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	ļ	X
34	Was the organization related to any tax-exempt or taxable entity?			
	If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34	<u> </u>	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	ļ	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	1		
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37	<u> </u>	X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 197			
	Note. All Form 990 filers are required to complete Schedule O.	38	X	L
		Form	990	(2009)

52-1818907 Page 5 INSTITUTE FOR HIGHER EDUCATION POLICY Part V Statements Regarding Other IRS Filings and Tax Compliance Yes No 1a Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of 52 U.S. Information Returns. Enter -0- if not applicable 19 Enter the number of Forms W-2G included in line 1a Enter -0 if not applicable Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming Х (gambling) winnings to prize winners? 1c 2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, 19 filed for the calendar year ending with or within the year covered by this return 2a Х b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 2b Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions) Х 3a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? 3a b If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O 3b 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a X financial account in a foreign country (such as a bank account, securities account, or other financial account)? 4a **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. 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? X 5a Х Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5b c If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction? 5c 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit X any contributions that were not tax deductible? 6a b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 6b Organizations that may receive deductible contributions under section 170(c). a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services X 7a X b If "Yes," did the organization notify the donor of the value of the goods or services provided? 7b c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required X to file Form 8282? 7c d If "Yes," indicate the number of Forms 8282 filed during the year Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7e Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? X 7f f For all contributions of qualified intellectual property, did the organization file Form 8899 as required? 7g 7h For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required? h Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the

supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings

Sponsoring organizations maintaining donor advised funds.

a Did the organization make any taxable distributions under section 4966?

b Did the organization make a distribution to a donor, donor advisor, or related person?

Section 501(c)(7) organizations. Enter: 10

at any time during the year?

Initiation fees and capital contributions included on Part VIII, line 12

b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities

11 Section 501(c)(12) organizations. Enter:

a Gross income from members or shareholders

Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)

12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? b If "Yes," enter the amount of tax-exempt interest received or accrued during the year

N/A 10a 10b

11a 11b 12a

N/A

N/A

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1

8

9a

9b

N/A

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

Sec	tion A. Governing Body and Management					
		ı	ı		Yes	No
	Enter the number of voting members of the governing body	1a		9		
	Enter the number of voting members that are independent	1b	<u> </u>	9		İ
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship	ip with	any other			3,7
_	officer, director, trustee, or key employee?	-		2		X
3	Did the organization delegate control over management duties customarily performed by or under the	ne dire	ct supervision			3,7
	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 Fo		0 was filed?	4		X
5	Did the organization become aware during the year of a material diversion of the organization's asse	ts?		5		X
6	Does the organization have members or stockholders?		4	6	-	X
7a	Does the organization have members, stockholders, or other persons who may elect one or more more more more more more more	ember	s of the			
	governing body?			7:		X
	Are any decisions of the governing body subject to approval by members, stockholders, or other pe			71	<u> </u>	X
8	Did the organization contemporaneously document the meetings held or written actions undertaken	during	g the year			
	by the following				۱	
	The governing body?			8		-
	Each committee with authority to act on behalf of the governing body?			<u>8</u> 1	X	 -
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be real	ached	at the			
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O			9		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal F	Revenu	e Code.)			
				F	Yes	
	Does the organization have local chapters, branches, or affiliates?			10	a	X
b	If "Yes," does the organization have written policies and procedures governing the activities of such	chapt	ers, affiliates,			
	and branches to ensure their operations are consistent with those of the organization?			10		ļ
11	Has the organization provided a copy of this Form 990 to all members of its governing body before f	filing th	e form?	1	1 X	
	Describe in Schedule O the process, if any, used by the organization to review this Form 990			- 1		
	Does the organization have a written conflict of interest policy? If "No," go to line 13			12	a X	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that co	uld giv	e rise	- 1		
	to conflicts?			12	b X	
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If	"Yes,"	describe	ł		
	ın Schedule O how this is done			12	\rightarrow	
13	Does the organization have a written whistleblower policy?			1:		
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 approve	-	ndependent			Ì
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	?				ŀ
	The organization's CEO, Executive Director, or top management official			15		 -
b	Other officers or key employees of the organization			15	b	X
	If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.)					
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrange	ment v	vith a			
	taxable entity during the year?			16	а	X
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to eva-					1
	in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the org	janizat	ion's			
<u> </u>	exempt status with respect to such arrangements?			16	b	J
	tion C. Disclosure					
17	List the states with which a copy of this Form 990 is required to be filed NONE					
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-	ı (501 -	c)(3)s only) avail	able for		
	public inspection. Indicate how you make these available. Check all that apply.					
	Own website Another's website X Upon request	_				
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, or	conflic	t of interest polic	cy, and f	nancial	
	statements available to the public				_	
20	State the name, physical address, and telephone number of the person who possesses the books a	ınd red	ords of the orga	ınızatıon	:▶	
	LISA STEWART - (202)861-8240	126				
	1320 19TH STREET, NW, NO. 400, WASHINGTON, DC 200	136_			. 000	10000
				Fo	rm 990	(2009)

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

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

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

Check this box if the organization did no	(B)			(0	C)			(D)	(E)	(F)
Name and Title	Average hours	(6)		Pos		n app	LΛ	Reportable compensation	Reportable compensation	Estimated amount of
	per week	Individual trustee or director	Institutional trustee	Officer		Highest compensated E		from	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
KATHY ISAACSON	2 00									^
CHAIRPERSON	2.00	X		X				0.	0.	0.
LAURA PERNA	2 00	,,		,,					0	_
SECRETARY	2.00	X	 	X	-	-		0.	0.	0.
CHERYL BLANCO	2.00	3,			Ī				0	_
BOARD MEMBER	2.00	A		-	ļ			0.	0.	0.
ARTHUR COLEMAN	2 00	-						0.	0.	0.
BOARD MEMBER GWENDOLYN DUNGY	2.00	^						U.•	<u></u>	<u> </u>
BOARD MEMBER	2.00	\ 			ŀ			0.	0.	0.
AUGIE GALLEGO	2.00	Δ				<u> </u>		0.	<u></u>	
BOARD MEMBER	2.00	x						0.	0.	0.
CATHERINE MILTON	2.00	1						0.		•
BOARD MEMBER	2.00	x		İ				0.	0.	0.
RICHARD STAUFENBERGER								=-:		
BOARD MEMBER	2.00	X			ŀ			0.	0.	0.
GREGORY WINFIELD										
BOARD MEMBER	2.00	X			ŀ			0.	0.	0.
MICHELLE COOPER										
PRESIDENT	40.00			X				143,185.	0.	4,296.
LISA STEWART										
DIRECTOR OF FINANCE	40.00			X				63,755.	0.	1,913.
-444										
										5 990 (2222)

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Pai	Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest							est	Compensated Employ	ees (continued)			
	' (A)	(B) (C)							(D)	(E)		(F)	
	Name and title	Average	 , .		Pos			t. 3	Reportable	Reportable		stima	
		hours per	⊢∸	neck	ali	that	app	ly)	compensation from	compensation from related	*	moun othe	
		week	rector						the	organizations	СО	mpens	
			10 to a	ige			sated	İ	organization	(W-2/1099-MISC)		from t	
			truste	al trus		eg.	mpen		(W-2/1099-MISC)			ganıza	
			Individual trustee or director	nstitutional trustee	Officer	Key employee	Highest compensated employee	Former		No.	ı	nd rela ganıza	
			_	_		_	1 0				-		
						-		-					
					-	-	-	-		,			
								_					
							_	-					
										,			
<u> </u>	Total	<u> </u>	<u> </u>				Ļ		206,940.			6 '	209.
2	Total Total number of individuals (including but i	not limited to th	iose	liste	ed al	hove	e) wh			·	•	0,2	<u> </u>
	compensation from the organization											T.	<u> </u>
_	Delth- constant to the control of the							1			Г	Yes	No
3	Did the organization list any former officer line 1a? If "Yes," complete Schedule J for s		stee	, key	y em	plo	yee,	or r	nighest compensated er	nployee on	3		Х
4	For any individual listed on line 1a, is the si		le co	omo	ensa	ation	n and	d otl	her compensation from	the organization		-	
•	and related organizations greater than \$15	-		-					-		4		х
5	Did any person listed on line 1a receive or				rom	any	unr	elat	ed organization for serv	ices rendered to	_	.	
Sec	the organization? If "Yes," complete Schedition B. Independent Contractors	dule J for such	pers	on					• • • • • • • • • • • • • • • • • • • •	·	5		<u> </u>
1	Complete this table for your five highest countries the organization NONE	ompensated inc	depe	ende	nt c	onti	racto	ors t	hat received more than	\$100,000 of compe	nsation	from	ب ر
	(A)								(B)			(C)	
	Name and business	address						\dashv	Description of s	ervices	Comp	ensati	on '
													<u>/</u>
												, ,	
								ᅱ			1 'r		
								-					
	Total number of independent contractors (including but n	ot li	nıte:	d to	the	se lis	sted	l above) who received m	nore than	.		
	\$100,000 in compensation from the organi	_					0					. 000	/DDC=:
											Form	า ษษบ	(2009)

Subsense State Under Subsense State Under State					R HIGHER	EDUCATION	POLICY	<u> 52-1818</u>	907 Page 9
1 a Federated campaigns 1a b b b b b b b b b	Par	t VII	II Statement of Rever	nue					
2 a SUMMER ACADEMY		•					Related or exempt function	Unrelated business	excluded from tax under
2 a SUMMER ACADEMY	nts Its	1 a	Federated campaigns	1a					
2 a SUMMER ACADEMY	or a	b	Membership dues	1b					
2 a SUMMER ACADEMY	S, G	С	Fundraising events	1c					
2 a SUMMER ACADEMY	grit	d	Related organizations	1d					
2 a SUMMER ACADEMY	S,E	е	Government grants (contribut	tions) 1e					
2 a SUMMER ACADEMY	r io	f	All other contributions, gifts, gran	nts, and					1
2 a SUMMER ACADEMY	t e		similar amounts not included abo	ove 1f	4862241.				
2 a SUMMER ACADEMY	da	g	Noncash contributions included in lines	s 1a-1f \$					
2 a SUMMER ACADEMY 900099	<u>ठ</u> ह	h	Total. Add lines 1a-1f		•	4862241.			
b c c c d d d d d d d d d d d d d d d d	1				Business Code				
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12 Total revenue. See instructions. ► 5120866. 193,675. 0. 64,950			•			10 150	<u> </u>		
				••					64 050
	932009		rotal revenue. See instructions.		>	DIZU800.	T23'0\2"	<u> </u>	Form 990 (2009)

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

	All other organizations must complete include amounts reported on lines 6b,	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
7b, 8	b, 9b, and 10b of Part VIII.		expenses	general expenses	expenses
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21	957,495.	957,495.		
2	Grants and other assistance to individuals in				
_	the U.S See Part IV, line 22				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the U S See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	197,498.	167,281.	30,217.	
6	Compensation not included above, to disqualified	İ			
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	371,518.	360,767.	10,751.	
8	Pension plan contributions (include section 401(k)				
	and section 403(b) employer contributions)				
9	Other employee benefits	113,320.		113,320.	
10	Payroll taxes	45,221.		45,221.	
11	Fees for services (non-employees)				
а	Management				
b	Legal				
С	Accounting	40,707.		40,707.	
	Lobbying				-10
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
•	Other	327,607.	298,396.	29,211.	·····
12	Advertising and promotion	100 000	464 005		
13	Office expenses	193,037.	161,935.	31,102.	
14	Information technology	49,488.		49,488.	
15	Royalties	120 606		120 606	
16	Occupancy	138,626.	007.000	138,626.	
17	Travel	303,034.	297,282.	5,752.	
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	227 277	222 000	4 200	· <u>-</u>
19	Conferences, conventions, and meetings	227,377.	222,989.	4,388.	
20	Interest Payments to office to				-
21	Payments to affiliates	12 540		13 540	•
22	Depreciation, depletion, and amortization	13,540.		13,540.	
23	Insurance	6,123.		6,123.	
24	Other expenses. Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.)				
а	SUBSCRIPTIONS & DUES	36,603.	36,460.	143.	
	MISCELLANEOUS EXPENSES	28,586.	3,909.	24,677.	
С	MAINTENANCE	19,609.	12,279.	7,330.	
d	PENSION ADMIN FEES	4,037.		4,037.	_
е	G&A ALLOCATION	-13,210.	527,681.	-540,891.	
f	All other expenses				
25	Total functional expenses. Add lines 1 through 24f	3,060,216.	3,046,474.	13,742.	0.
26	Joint costs. Check here If following				
	SOP 98-2. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation				

Part X **Balance Sheet** (B) (A) End of year Beginning of year 9,418. 4,302. Cash - non-interest-bearing 1 2,818,290. 1,491,593. 2 Savings and temporary cash investments 2 306,837. 2,065,786. 3 3 Pledges and grants receivable, net 4 Accounts receivable, net Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II 5 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete Part II of Schedule L. 6 Notes and loans receivable, net 7 Inventories for sale or use 8 71,255. 42,621. 9 Prepaid expenses and deferred charges 9 10a Land, buildings, and equipment, cost or other 176,372. basis Complete Part VI of Schedule D 10a 160,799. 29,235. 15,573. 10b 10c b Less accumulated depreciation 2,906,076. 3,896,000. Investments - publicly traded securities 11 11 12 Investments - other securities See Part IV, line 11 12 13 Investments - program-related. See Part IV, line 11 13 14 Intangible assets 14 10,899. 10,899. Other assets See Part IV, line 11 15 15 5,786,603. 7,892,181. Total assets. Add lines 1 through 15 (must equal line 34) 16 131,829. 165,388. 17 Accounts payable and accrued expenses 17 18 Grants payable 18 39,049. 19 60,990. 19 Deferred revenue 20 Tax-exempt bond liabilities 20 Escrow or custodial account liability Complete Part IV of Schedule D 21 21 Payables to current and former officers, directors, trustees, key employees, 22 highest compensated employees, and disqualified persons. Complete Part II of Schedule L 22 23 Secured mortgages and notes payable to unrelated third parties 23 24 Unsecured notes and loans payable to unrelated third parties 24 67,397 56,825. 25 Other liabilities. Complete Part X of Schedule D 25 238,275 283,203. 26 Total liabilities. Add lines 17 through 25 26 Organizations that follow SFAS 117, check here X and complete lines 27 through 29, and lines 33 and 34. Net Assets or Fund Balances -393,875. 145,725. 27 Unrestricted net assets 5,942,203. 7,463,253. 28 Temporarily restricted net assets 28 Permanently restricted net assets 29 Organizations that do not follow SFAS 117, check here complete lines 30 through 34. 30 30 Capital stock or trust principal, or current funds 31 Paid-in or capital surplus, or land, building, or equipment fund 31 32 Retained earnings, endowment, accumulated income, or other funds 32 5,548,328. 7,608,978. 33 Total net assets or fund balances 33

> 7,892,181. Form **990** (2009)

Total liabilities and net assets/fund balances

5,786,603.

34

Form	990 (2009) INSTITUTE FOR HIGHER EDUCATION POLICY 52-18189	<u>07</u>	Pag	ge 12
Par	XI Financial Statements and Reporting		_	
			Yes	No
1	Accounting method used to prepare the Form 990. Cash X Accrual Other			
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		X
b	Were the organization's financial statements audited by an independent accountant?	2b	X	
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit,			1
	review, or compilation of its financial statements and selection of an independent accountant?	2c	Х	<u></u>
	f the organization changed either its oversight process or selection process during the tax year, explain in Schedule O			
d	f "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a		1	l
	consolidated basis, separate basis, or both			
	X Separate basis Consolidated basis Both consolidated and separate basis	ŀ		
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit	[l
	Act and OMB Circular A-133?	3a		X
b	f "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3h		l

932012 02-04-10

Form **990** (2009)

SCHEDULE A

Department of the Treasury

Internal Revenue Service

(Form 990 or 990-EZ)

Public Charity Status and Public Support

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

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

2009

Open to Public Inspection

Name of the organization **Employer identification number** 52-1818907 INSTITUTE FOR HIGHER EDUCATION POLICY Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions The organization is not a private foundation because it is (For lines 1 through 11, check only one box) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 1 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). X An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An organization that normally receives. (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III) 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h a Type I b Type II c Type III - Functionally integrated d ___ Type III - Other By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? g Yes A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, No the governing body of the supported organization? 11g(i) (ii) A family member of a person described in (i) above? 11g(ii) (iii) A 35% controlled entity of a person described in (i) or (ii) above? 11g(iii) Provide the following information about the supported organization(s) (iii) Type of (vi) Is the (iv) is the organization (v) Did you notify the (vii) Amount of (i) Name of supported (ii) EIN organization organization in col. in col. (i) listed in your organization in col. support organization (i) organized in the (described on lines 1-9 aovernina document? (i) of your support? above or IRC section (see instructions)) Yes

932021 02-08-10

Form 990 or 990-EZ.

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

Schedule A (Form 990 or 990-EZ) 2009

Schedule A (Form 990 or 990-EZ) 2009 INSTITUTE FOR HIGHER EDUCATION POLICY 52-1818907 Page 2

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

(Complete only if you checked the box on line 5, 7, or 8 of Part I) Section A. Public Support Calendar year (or fiscal year beginning in) (a) 2005 (b) 2006 (c) 2007 (d) 2008 (e) 2009 (f) Total 1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.") 1,910,177 3,068,983 7,360,889 4,862,241 21,027,715. 3,825,425 2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf 3 The value of services or facilities furnished by a governmental unit to the organization without charge 4 Total. Add lines 1 through 3 21,027,715, 3,825,425 1,910,177 3,068,983, 7,360,889, 4,862,241, 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) 14,309,208, 6 Public support. Subtract line 5 from line 4 6.718.507. Section B. Total Support Calendar year (or fiscal year beginning in) (a) 2005 (b) 2006 (c) 2007 (d) 2008 (e) 2009 (f) Total 7 Amounts from line 4 3,825,425, 1,910,177 3,068,983 7,360,889 4.862.241 21,027,715. 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties 24,693. 46,792. 143,456. 31,962. 26,189. 13,820. and income from similar sources Net income from unrelated business activities, whether or not the business is regularly carried on 10 Other income. Do not include gain or loss from the sale of capital 9,660 46,614 3,010 6,480 18,158 83,922. assets (Explain in Part IV) 11 Total support. Add lines 7 through 10 21,255,093. 12 598,486. 12 Gross receipts from related activities, etc. (see instructions) 13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage 14 Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f)) 14 31.61 % 15 Public support percentage from 2008 Schedule A, Part II, line 14 15 38.20 % 16a 33 1/3% support test - 2009. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support test - 2008. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box $\triangleright |X|$ and stop here. The organization qualifies as a publicly supported organization 17a 10% -facts-and-circumstances test - 2009. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization b 10% -facts-and-circumstances test - 2008. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization 18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

Schedule A (Form 990 or 990-EZ) 2009

whether or not the business is regularly carried on								
Other income Do not include gain or loss from the sale of capital						_		
assets (Explain in Part IV)			_					
Total support (Add lines 9, 10c, 11, and 12)					<u> </u>			
First five years. If the Form 990 is for	the organization's	first, second, th	urd, fourth, or fifth	tax year as a sectio	n 501(c	c)(3) organization,		
check this box and stop here .	<u>.</u>							
ction C. Computation of Publ	ic Support Pe	rcentage						
Public support percentage for 2009 (I	ıne 8, column (f) dı	vided by line 13,	column (f))		15		%	
Public support percentage from 2008	Schedule A, Part	III, line 15			16		%	
ction D. Computation of Inves	stment Income	e Percentage	е				_	
Investment income percentage for 20	09 (line 10c, colun	nn (f) divided by	line 13, column (f))		17		%	
Investment income percentage from	2008 Schedule A, I	Part III, line 17	•		18		%	
33 1/3% support tests - 2009. If the	organization did n	ot check the box	k on line 14, and lii	ne 15 is more than 3	3 1/3%	, and line 17 is not	t	
more than 33 1/3%, check this box a	nd stop here. The	organization qua	ulifies as a publicly	supported organiza	ation		ightharpoons	
33 1/3% support tests - 2008. If the	organization did n	ot check a box o	on line 14 or line 19	a, and line 16 is mo	re than	33 1/3%, and		
line 18 is not more than 33 1/3%, che	ck this box and ste	op here. The org	anızatıon qualifies	as a publicly suppo	orted or	ganization	ightharpoons	
Private foundation. If the organization	n did not check a l	box on line 14, 1	9a, or 19b, check	this box and see in	structio	ns	<u> </u>	_
				Sch	edule /	A (Form 990 or 99	0-EZ) 2009	9
	regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is for check this box and stop here ection C. Computation of Publ Public support percentage for 2009 (I Public support percentage from 2008 ection D. Computation of Investing Investment income percentage from 2008 investment income percentage from 2008 a 33 1/3% support tests - 2009. If the more than 33 1/3%, check this box as 33 1/3% support tests - 2008. If the line 18 is not more than 33 1/3%, check	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is for the organization's check this box and stop here Ction C. Computation of Public Support Perelic Support percentage for 2009 (line 8, column (f) di Public support percentage from 2008 Schedule A, Partection D. Computation of Investment Income Investment income percentage from 2008 Schedule A, Partection D. Computation of Investment Income Investment income percentage from 2008 Schedule A, In 33 1/3% support tests - 2009. If the organization did in more than 33 1/3%, check this box and stop here. The 133 1/3% support tests - 2008. If the organization did in line 18 is not more than 33 1/3%, check this box and stop here.	regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is for the organization's first, second, the check this box and stop here Ction C. Computation of Public Support Percentage Public support percentage for 2009 (line 8, column (f) divided by line 13, Public support percentage from 2008 Schedule A, Part III, line 15 Ction D. Computation of Investment Income Percentage Investment income percentage from 2008 Schedule A, Part III, line 17 133 1/3% support tests - 2009. If the organization did not check the box more than 33 1/3%, check this box and stop here. The organization quality as 18 is not more than 33 1/3%, check this box and stop here. The organization for the control of	regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth check this box and stop here Ction C. Computation of Public Support Percentage Public support percentage for 2009 (line 8, column (f) divided by line 13, column (f)) Public support percentage from 2008 Schedule A, Part III, line 15 Ction D. Computation of Investment Income Percentage Investment income percentage from 2008 Schedule A, Part III, line 17 133 1/3% support tests - 2009. If the organization did not check the box on line 14, and line more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly 183 1/3% support tests - 2008. If the organization did not check a box on line 14 or line 15 line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies	regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section check this box and stop here Ction C. Computation of Public Support Percentage Public support percentage for 2009 (line 8, column (f) divided by line 13, column (f)) Public support percentage from 2008 Schedule A, Part III, line 15 Ction D. Computation of Investment Income Percentage Investment income percentage for 2009 (line 10c, column (f) divided by line 13, column (f)) Investment income percentage from 2008 Schedule A, Part III, line 17 133 1/3% support tests - 2009. If the organization did not check the box on line 14, and line 15 is more than 3 and 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization 19 in 19	regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c check this box and stop here Ction C. Computation of Public Support Percentage Public support percentage for 2009 (line 8, column (f) divided by line 13, column (f)) Public support percentage from 2008 Schedule A, Part III, line 15 Ction D. Computation of Investment Income Percentage Investment income percentage from 2008 Schedule A, Part III, line 17 Investment income percentage from 2008 Schedule A, Part III, line 17 Investment income percentage from 2008 Schedule A, Part III, line 17 Investment income percentage from 2008 Schedule A, Part III, line 17 Investment income percentage from 2008 Schedule A, Part III, line 17 Investment income percentage from 2008 Schedule A, Part III, line 17 Investment income percentage from 2008 Schedule A, Part III, line 17 Investment income percentage from 2008 Schedule A, Part III, line 17 Investment income percentage from 2008 Schedule A, Part III, line 17 Investment income percentage from 2008 Schedule A, Part III, line 17 Investment income percentage from 2008 Schedule A, Part III, line 17 Investment income percentage from 2008 Schedule A, Part III, line 17 Investment income percentage from 2008 Schedule A, Part III, line 17 Investment income percentage from 2008 Schedule A, Part III, line 17 Investment income percentage from 2008 Schedule A, Part III, line 17 Investment income percentage from 2008 Schedule A, Part III, line 17 Investment income percentage from 2008 Schedule A, Part III, line 17 Investment income percentage from 2008 Schedule A, Part III, line 17 Investment income percentage from 2008 Schedule A, Part III, line 17 Investment income percentage from 2008 Schedule A, Part III, line 17 Investment income percentage from 2008 Schedule A, Part III, line 17	regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Ction C. Computation of Public Support Percentage Public support percentage for 2009 (line 8, column (f) divided by line 13, column (f)) Public support percentage from 2008 Schedule A, Part III, line 15 Ction D. Computation of Investment Income Percentage Investment income percentage for 2009 (line 10c, column (f) divided by line 13, column (f)) Investment income percentage from 2008 Schedule A, Part III, line 17 13 1/3% support tests - 2009. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is no more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization 33 1/3% support tests - 2008. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions	regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Ction C. Computation of Public Support Percentage Public support percentage for 2009 (line 8, column (f) divided by line 13, column (f)) Public support percentage from 2008 Schedule A, Part III, line 15 Ction D. Computation of Investment Income Percentage Investment income percentage from 2008 Schedule A, Part III, line 17 Investment income percentage from 2008 Schedule A, Part III, line 17 Investment income percentage from 2008 Schedule A, Part III, line 17 Investment income percentage from 2008 Schedule A, Part III, line 17 Investment income percentage from 2008 Schedule A, Part III, line 17 Investment income percentage from 2008 Schedule A, Part III, line 17 Investment income percentage from 2008 Schedule A, Part III, line 17 Investment income percentage from 2008 Schedule A, Part III, line 17 Investment income percentage from 2008 Schedule A, Part III, line 17 Investment income percentage from 2008 Schedule A, Part III, line 17 Investment income percentage from 2008 Schedule A, Part III, line 17 Investment income percentage from 2008 Schedule A, Part III, line 17 Investment income percentage from 2008 Schedule A, Part III, line 17 Investment income percentage from 2008 Schedule A, Part III, line 17 Investment income percentage from 2008 Schedule A, Part III, line 17 Investment income percentage from 2008 Schedule A, Part III, line 17 Investment income percentage from 2008 Schedule A, Part III, line 17 Investment income percentage from 2008 Schedule A, Part III, line 17 Investment income percentage from 2008 Schedule A, Part III, line 17 Investment income percentage from 2008 Schedule A, Part III, line 17 Investment income percentage from 2008 Schedule A

Schedule D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047 **Open to Public** Inspection

Name of the organization

TNSTITUTE FOR HIGHER EDUCATION POLICY

Employer identification number 52-1818907

Pai	rt I Organizations Maintaining Donor Advise		s or Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, line		·
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor advi	sed funds
Ť	are the organization's property, subject to the organization's	<u> </u>	Yes No
6	Did the organization inform all grantees, donors, and donor a	•	
Ŭ	for charitable purposes and not for the benefit of the donor of	• •	•
	impermissible private benefit?	or definer devisor, or for any exhall purpose	Yes No
Pai	rt II Conservation Easements. Complete if the org	ganization answered "Yes" to Form 990.	
1	Purpose(s) of conservation easements held by the organization		
·	Preservation of land for public use (e.g., recreation or p	· · · · · · · · · · · · · · · · · · ·	storically important land area
	Protection of natural habitat		rtified historic structure
	Preservation of open space		times meteric cursulate
2	Complete lines 2a through 2d if the organization held a qualit	fied conservation contribution in the form	of a conservation easement on the last
_	day of the tax year		Total conton varion capement on the last
	an, or are tall you.		Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
c	Number of conservation easements on a certified historic str	ructure included in (a)	2c
d		• •	2d
3	Number of conservation easements modified, transferred, re		ne organization during the tax
	year >	3 ,	3
4	Number of states where property subject to conservation ea	sement is located	
5	Does the organization have a written policy regarding the per		
	violations, and enforcement of the conservation easements i	t holds?	Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,	and enforcing conservation easements	during the year
7	Amount of expenses incurred in monitoring, inspecting, and	enforcing conservation easements during	g the year ▶ \$
8	Does each conservation easement reported on line 2(d) above	ve satisfy the requirements of section 17	O(h)(4)(B)(i)
	and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIV, describe how the organization reports conservat	ion easements in its revenue and expens	se statement, and balance sheet, and
	include, if applicable, the text of the footnote to the organiza	tion's financial statements that describes	s the organization's accounting for
	conservation easements		
Pa	rt III Organizations Maintaining Collections o	f Art, Historical Treasures, or C	Other Similar Assets.
	Complete if the organization answered "Yes" to Form	990, Part IV, line 8.	
1a	If the organization elected, as permitted under SFAS 116, no	ot to report in its revenue statement and l	balance sheet works of art, historical
	treasures, or other similar assets held for public exhibition, ea	ducation, or research in furtherance of pi	ublic service, provide, in Part XIV, the text of
	the footnote to its financial statements that describes these	items	
b	If the organization elected, as permitted under SFAS 116, to	report in its revenue statement and bala	nce sheet works of art, historical treasures,
	or other similar assets held for public exhibition, education, of	or research in furtherance of public service	ce, 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 tre	asures, or other similar assets for financi	al gaın, provide
	the following amounts required to be reported under SFAS 1	16 relating to these items:	
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 Instructions for Form 990. 932051 02**-**01-10

Schedule D (Form 990) 2009

Sche	dule D (Form 990) 2009 INSTITU	TE FOR HIG	HER EDUC	ATION PO	LICY		52-18	1890	7 Pa	age 2
	t III Organizations Maintaining C									
3	Using the organization's acquisition, accessi									
	(check all that apply)									
а	Public exhibition	d	Loan or	exchange progr	ams					
b	Scholarly research	е	Other							
С	Preservation for future generations				_			-		
4	Provide a description of the organization's co	ollections and explai	n how they furth	er the organizat	ion's exe	empt purp	ose in Par	t XIV		
5	During the year, did the organization solicit of	· ·	•	-						
	to be sold to raise funds rather than to be ma							Yes		No_
Par	t IV Escrow and Custodial Arran	gements. Comple	ete if organization	answered "Ye	s" to Fo	rm 990, Pa	art IV, line	9, or		
	reported an amount on Form 990, Pa									
1a	Is the organization an agent, trustee, custod	an or other intermed	lary for contribu	tions or other as	ssets no	t included				
	on Form 990, Part X?		•	_				Yes] No
b	If "Yes," explain the arrangement in Part XIV	and complete the fo	llowing table							
	-	·						Amount	t	
С	Beginning balance					1c				
d	Additions during the year					1d				
е	Distributions during the year					1e				
f	Ending balance					1f				
2a	Did the organization include an amount on F	orm 990, Part X, line	21?					Yes		No
b	If "Yes," explain the arrangement in Part XIV									
Par	t V Endowment Funds. Complete	f the organization ar	swered "Yes" to	Form 990, Part	IV, line	10.				
		(a) Current year	(b) Prior year	(c) Two yea	rs back	(d) Three	years back	(e) Four	years	back_
1a	Beginning of year balance									
b	Contributions									
С	Net investment earnings, gains, and losses									
d	Grants or scholarships									
е	Other expenditures for facilities									
	and programs									
f	Administrative expenses									
g	End of year balance									
2	Provide the estimated percentage of the year	r end balance held a	ıs							
а	Board designated or quasi-endowment		%							
b	Permanent endowment	%								
С	Term endowment ▶	%								
3a	Are there endowment funds not in the posse	ssion of the organiz	ation that are he	d and administe	ered for	the organi	zation			
	by.								Yes	No_
	(i) unrelated organizations							3a(i)		
	(ii) related organizations							3a(ii)		
b	If "Yes" to 3a(ii), are the related organizations	s listed as required o	n Schedule R?					3b		
4	Describe in Part XIV the intended uses of the									
Par	t VI Investments - Land, Building	gs, and Equipm	ent. See Form 9	990, Part X, line	10					
	Description of investment	(a) Cost or o	ther (b) C	ost or other	(c) A	Accumulat	ed	(d) Boo	k valu	е
		basis (investr	nent) ba	sis (other)	de	preciation	1			
1a	Land									
b	Buildings			·						
c	Leasehold improvements			33,723.		26,8				<u>09.</u>
d	Equipment			1 <u>42,649.</u>		<u>133,9</u>	85.		8,6	<u>64.</u>
e	Other									
Total	. Add lines 1a through 1e (Column (d) must e	qual Form 990, Part	X, column (B), lii	ne 10(c).)				1	<u>5,5</u>	73.

Schedule D (Form 990) 2009

Schedule D (Form 990) 2009 INSTITUTE I Part VII Investments - Other Securities. S	FOR HIGHER ee Form 990, Part X.	EDUCATION line 12	POL1	CY 52	-1818907	Page 3			
(a) Description of security or category (including name of security)	(b) Book valu		(c) Method of valuation Cost or end-of-year market value						
Financial derivatives				<u> </u>					
Closely-held equity interests									
Other									
Total. (Col (b) must equal Form 990, Part X, col (B) line 12.)									
Part VIII Investments - Program Related.	See Form 990, Part X	K, line 13.		(a) Mothod of value	ation.				
(a) Description of investment type	(b) Book valu	e		(c) Method of valua t or end-of-year mar					
- Continue on						 -			
1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -									
			-						
				THE PERSON NAMED IN COLUMN 1					
Total. (Col (b) must equal Form 990, Part X, col (B) line 13.)	!								
Part IX Other Assets. See Form 990, Part X, line					(1) Daali	- l			
(a) Description				(b) Book va	aiue			
			-						
Total. (Column (b) must equal Form 990, Part X, col (B) lin	e 15)	· · · · · · · · · · · · · · · · · · ·							
Part X Other Liabilities. See Form 990, Part X	, line 25	,							
1 (a) Description of liability		(b) Amount							
Federal income taxes									
DEFERRED RENT		56,8	325.						
		 							
		 							
		 	—-						
Total. (Column (b) must equal Form 990, Part X, col (B) lin	e 25)	56,8	325						
2. FIN 48 Footnote. In Part XIV, provide the text of the for				that reports the ord	anization's liabili	tv for			
uncertain tax positions under FIN 48		state			,	-, . 			
932053 02-01-10				Sch	edule D (Form 9	90) 2009			

_	dule D (Form 990) 2009 INSTITUTE FOR HIGHER EDUC					<u> 1818907</u>	Page 4
Pa	t XI Reconciliation of Change in Net Assets from Form 990	to Audi	ted Financ	cial Sta	temen		
1	Total revenue (Form 990, Part VIII, column (A), line 12)			1		<u>5,120</u>	
2	Total expenses (Form 990, Part IX, column (A), line 25)			2		3,060	
3	Excess or (deficit) for the year Subtract line 2 from line 1			3		2,060	<u>,650.</u>
4	Net unrealized gains (losses) on investments			4			
5	Donated services and use of facilities			5		 	
6	Investment expenses .			6			
7	Prior period adjustments			7 8			
8	Other (Describe in Part XIV)						
9	Total adjustments (net) Add lines 4 through 8			0.			
10 Date	Excess or (deficit) for the year per audited financial statements Combine lines 3 t XII Reconciliation of Revenue per Audited Financial State	3 and 9	Viale Davis	10	D = 4:	2,060	<u>,650.</u>
		ments v	vitn Reven	ue per			0.00
1	Total revenue, gains, and other support per audited financial statements				1	5,120	,800.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	ء ا	ı				
a	Net unrealized gains on investments	2a					
D	Donated services and use of facilities	2b			-		
С.	Recoveries of prior year grants	2c					
d	Other (Describe in Part XIV)	2d]		-		•
е	Add lines 2a through 2d				2e	F 100	0.
3	Subtract line 2e from line 1				3	5,120	,800.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1	١.	I				
a	Investment expenses not included on Form 990, Part VIII, line 7b	_4a			_		
b	Other (Describe in Part XIV)	4b	<u> </u>		-		•
c	Add lines 4a and 4b				4c	F 100	0.
Pai	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12) † XIII Reconciliation of Expenses per Audited Financial State	omonts !	Mith Evno	2000 20	5 Dotu	5,120	866.
	· · · · · · · · · · · · · · · · · · ·	ements .	with Expe	iises þe			216
1	Total expenses and losses per audited financial statements				1	3,060	, 410.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	1 -	1				
a	Donated services and use of facilities	2a	1		-		
D	Prior year adjustments Other losses	2b			\dashv \mid		
C		2c			\dashv \mid		
ď	Other (Describe in Part XIV) Add lines 2a through 2d	2d			-		^
e					2e	3,060	0.
3	Subtract line 2e from line 1				3	3,060	, 410.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1	1.	t				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		· · ·			
	Other (Describe in Part XIV)	4b			┥.		^
_	Add lines 4a and 4b Total expenses Add lines 0 and 4a. (This revertible with Fourth COO. Dort / for 18.)				4c	2 060	0.
5 Par	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18) † XIV Supplemental Information				5	3,060	410.
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Pa	ert III. linne	1a and 4: Day	t IV lines	1b and f	Oh: Port V line	4: Port
	e 2; Part XI, line 8, Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also co						4, Pan
	RT X: IN JUNE 2006, THE FINANCIAL ACCOUNT					imormation.	
1111	IN THE PRIMARCIAL ACCOUNT	IING D	IMIDAN	טם טט	אני		
(FZ	ASB) RELEASED FASB ASC 740-10, INCOME TAX	ਪਸ਼ਤ ਪ	יאם ייעוי	אמדטב	S GII	IDANCE I	7OR
7=-	1	<u>, .</u>		JVIDE	<u>D</u> 00.	IDIMICE I	<u> </u>
REI	PORTING UNCERTAINTY IN INCOME TAXES. FOR	THE Y	EAR EN	ם משם	ECEM	BER 31.	
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<u> 200</u>	9, THE INSTITUTE HAS DOCUMENTED ITS CONS	SIDERA	TION O	F FAS	B AS	C 740-10)
<u>ANI</u>	DETERMINED THAT NO MATERIAL UNCERTAIN	rax PC	SITION	S QUA	LIFY	FOR EIT	HER
	COGNITION OR DISCLOSURE IN THE FINANCIAL						
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SCHEDULE I (Form 990)

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

2009

Department of the Treasury Internal Revenue Service Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

➤ Attach to Form 990.

Open to Public 1

Name of the organization							Employer identification number
Part I General Information on Grants a		HER EDUCATION	ON POLICY				52-1818907
 Does the organization maintain records to criteria used to award the grants or assist 		e amount of the grant	s or assistance, the	grantees' eligibilit	y for the grants or ass	sistance, and the selec	X Yes No
2 Describe in Part IV the organization's pro		itoring the use of gree	t funda in the Unite	d States			LA Yes L No
Part II Grants and Other Assistance to			•		onization analysis d "\	Vos" to Form 000. Dort	IV less 21 for any
recipient that received more than \$		•		•			· —
1 (a) Name and address of organization or government	(b) EIN	(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
SALISH KOOTENAI COLLEGE PO BOX 70 PABLO, MT 59855	81-0378823	501(C)(3)	58,025.	0,			SALISH KOOTENAI COLLEGE IS DEVELOPING A COORDINATED, EVIDENCE-BASED ACADEMIC
CLAFLIN UNIVERSITY 400 MAGNOLIA STREET ORANGEBUG SC 29115	57-0314374	501(C)(3)	58,025.	0.			CLAFLIN UNIVERSITY IS IMPLEMENTING THE LEARNING IN COMMUNITIES FOR SUCCESS (LINCS) PROJECT
NORFOLK STATE UNIVERISTY 700 PARK AVE. W.L. NORFOLK VA 23504	54-6002808		58.025.	0,			NSU'S PROJECT, "LEARNING TO LEARN"(L2L), IS DESIGNED TO INCREASE FIRST-GENERATION STUDENTS
MOUNT ST. MARY'S COLLEGE 12001 CHALON ROAD LOS ANGELES, CA 90049	95-1641455	501(C)(3)	58.025.	0,			MSMC IS EXTENDING THE WORK, PHILOSOPHY AND DIVERSITY OF THE SUMMER BRIDGE PROGRAM (SUMMER
TENNESSEE STATE UNIVERSITY BOX 3500 JOHN MERRITT BLVD. BOX 954 NASHVILLE, TN 37209	62-0786119		58,025,	0.			TENNESSEE STATE UNIVERSITY IS IMPLEMENTING A COHORT-BASED LEARNING
UNIVERSITY OF THE DISTRICT OF COLUMBIA - 4200 CONNECTICUT AVENUE, NW BUILDING 39-301M - WASHINGTON, DC 20008	53-6001131		58,025.	0.			UNIVERSITY OF THE DISTRICT OF COLUMBIA'S PROJECT, PROJECT SOAR4, IS BEING DEVELOPED WITH
2 Enter total number of section 501(c)(3) at 3 Enter total number of other organizations	nd government o			<u> </u>			► 15. ► 0.

STUDENTS WHO REQUIRE DEVELOPMENTAL COURSEWORK. PROGRAM ACTIVITIES WILL

SCHEDULE I-1 (Form 990) Department of the Treasury Internal Revenue Service

Continuation Sheet for Schedule I (Form 990) Attach to Form 990 to list additional information for Schedule I (Form 990), Part II or Part III.

2009
Open to Public Inspection

Name of the organization

INSTITUTE FOR HIGHER EDUCATION POLICY

Employer identification number 52-1818907

(a) Name and address of	(b) EIN	(c) IRC section	(d) Amount of	(e) Amount of	(f) Method of	(g) Description of	(h) Purpose of grant
organization or government	(3, =	if applicable	cash grant	non-cash assistance	valuation (book, FMV, appraisal, other)	non-cash assistance	or assistance
							COLORADO STATE
COLORADO STATE UNIVERSITY		1					UNIVERSITY-PUEBLO IS
200 BONFORTE BLVD							DEVELOPING FACULTY AND
UEBLO, CO 81001	84-0517947		58,025,	0.			STUDENT MENTORING OF
							UNIVERSITY OF THE
NIVERSITY OF THE INCARNATE WORLD							INCARNATE WORD'S PROJEC
301 BROADWAY			}				FOCUS IS A FACULTY
SAN ANTONIO, TX 78209	74-1109661	501(C)(3)	58,025.	0.			DEVELOPMENT PROGRAM
							SPELMAN COLLEGE IS
SPELMAN COLLEGE							DEVELOPING ON A
50 SPELMAN LN. SW							TWO-SEMESTER, FIRST-YEA
TLANTA GA 30314	58-0566243	501(C)(3)	58,025.	0,			SEMINAR TO INCREASE
							FLORIDA INTERNATIONAL
LORIDA INTERNATIONAL UNIVERSITY							UNIVERSITY WILL FOLLOW
.1200 SW 8TH ST. PC 238							COHORTS OF 150
IIAMI_ FL 33199	65-0177616	501(C)(3)	58,025.	0.			FIRST-GENERATION
•							LAGUARDIA COMMUNITY
ESEARCH FOUNDATION OF THE CITY							COLLEGE IS INTEGRATING
NIVERSITY - 230 WEST 41ST ST. 7TH							COHORT OF DEGREE-SEEKIN
LOOR - NEW YORK NY 10036	13-1988190	501(C)(3)	58,025,	0.			FIRST-GENERATION STUDEN
							NIC IS BUILDING UPON AN
ORTHWEST INDIAN COLLEGE							STRENGTHENING ITS
522 KWINA ROAD							FIRST-YEAR EXPERIENCE
ELLINGHAM WA 98226	91-0905644	501(C)(3)	58,025.	0,			PROGRAM TO BETTER SERVE
							THE CALIFORNIA STATE
ALIFORNIA STATE UNIVERSITY		1					 UNIVERSITY-FRESNO PROJE
910 N. CHESTER AVE						}	 TARGETS FIRST-GENERATIO
RESNO CA 93726	94-6003272	501(C)(3)	58,025,	0,			STUDENTS IN NEED OF
		 	, ,				BENNETT COLLEGE FOR WON
BENNETT COLLEGE							IS DEVELOPING
900 E. WASHINGTON STREET							 FIRST-GENERATION STUDEN
GREENSBORO NC 27401	56-0532296		58,025.	0.	l		LEARNING COMMUNITIES.

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

Schedule I-1 (Form 990) 2009

SCHEDULE I-1 (Form 990) Department of the Treasury Internal Revenue Service

Continuation Sheet for Schedule I (Form 990) Attach to Form 990 to list additional information for Schedule I (Form 990), Part II or Part III.

OMB No 1545-0047 2009 Open to Public Inspection

Name of the organization

TNSTITUTE FOR HIGHER EDUCATION POLICY

Employer identification number 52-1818907

		ER EDUCATIO		· · · · · · · · · · · · · · · · · · ·			52-1818907
Part I Continuation of Grants and Othe	r Assistance to Go	vernments and Orga	nizations in the U	nited States (Sch	edule I (Form 990), Pa	art II)	
(a) Name and address of organization or government	(b) EIN	(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 assistanc	(h) Purpose of grant or assistance
AVAJO TECHNICAL COLLEGE O BOX 849 ROWNPOINT NM 87313	85-0303705	501(C)(3)	58,295,	0.			NAVAJO TECHNICAL COLLEG WILL 1) IMPLEMENT COLLABORATIVE, INTERDISCIPLINARY
							

NAME OF ORGANIZATION OR GOVERNMENT: MOUNT ST. MARY'S COLLEGE

Schedule I (Form 990) 2009

SELF-DIRECTED LEARNING SKILLS.

932291 04-24-09

STUDENTS IN NEED OF DEVELOPMENTAL COURSES. PROJECT SOAR4 WILL CREATE A

LEARNING COMMUNITY FOR 100 OF THESE STUDENTS WHO WILL FORM COHORTS

ATTENDING DEVELOPMENTAL ENGLISH, DEVELOPMENTAL MATH, FRESHMEN

NAME OF ORGANIZATION OR GOVERNMENT: SPELMAN COLLEGE

(H) PURPOSE OF GRANT OR ASSISTANCE: SPELMAN COLLEGE IS DEVELOPING ON A

TWO-SEMESTER, FIRST-YEAR SEMINAR TO INCREASE ACADEMIC SUCCESS FOR

FIRST-GENERATION STUDENTS. FACULTY WILL LEAD THE SEMINAR AND WILL SERVE

AS ADVISORS TO PARTICIPANTS. THE SEMINAR WILL FOCUS ON BUILDING

FIRST-GENERATION STUDENTS' CAPACITY TO THINK CRITICALLY, ANALYZE, AND

Schedule | (Form 990) 2009

Schedule I (Form 990) 2009

1

Schedule (Form 990) 2009 INSTITUTE FOR HIGHER EDUCATION POLICY 52-1818907 Page 2 Part IV Supplemental Information
CULTURALLY RELEVANT TEACHING AND LEARNING APPROACHES; IMPROVE AND
STANDARDIZE THE INTRODUCTION TO SUCCESSFUL LEARNING COURSE; AND EXPAND
AND TAILOR THE FAMILY EDUCATION MODEL FOR THE PURPOSE OF CREATING A
NETWORK OF SUPPORT SIMILAR TO THAT WHICH IS PROVIDED BY STUDENTS'
FAMILIES.
NAME OF ORGANIZATION OR GOVERNMENT: CALIFORNIA STATE UNIVERSITY
(H) PURPOSE OF GRANT OR ASSISTANCE: THE CALIFORNIA STATE
UNIVERSITY-FRESNO PROJECT TARGETS FIRST-GENERATION STUDENTS IN NEED OF
ADDITIONAL PREPARATION IN MATH AND ENGLISH THROUGH THE IMPLEMENTATION OF
INTEGRATED LEARNING COMMUNITIES FOCUSING ON READING, MATH, WRITTEN AND
ORAL COMMUNICATION, CRITICAL THINKING, HISTORY AND GOVERNMENT. STUDENT
SUCCESS GOALS INCLUDE INCREASED STUDENT LEARNING, INCREASED PERSISTENCE,
AND INCREASED ENGAGEMENT.
NAME OF ORGANIZATION OR GOVERNMENT: BENNETT COLLEGE
(H) PURPOSE OF GRANT OR ASSISTANCE: BENNETT COLLEGE FOR WOMEN IS
DEVELOPING FIRST-GENERATION STUDENT LEARNING COMMUNITIES. BEGINNING THE
SUMMER PRIOR TO THE FALL SEMESTER, CONDITIONALLY ACCEPTED
FIRST-GENERATION STUDENTS WILL TAKE THREE REQUIRED COURSES - ENGLISH,
MATH, AND ORIENTATION - TO ACCELERATE REMEDIAL COURSEWORK REQUIREMENTS
AND PROVIDE THEM WITH THE NECESSARY TOOLS TO SUCCESSFULLY COMPLETE
CREDIT-BEARING COURSEWORK IN THEIR FIRST YEAR.
NAME OF ORGANIZATION OR GOVERNMENT: NAVAJO TECHNICAL COLLEGE
(H) PURPOSE OF GRANT OR ASSISTANCE: NAVAJO TECHNICAL COLLEGE WILL 1)
IMPLEMENT COLLABORATIVE, INTERDISCIPLINARY, STUDENT-INITIATED RESEARCH
PROJECTS DESIGNED TO INCREASE MOTIVATION TO ACHIEVE ACADEMIC SUCCESS FOR

Schedule I (Form 990) 2009

Schedule I (Form 990) 2009 INSTITUTE FOR HIGHER EDUCATION POLICY 52-1818907 Page 2 Part IV Supplemental Information
Part 14 Supplemental information
THE COLLEGE'S FIRST-GENERATION STUDENTS; AND 2) INCREASE THE PERCENTAGE
OF THE COLLEGE'S FIRST-GENERATION STUDENTS THAT CHOOSE TO EARN AN
ASSOCIATE'S DEGREE AFTER EARNING THEIR CERTIFICATE.
·

SCHEDULE O

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

Attach to Form 990.

2009
Open to Public Inspection

Name of the organization

INSTITUTE FOR HIGHER EDUCATION POLICY

Employer identification number 52-1818907

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION: SOCIAL DEVELOPMENT. FORM 990, PART VI, SECTION B, LINE 11: THE 990 WAS PREPARED BY THE OUTSIDE ACCOUNTANTS AND REVIEWED BY SENIOR MANAGEMENT. THE DRAFT 990 FORM WAS THIS WAS DONE WITH REVIEW FROM IHEP'S PROVIDED ELECTRONICALLY TO THE BOARD. AUDIT COMMITTEE, WHICH REPORTED TO THE BOARD ABOUT THE FILING AND ASKED IF ANY OTHER MEMBER OF THE BOARD HAD ANY OUESTIONS/COMMENTS BEFORE FILING. FORM 990, PART VI, SECTION B, LINE 12C: IHEP MONITORS THIS EACH YEAR BY REOUIRING THE BOARD MEMBERS AND EMPLOYEES TO DISCLOSE ANY NEW INFORMATION. THROUGHOUT THE YEAR, THE PRESIDENT IS ALERTED IF THERE ARE ANY CHANGES PRIOR TO THE YEARLY DISCLOSE. FORM 990, PART VI, SECTION B, LINE 15A: THE MANAGEMENT DEVELOPMENT AND COMPENSATION COMMITTEE, WHICH IS MADE UP OF INDEPENDENT BOARD MEMBERS, ESTABLISHED PERFORMANCE GOALS AND OBJECTIVES, CONDUCTED YEAR-END REVIEWS, AND EVALUATED THESE (MEASUREABLE) PERFORMANCE GOALS. APPROPRIATE BASED ON INFORMAL COMPARISON OF LIKE ORGANIZATIONS, COMPENSATION, DETERMINED AND RECOMMENDED BY THE MDC COMMITTEE MANAGEMENT AND SUPERVISORS MUTUALLY ESTABLISH PERFORMANCE GOALS AND OBJECTIVES CONDUCTED AT YEAR-END AND REVIEW AND EVALUATE THESE (MEASUREABLE) PERFORMANCE GOALS. APPROPRIATE COMPENSATION, BASED ON INFORMAL COMPARISON OF LIKE ORGANIZATIONS, IS DETERMINED AND RECOMMENDED BY THE MDC COMMITTEE

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

Schedule O (Form 990) 2009

SCHEDULE 0

(Form 990)

Department of the Treasury
Internal Revenue Service

Name of the organization

Supplemental Information to Form 990

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

Attach to Form 990.

2009
Open to Public Inspection

Name of the organization			INSTITUTE FOR HIGHER EDUCATION POLICY							Emplo 52-	Employer identification number 52-1818907					
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FORM	990,	PART	VI,	SECT	ION	C,	LINE	<u> 19</u>	THE	FIN	ANCIA	L STA	remen'	rs,	GOVE	RNING
DOCUI	MENTS,	AND	CONI	LICT	OF	IN	<u>reres</u>	ST PO	LICY	ARE	AVAI	LABLE	UPON	REC	UEST	•
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