

Form 990

Return of Organization Exempt From Income Tax

OMB No 1545-0047

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

2007

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

A For the 2007 calendar year, or tax year beginning 07-01-2007 and ending 06-30-2008

- B Check if applicable: Address change, Name change, Initial return, Final return, Amended return, Application pending

C Name of organization: ALUMNI ASSOCIATION OF THE BRONX HIGH SCHOOL OF SCIENCE. Number and street (or P O box if mail is not delivered to street address) Room/suite: PO BOX 145 JEROME AVENUE STATION. City or town, state or country, and ZIP + 4: BRONX, NY 104680145

D Employer identification number: 13-3068924. E Telephone number: (718) 733-6837. F Accounting method: [] Cash [x] Accrual [] Other (specify)

Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).

- H and I are not applicable to section 527 organizations. H(a) Is this a group return for affiliates? [] Yes [x] No. H(b) If "Yes" enter number of affiliates. H(c) Are all affiliates included? [] Yes [] No. H(d) Is this a separate return filed by an organization covered by a group ruling? [] Yes [x] No.

G Web site: N/A

J Organization type (check only one) [x] 501(c) (3) (insert no) [] 4947(a)(1) or [] 527

K Check here [] if the organization is not a 509(a)(3) supporting organization and its gross receipts are normally not more than 25,000. A return is not required, but if the organization chooses to file a return, be sure to file a complete return

I Group Exemption Number. M Check [] if the organization is not required to attach Sch B (Form 990, 990-EZ, or 990-PF)

L Gross receipts Add lines 6b, 8b, 9b, and 10b to line 12: 1,123,516

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instructions.)

Table with 21 rows and 3 columns: Line number, Description, and Amount. Includes sections for Revenue (lines 1-12), Expenses (lines 13-17), and Net Assets (lines 18-21). Total revenue is 1,123,516 and total expenses is 817,867, resulting in an excess of 305,649.

Part III Statement of Functional Expenses

All organizations must complete column (A) Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others (See the instructions.)

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.

	(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22a Grants paid from donor advised funds (attach Schedule) (cash \$ _____ noncash \$ _____) If this amount includes foreign grants, check here <input type="checkbox"/>	22a			
22b Other grants and allocations (attach schedule) (cash \$ <u>38,339</u> noncash \$ _____) If this amount includes foreign grants, check here <input type="checkbox"/>	22b	38,339	38,339	
23 Specific assistance to individuals (attach schedule)	23			
24 Benefits paid to or for members (attach schedule)	24			
25a Compensation of current officers, directors, key employees etc Listed in Part V-A (attach schedule)	25a	71,276	32,074	21,383
b Compensation of former officers, directors, key employees etc listed in Part V-B (attach schedule)	25b			
c Compensation and other distributions not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) (attach schedule)	25c			
26 Salaries and wages of employees not included on lines 25a, b and c	26			
27 Pension plan contributions not included on lines 25a, b and c	27			
28 Employee benefits not included on lines 25a - 27	28			
29 Payroll taxes	29	5,807	2,613	1,742
30 Professional fundraising fees	30			
31 Accounting fees	31	7,100		7,100
32 Legal fees	32			
33 Supplies	33	438		194
34 Telephone	34	1,500	1,125	300
35 Postage and shipping	35	19,174	5,345	420
36 Occupancy	36			
37 Equipment rental and maintenance	37			
38 Printing and publications	38	77,563	58,598	18,965
39 Travel	39			
40 Conferences, conventions, and meetings	40			
41 Interest	41			
42 Depreciation, depletion, etc (attach schedule)	42	772	176	184
43 Other expenses not covered above (itemize)				
a MISCELLANEOUS	43a	6,431		6,311
b INSURANCE WORKER'S COMP	43b	360	162	108
c SCHOOL IMPROVEMENTS	43c	581,489	581,489	
d CLASS REUNIONS	43d	2,419	2,419	
e insurance	43e	1,750		1,750
f mailings	43f	3,449		3,449
g	43g			
44 Total functional expenses. Add lines 22a through 43g (Organizations completing columns (B)-(D), carry these totals to lines 13-15)	44	817,867	722,340	39,492

Joint Costs. Check if you are following SOP 98-2

Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services? Yes No

If "Yes," enter (i) the aggregate amount of these joint costs \$ _____, (ii) the amount allocated to Program services \$ _____, (iii) the amount allocated to Management and general \$ _____, and (iv) the amount allocated to Fundraising \$ _____

Part III Statement of Program Service Accomplishments (See the instructions.)

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments.

What is the organization's primary exempt purpose? SEE BELOW All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of clients served, publications issued, etc. Discuss achievements that are not measurable. (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.)	Program Service Expenses (Required for 501(c)(3) and (4) orgs, and 4947(a)(1) trusts, but optional for others.)
a OPERATION OF ALUMNI OFFICE AT THE HIGH SCHOOL AND THE PRINTING AND MAILING TO ALL REGISTERED ALUMNI A NEWSLETTER 3 TIMES A YEAR (Grants and allocations \$) If this amount includes foreign grants, check here <input type="checkbox"/>	90,432
b SUPPORT THE ACTIVITIES OF THE HIGH SCHOOL PROVIDING FUNDING FOR SPECIFIC SCHOOL PROGRAMS (Grants and allocations \$) If this amount includes foreign grants, check here <input type="checkbox"/>	592,118
c GRANT SCHOLARSHIPS AND WORK STUDY AWARDS TO CURRENT STUDENTS (Grants and allocations \$ 38,339) If this amount includes foreign grants, check here <input type="checkbox"/>	39,790
d _____ _____ _____ _____ _____ (Grants and allocations \$) If this amount includes foreign grants, check here <input type="checkbox"/>	
e Other program services (attach schedule) (Grants and allocations \$) If this amount includes foreign grants, check here <input type="checkbox"/>	
f Total of Program Service Expenses (should equal line 44, column (B), Program services) <input type="checkbox"/>	722,340

Part IV Balance Sheets (See the instructions.)

Note: Where required, attached schedules and amounts within the description column should be for end-of-year amounts only.

		(A)		(B)	
		Beginning of year		End of year	
Assets	45 Cash—non-interest-bearing	13,641	45	25,621	
	46 Savings and temporary cash investments	632,652	46	1,053,886	
	47a Accounts receivable	47a			
	b Less allowance for doubtful accounts	47b		47c	
	48a Pledges receivable	48a			
	b Less allowance for doubtful accounts	48b		48c	
	49 Grants receivable		49		
	50a Receivables from current and former officers, directors, trustees, and key employees (attach schedule)		50a		
	b Receivables from other disqualified persons (as defined under section 4958(c)(3)(B) (attach schedule)		50b		
	51a Other notes and loans receivable (attach schedule)	51a			
	b Less allowance for doubtful accounts	51b		51c	
	52 Inventories for sale or use		52		
	53 Prepaid expenses and deferred charges		53		
	54a Investments—publicly-traded securities <input type="checkbox"/> Cost <input type="checkbox"/> FMV		54a		
	b Investments—other securities (attach schedule) <input type="checkbox"/> Cost <input type="checkbox"/> FMV		54b		
	55a Investments—land, buildings, and equipment basis	55a			
	b Less accumulated depreciation (attach schedule)	55b		55c	
	56 Investments—other (attach schedule)	181,594	56	161,159	
	57a Land, buildings, and equipment basis	57a	15,737		
b Less accumulated depreciation (attach schedule)	57b	13,664			
58 Other assets, including program-related investments (describe <input type="checkbox"/> _____)			58		
59 Total assets (must equal line 74) Add lines 45 through 58	830,732	59	1,242,739		
Liabilities	60 Accounts payable and accrued expenses	21,914	60	15,367	
	61 Grants payable	336,362	61	459,880	
	62 Deferred revenue		62		
	63 Loans from officers, directors, trustees, and key employees (attach schedule)		63		
	64a Tax-exempt bond liabilities (attach schedule)		64a		
	b Mortgages and other notes payable (attach schedule)		64b		
	65 Other liabilities (describe <input type="checkbox"/> _____)	4,000	65	14,103	
66 Total liabilities Add lines 60 through 65	362,276	66	489,350		
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74				
	67 Unrestricted	116,839	67	91,811	
	68 Temporarily restricted	330,189	68	642,159	
	69 Permanently restricted	21,428	69	19,419	
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 70 through 74				
	70 Capital stock, trust principal, or current funds		70		
	71 Paid-in or capital surplus, or land, building, and equipment fund		71		
	72 Retained earnings, endowment, accumulated income, or other funds		72		
	73 Total net assets or fund balances Add lines 67 through 69 or lines 70 through 72 (Column (A) must equal line 19 and column (B) must equal line 21)	468,456	73	753,389	
	74 Total liabilities and net assets / fund balances Add lines 66 and 73	830,732	74	1,242,739	

Part IV-A Reconciliation of Revenue per Audited Financial Statements With Revenue per Return (See the instructions.)

a	Total revenue, gains, and other support per audited financial statements	a	1,102,798
b	Amounts included on line a but not on Part I, line 12		
1	Net unrealized gains on investments	b1	-20,716
2	Donated services and use of facilities	b2	
3	Recoveries of prior year grants	b3	
4	Other (specify) _____	b4	-2
	Add lines b1 through b4	b	-20,718
c	Subtract line b from line a	c	1,123,516
d	Amounts included on Part I, line 12, but not on line a :		
1	Investment expenses not included on Part I, line 6b	d1	
2	Other (specify) _____	d2	
	Add lines d1 and d2	d	-20,718
e	Total revenue (Part I, line 12) Add lines c and d	e	1,123,516

Part IV-B Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

a	Total expenses and losses per audited financial statements	a	817,867
b	Amounts included on line a but not on Part I, line 17		
1	Donated services and use of facilities	b1	
2	Prior year adjustments reported on Part I, line 20	b2	
3	Losses reported on Part I, line 20	b3	
4	Other (specify) _____	b4	
	Add lines b1 through b4	b	
c	Subtract line b from line a	c	817,867
d	Amounts included on Part I, line 17, but not on line a :		
1	Investment expenses not included on Part I, line 6b	d1	
2	Other (specify) _____	d2	
	Add lines d1 and d2	d	
e	Total expenses (Part I, line 17) Add lines c and d	e	817,867

Part V-A Current Officers, Directors, Trustees, and Key Employees (List each person who was an officer, director, trustee, or key employee at any time during the year even if they were not compensated.) (See the instructions.)

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (If not paid, enter -0-.)	(D) Contributions to employee benefit plans & deferred compensation plans	(E) Expense account and other allowances
See Additional Data Table				

Part V-A Current Officers, Directors, Trustees, and Key Employees *(continued)*

75a	Enter the total number of officers, directors, and trustees permitted to vote on organization business at board meetings	<u>16</u>		
75b	b Are any officers, directors, trustees, or key employees listed in Form 990, Part V-A, or highest compensated employees listed in Schedule A, Part I, or highest compensated professional and other independent contractors listed in Schedule A, Part II-A or II-B, related to each other through family or business relationships? If "Yes," attach a statement that identifies the individuals and explains the relationship(s) .			No
75c	c Do any officers, directors, trustees, or key employees listed in Form 990, Part V-A, or highest compensated employees listed in Schedule A, Part I, or highest compensated professional and other independent contractors listed in Schedule A, Part II-A or II-B, receive compensation from any other organizations, whether tax exempt or taxable, that are related to the organization? See the instructions for the definition of "related organization" If "Yes," attach a statement that includes the information described in the instructions			No
75d	d Does the organization have a written conflict of interest policy?			No

Part V-B Former Officers, Directors, Trustees, and Key Employees That Received Compensation or Other Benefits (If any former officer, director, trustee, or key employee received compensation or other benefits (described below) during the year, list that person below and enter the amount of compensation or other benefits in the appropriate column. See the instructions.)

(A) Name and address	(B) Loans and Advances	(C) Compensation (If not paid enter -0-)	(D) Contributions to employee benefit plans and deferred compensation plans	(E) Expense account and other allowances

Part VI Other Information *(See the instructions.)*

76	Did the organization make a change in its activities or methods of conducting activities? If "Yes," attach a detailed statement of each change	76		No
77	Were any changes made in the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes	77		No
78a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	78a		No
78b	b If "Yes," has it filed a tax return on Form 990-T for this year?	78b		
79	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement	79		No
80a	Is the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc , to any other exempt or nonexempt organization?	80a		No
81a	b If "Yes," enter the name of the organization ▶ _____ _____ and check whether it is <input type="checkbox"/> exempt or <input type="checkbox"/> nonexempt	81a		
81b	81a Enter direct or indirect political expenditures (See line 81 instructions)	81b		No
81b	b Did the organization file Form 1120-POL for this year?	81b		No

Part VI Other Information (continued)

Form 990 (2007) Part VI Other Information (continued) table with rows 82a-91b and columns Yes/No. Includes questions about donated services, public inspection requirements, dues, lobbying, and foreign accounts.

Part VI Other Information (continued)

c At any time during the calendar year, did the organization maintain an office outside of the United States? 91c Yes No

If "Yes," enter the name of the foreign country

92 Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041—Check here and enter the amount of tax-exempt interest received or accrued during the tax year 92

Part VII Analysis of Income-Producing Activities (See the instructions.)

Note: Enter gross amounts unless otherwise indicated.

Table with 5 columns: (A) Business code, (B) Amount, (C) Exclusion code, (D) Amount, (E) Related or exempt function income. Rows include 93 Program service revenue, 94 Membership dues and assessments, 95 Interest on savings and temporary cash investments, 96 Dividends and interest from securities, 97 Net rental income or (loss) from real estate, 98 Net rental income or (loss) from personal property, 99 Other investment income, 100 Gain or (loss) from sales of assets other than inventory, 101 Net income or (loss) from special events, 102 Gross profit or (loss) from sales of inventory, 103 Other revenue a ROYALTIES, 104 Subtotal, 105 Total.

Note: Line 105 plus line 1e, Part I, should equal the amount on line 12, Part I.

Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes (See the instructions.)

Table with 2 columns: Line No., Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes). Row 94: DUES FROM ALUMNI ARE COLLECTED TO HELP SUPPORT BOTH THE PRODUCTION OF THE ALUMNI NEWSLETTER AND THE PROMOTION OF NEW PROJECT FUNDINGS MEMBERSHIP DUES REPRESENTS REQUESTS FOR CONTINUED ANNUAL SUPPORT AND DOES NOT REPRESENT ASSESSABLE REVENUE

Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities (See the instructions.)

Table with 5 columns: (A) Name, address, and EIN of corporation, partnership, or disregarded entity; (B) Percentage of ownership interest; (C) Nature of activities; (D) Total income; (E) End-of-year assets.

Part X Information Regarding Transfers Associated with Personal Benefit Contracts (See the instructions.)

(a) Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? Yes No
(b) Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? Yes No

NOTE: If "Yes" to (b), file Form 8870 and Form 4720 (see instructions).




Part XI Information Regarding Transfers To and From Controlled Entities Complete only if the organization is a controlling organization as defined in section 512(b)(13)

				Yes	No
106 Did the reporting organization make any transfers to a controlled entity as defined in section 512(b)(13) of the Code? If "Yes," complete the schedule below for each controlled entity					
	(A) Name and address of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	(D) Amount of transfer	
a					
b					
c					
Totals					

				Yes	No
107 Did the reporting organization receive any transfers from a controlled entity as defined in section 512(b)(13) of the Code? If "Yes," complete the schedule below for each controlled entity					
	(A) Name and address of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	(D) Amount of transfer	
a					
b					
c					
Totals					

		Yes	No
108 Did the organization have a binding written contract in effect on August 17, 2006 covering the interests, rents, royalties and annuities described in question 107 above?			

Please Sign Here	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.	
	***** Signature of officer	2009-05-06 Date
	james donegan treasurer Type or print name and title	

Paid Preparer's Use Only	Preparer's signature  Alfred F. Thoben	Date	Check if self-employed <input checked="" type="checkbox"/>	Preparer's SSN or PTIN (See Gen Inst W)
	Firm's name (or yours if self-employed), address, and ZIP + 4  D'Arcangelo & Co LLP 3000 Westchester Ave Purchase, NY 105772538			EIN 

**SCHEDULE A
(Form 990 or
990EZ)**

Organization Exempt Under Section 501(c)(3)

(Except Private Foundation) and Section 501(e), 501(f), 501(k),
501(n), or 4947(a)(1) Nonexempt Charitable Trust

Supplementary Information—(See separate instructions.)

OMB No 1545-0047

2007

MUST be completed by the above organizations and attached to their Form 990 or 990-EZ

Department of the
Treasury
Internal Revenue
Service

Name of the organization
ALUMNI ASSOCIATION OF
THE BRONX HIGH SCHOOL OF SCIENCE

Employer identification number

13-3068924

Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees
(See page 1 of the instructions. List each one. If there are none, enter "None.")

(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
None				
Total number of other employees paid over \$50,000				

Part II-A Compensation of the Five Highest Paid Independent Contractors for Professional Services
(See page 2 of the instructions. List each one (whether individual or firms). If there are none, enter "None.")

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
None		
Total number of others receiving over \$50,000 for professional services		

Part II-B Compensation of the Five Highest Paid Independent Contractors for Other Services
(List each contractor who performed services other than professional services, whether individual or firms. If there are none, enter "None". See page 2 for instructions.)

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
None		
Total number of other contractors receiving over \$50,000 for other services		

Part III Statements About Activities (See page 2 of the instructions.)

Yes No

<p>1 During the year, has the organization attempted to influence national, state, or local legislation, include any attempt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities ▶\$ _____(Must equal amounts on line 38, Part VI-A, or line 1 of Part VI-B)</p> <p>Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A Other organizations checking "Yes" must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities</p>	1		No
<p>2 During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the transactions.)</p> <p>a Sale, exchange, or leasing property?</p>	2a		No
<p>b Lending of money or other extension of credit?</p>	2b		No
<p>c Furnishing of goods, services, or facilities?</p>	2c		No
<p>d Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)?</p>	2d	Yes	
<p>e Transfer of any part of its income or assets?</p>	2e		No
<p>3a Did the organization make grants for scholarships, fellowships, student loans, etc ? (If "Yes," attach an explanation of how the organization determines that recipients qualify to receive payments)</p>	3a	Yes	
<p>b Did the organization have a section 403(b) annuity plan for its employees?</p>	3b		No
<p>c Did the organization receive or hold an easement for conservation purposes, including easements to preserve open space, the environment , historic land areas or structures? If "Yes" attach a detailed statement</p>	3c		No
<p>d Did the organization provide credit counseling, debt management, credit repair, or debt negotiation services?</p>	3d		No
<p>4a Did the organization maintain any donor advised funds? If "Yes," complete lines 4b through 4g If "No," complete lines 4f and 4g</p>	4a	Yes	
<p>b Did the organization make any taxable distributions under section 4966?</p>	4b		
<p>c Did the organization make a distribution to a donor, donor advisor, or related person?</p>	4c		
<p>d Enter the total number of donor advised funds owned at the end of the tax year ▶ _____</p>			
<p>e Enter the aggregate value of assets held in all donor advised funds owned at the end of the tax year ▶ _____</p>			
<p>f Enter the total number of separate funds or accounts owned at the end of the tax year (excluding donor advised funds included on line 4d) where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts ▶ <u>0</u></p>			
<p>g Enter the aggregate value of assets held in all funds or accounts included on line 4f at the end of the tax year ▶ <u>0</u></p>			

Part IV Reason for Non-Private Foundation Status (See pages 4 through 7 of the instructions.)

I certify that the organization is not a private foundation because it is (Please check only **ONE** applicable box)

- 5 A church, convention of churches, or association of churches Section 170(b)(1)(A)(i)
- 6 A school Section 170(b)(1)(A)(ii) (Also complete Part V)
- 7 A hospital or a cooperative hospital service organization Section 170(b)(1)(A)(iii)
- 8 A federal, state, or local government or governmental unit Section 170(b)(1)(A)(v)
- 9 A medical research organization operated in conjunction with a hospital Section 170(b)(1)(A)(iii) **Enter the hospital's name, city, and state** _____
- 10 An organization operated for the benefit of a college or university owned or operated by a governmental unit Section 170(b)(1)(A)(iv) (Also complete the **Support Schedule** in Part IV-A)
- 11a An organization that normally receives a substantial part of its support from a governmental unit or from the general public Section 170(b)(1)(A)(vi) (Also complete the **Support Schedule** in Part IV-A)
- 11b A community trust Section 170(b)(1)(A)(vi) (Also complete the **Support Schedule** in Part IV-A)
- 12 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 charitable, etc , 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) (Also complete the **Support Schedule** in Part IV-A)
- 13 An organization that is not controlled by any disqualified persons (other than foundation managers) and otherwise meets the requirements of section 509(a)(3) Check the box that describes the type of supporting organization
 Type I Type II Type III - Functionally Integrated Type III - Other

Provide the following information about the supported organizations. (see page 7 of the instructions.)

(a) Name(s) of supported organization(s)	(b) Employer identification number	(c) Type of organization (described in lines 5 through 12 above or IRC section)	(d) Is the supported organization listed in the supporting organization's governing documents?		(e) Amount of support?
			Yes	No	
Total					

- 14 An organization organized and operated to test for public safety Section 509(a)(4) (See page 7 of the instructions)

Part IV-A Support Schedule (Complete only if you checked a box on line 10, 11, or 12) **Use cash method of accounting.**

Note: You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting.

Calendar year (or fiscal year beginning in)	(a) 2006	(b) 2005	(c) 2004	(d) 2003	(e) Total
15 Gifts, grants, and contributions received (Do not include unusual grants See line 28)	898,538	593,107	527,286	570,996	2,589,927
16 Membership fees received	165,047	123,388	150,094	161,213	599,742
17 Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc , purpose					0
18 Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975	10,580	12,550	9,417	7,369	39,916
19 Net income from unrelated business activities not included in line 18					0
20 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf					0
21 The value of services or facilities furnished to the organization by a governmental unit without charge Do not include the value of services or facilities generally furnished to the public without charge					0
22 Other income Attach a schedule Do not include gain or (loss) from sale of capital assets	13,170	12,351	12,642	12,215	50,378
23 Total of lines 15 through 22	1,087,335	741,396	699,439	751,793	3,279,963
24 Line 23 minus line 17	1,087,335	741,396	699,439	751,793	3,279,963
25 Enter 1% of line 23	10,873	7,414	6,994	7,518	
26 Organizations described on lines 10 or 11:					
a Enter 2% of amount in column (e), line 24					26a 65,599
b Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 2002 through 2005 exceeded the amount shown in line 26a Do not file this list with your return. Enter the total of all these excess amounts					26b 0
c Total support for section 509(a)(1) test Enter line 24, column (e)					26c 3,279,963
d Add Amounts from column (e) for lines	18 39,916	19 0			
	22	26b			26d 90,294
e Public support (line 26c minus line 26d total)					26e 3,189,669
f Public support percentage (line 26e (numerator) divided by line 26c (denominator))					26f 97.24 71 %
27 Organizations described on line 12:					
a For amounts included in lines 15, 16, and 17 that were received from a "disqualified person," prepare a list for your records to show the name of, and total amounts received in each year from, each "disqualified person " Do not file this list with your return. Enter the sum of such amounts for each year (2006) _____ (2005) _____ (2004) _____ (2003) _____					
b For any amount included in line 17 that was received from each person (other than "disqualified persons"), prepare a list for your records to show the name of, and amount received for each year, that was more than the larger of (1) the amount on line 25 for the year or (2) \$5,000 (Include in the list organizations described in lines 5 through 11b, as well as individuals) Do not file this list with your return. After computing the difference between the amount received and the larger amount described in (1) or (2), enter the sum of these differences (the excess amounts) for each year (2006) _____ (2005) _____ (2004) _____ (2003) _____					
c Add Amounts from column (e) for lines	15 _____	16 _____			
	17 _____	20 _____	21 _____		
d Add Line 27a total _____ and line 27b total _____					27c _____
e Public support (line 27c total minus line 27d total)					27d _____
f Total support for section 509(a)(2) test Enter amount from line 23, column (e)					27e _____
g Public support percentage (line 27e (numerator) divided by line 27f (denominator))					27f _____
h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))					27g _____
28 Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 2002 through 2005, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant Do not file this list with your return. Do not include these grants in line 15					27h _____

Part V Private School Questionnaire (See page 7 of the instructions.)
(To be completed ONLY by schools that checked the box on line 6 in Part IV)

		Yes	No
29	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?		
30	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?		
31	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe, if "No," please explain (If you need more space, attach a separate statement) 		
32	Does the organization maintain the following		
a	Records indicating the racial composition of the student body, faculty, and administrative staff?		
b	Records documenting that scholarships and other financial assistance are awarded on racially nondiscriminatory basis?		
c	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?		
d	Copies of all material used by the organization or on its behalf to solicit contributions? If you answered "No" to any of the above, please explain (If you need more space, attach a separate statement) 		
33	Does the organization discriminate by race in any way with respect to		
a	Students' rights or privileges?		
b	Admissions policies?		
c	Employment of faculty or administrative staff?		
d	Scholarships or other financial assistance?		
e	Educational policies?		
f	Use of facilities?		
g	Athletic programs?		
h	Other extracurricular activities? If you answered "Yes" to any of the above, please explain (If you need more space, attach a separate statement) 		
34a	Does the organization receive any financial aid or assistance from a governmental agency?		
b	Has the organization's right to such aid ever been revoked or suspended? If you answered "Yes" to either 34a or b, please explain using an attached statement		
35	Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05 of Rev Proc 75-50, 1975-2 C B 587, covering racial nondiscrimination? If "No," attach an explanation		

Part VI-A Lobbying Expenditures by Electing Public Charities (See page 9 of the instructions.)(To be completed **ONLY** by an eligible organization that filed Form 5768)Check **a** if the organization belongs to an affiliated group Check **b** if you checked "a" and "limited control" provisions apply**Limits on Lobbying Expenditures**

(The term "expenditures" means amounts paid or incurred)

(a)
Affiliated group
totals**(b)**
To be completed
for all electing
organizations

36 Total lobbying expenditures to influence public opinion (grassroots lobbying)	36	
37 Total lobbying expenditures to influence a legislative body (direct lobbying)	37	
38 Total lobbying expenditures (add lines 36 and 37)	38	
39 Other exempt purpose expenditures	39	
40 Total exempt purpose expenditures (add lines 38 and 39)	40	
41 Lobbying nontaxable amount Enter the amount from the following table— If the amount on line 40 is— The lobbying nontaxable amount is— Not over \$500,000 20% of the amount on line 40 Over \$500,000 but not over \$1,000,000 \$100,000 plus 15% of the excess over \$500,000 Over \$1,000,000 but not over \$1,500,000 \$175,000 plus 10% of the excess over \$1,000,000 Over \$1,500,000 but not over \$17,000,000 \$225,000 plus 5% of the excess over \$1,500,000 Over \$17,000,000 \$1,000,000	41	
42 Grassroots nontaxable amount (enter 25% of line 41)	42	
43 Subtract line 42 from line 36 Enter -0- if line 42 is more than line 36	43	
44 Subtract line 41 from line 38 Enter -0- if line 41 is more than line 38	44	

Caution: If there is an amount on either line 43 or line 44, you must file Form 4720.**4-Year Averaging Period Under Section 501(h)**(Some organizations that made a section 501(h) election do not have to complete all of the five columns below
See the instructions for lines 45 through 50 on page 11 of the instructions)**Lobbying Expenditures During 4-Year Averaging Period**

Calendar year (or fiscal year beginning in) ▶	Lobbying Expenditures During 4-Year Averaging Period				
	(a) 2007	(b) 2006	(c) 2005	(d) 2004	(e) Total
45 Lobbying nontaxable amount					
46 Lobbying ceiling amount (150% of line 45(e))					
47 Total lobbying expenditures					
48 Grassroots nontaxable amount					
49 Grassroots ceiling amount (150% of line 48(e))					
50 Grassroots lobbying expenditures					

Part VI-B Lobbying Activity by Nonelecting Public Charities

(For reporting only by organizations that did not complete Part VI-A) (See page 11 of the instructions.)

During the year, did the organization attempt to influence national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of

- a** Volunteers
- b** Paid staff or management (Include compensation in expenses reported on lines **c** through **h**.)
- c** Media advertisements
- d** Mailings to members, legislators, or the public
- e** Publications, or published or broadcast statements
- f** Grants to other organizations for lobbying purposes
- g** Direct contact with legislators, their staffs, government officials, or a legislative body
- h** Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means
- i** Total lobbying expenditures (Add lines **c** through **h**.)

Yes	No	Amount

If "Yes" to any of the above, also attach a statement giving a detailed description of the lobbying activities

Part VII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations (See page 12 of the instructions.)

51 Did the reporting organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?

a Transfers from the reporting organization to a noncharitable exempt organization of

- (i) Cash
- (ii) Other assets

- b** Other transactions
 - (i) Sales or exchanges of assets with a noncharitable exempt organization
 - (ii) Purchases of assets from a noncharitable exempt organization
 - (iii) Rental of facilities, equipment, or other assets
 - (iv) Reimbursement arrangements
 - (v) Loans or loan guarantees
 - (vi) Performance of services or membership or fundraising solicitations

c Sharing of facilities, equipment, mailing lists, other assets, or paid employees

d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting organization. If the organization received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received.

	Yes	No
51a(i)		No
a(ii)		No
b(i)		No
b(ii)		No
b(iii)		No
b(iv)		No
b(v)		No
b(vi)		No
c		No

(a) Line no	(b) Amount involved	(c) Name of noncharitable exempt organization	(d) Description of transfers, transactions, and sharing arrangements

52a Is the organization directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? Yes No

b If "Yes," complete the following schedule.

(a) Name of organization	(b) Type of organization	(c) Description of relationship

Additional Data**Software ID:****Software Version:****EIN:** 13-3068924**Name:** ALUMNI ASSOCIATION OF
THE BRONX HIGH SCHOOL OF SCIENCE**Form 990, Part V-A - Current Officers, Directors, Trustees, and Key Employees:**

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (If not paid, enter -0-.)	(D) Contributions to employee benefit plans & deferred compensation plans	(E) Expense account and other allowances
MARSHALL JAFFE PO BOX 145 JEROME AVE STATION BRONX, NY 10465	trusTEE 4 00	0	0	0
ROSE LIPMAN PO BOX 145 JEROME AVE STATION bronx, NY 10465	SECRETARY 3 00	0	0	0
BRYAN TROY PO BOX 145 JEROME AVE STATION bronx, NY 10465	TRUSTEE 2 00	0	0	0
MICHAEL DIAMENTE PO BOX 145 JEROME AVE STATION bronx, NY 10465	TRUSTEE 2 00	0	0	0
JAMES DONEGAN PO BOX 145 JEROME AVE STATION bronx, NY 10465	TREASURER 3 00	0	0	0
POLLY SCHOENFELD PO BOX 145 JEROME AVE STATION bronx, NY 10465	TRUSTEE 2 00	0	0	0
ELAINE SOLAS PO BOX 145 JEROME AVE STATION bronx, NY 10465	TRUSTEE 2 00	0	0	0
BARRY SUSMAN PO BOX 145 JEROME AVE STATION bronx, NY 10465	VICE CHAIRMAN 2 00	0	0	0
LINDA KLAYMAN PO BOX 145 JEROME AVE STATION bronx, NY 10465	EXECUTIVE DIRECTOR 35 00	71,276	0	0
SHARON MANOWITZ PO BOX 145 JEROME AVE STATION bronx, NY 10465	CHAIRWOMAN 2 00	0	0	0

Form 990, Part V-A - Current Officers, Directors, Trustees, and Key Employees:

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (If not paid, enter -0-.)	(D) Contributions to employee benefit plans & deferred compensation plans	(E) Expense account and other allowances
NAN CAPEL-MEAD PO BOX 145 JEROME AVE STATION bronx, NY 10465	TRUSTEE 2 00	0	0	0
LAURA WOOD PO BOX 145 JEROME AVE STATION bronx, NY 10465	TRUSTEE 2 00	0	0	0
SUSAN HOLLAND PO BOX 145 JEROME AVE STATION BRONX, NY 10465	TRUsTEE 2 00	0	0	0
BART HOLLAND PO BOX 145 JEROME AVE STATION BRONX, NY 10465	TRUsTEE 2 00	0	0	0
BRUCE JAKUBOVITZ PO BOX 145 JEROME AVE STATION BRONX, NY 10465	TRUSTEE 2 00	0	0	0
CRAIG MILLER PO BOX 145 JEROME AVE STATION BRONX, NY 10465	TRUsTEE 2 00	0	0	0

TY 2007 Cash Grants Paid Schedule

Name: ALUMNI ASSOCIATION OF
THE BRONX HIGH SCHOOL OF SCIENCE

EIN: 13-3068924

Class of Activity	Recipient's name	Address	Amount	Relationship
GARDNER SCHOLARSHIP	saeed hasnoo	C/O ALUMNI ASSOC BRONX HS OF SCIENCE BRONX, NY 10468	3,000	NONE
GARDNER SCHOLARSHIP	roy ben abraham	C/O ALUMNI ASSOC BRONX HS OF SCIENCE BRONX, NY 10468	3,000	NONE
GARDNER SCHOLARSHIP	vineet singal	C/O ALUMNI ASSOC BRONX HS OF SCIENCE bRONX, NY 10468	3,000	NONE
GARDNER SCHOLARSHIP	helen diagama	C/O ALUMNI ASSOC BRONX HS OF SCIENCE BRONX, NY 10468	3,000	NONE
gARDNER SCHOLARSHIP	deborah feng	C/O ALUMNI ASSOC BRONX HS OF SCIENCE BRONX, NY 10468	3,000	NONE
jules byron scholarship 2008	arkady blyakher	C/O ALUMNI ASSOC BRONX HS OF SCIENCE BRONX, NY 10468	5,100	NONE
herman Mantel Award	benjamin cogan	C/O ALUMNI ASSOC BRONX HS OF SCIENCE BRONX, NY 10468	500	NONE
herman Mantel Award	tae chang	C/O ALUMNI ASSOC BRONX HS OF SCIENCE BRONX, NY 10468	500	NONE

Class of Activity	Recipient's name	Address	Amount	Relationship
herman Mantel Award	maxwell waters	C/O ALUMNI ASSOC BRONX HIGH SCHOOL OF SCIENCE BRONX, NY 10468	500	NONE
arnold canell prize for excellence in english for 2008	sasha dilone	C/O ALUMNI ASSOC BRONX HIGH SCHOOL OF SCIENCE BRONX, NY 10468	1,000	none
the richard b sodikow award for shakespeare studies for 2008	daniel wong	C/O ALUMNI ASSOC BRONX HIGH SCHOOL OF SCIENCE BRONX, NY 10468	65	nONE
the elliot landy award for excellence in photography for 2008	jesse smith	C/O ALUMNI ASSOC BRONX HIGH SCHOOL OF SCIENCE BRONX, NY 10468	250	nONE
the elliot landy award for excellence in photography for 2008	rebecca fradis	C/O ALUMNI ASSOC BRONX HIGH SCHOOL OF SCIENCE BRONX, NY 10468	250	noNE
the morton j saks memorial scholarship for 2008	silvia chan	C/O ALUMNI ASSOC BRONX HIGH SCHOOL OF SCIENCE BRONX, NY 10468	1,000	nONE
the nadine kowalsky prize for excellence in italian 2008	ruth frank holcomb	C/O ALUMNI ASSOC BRONX HIGH SCHOOL OF SCIENCE BRONX, NY 10468	500	nONE
andrew athan '88 scholarship	billy huang	C/O ALUMNI ASSOC BRONX HIGH SCHOOL OF SCIENCE BRONX, NY 10468	10,000	nONE

Class of Activity	Recipient's name	Address	Amount	Relationship
the foundation to life inc	nicolas munera	c/O ALUMNI ASSOC BRONX HIGH SCHOOL OF SCIENCE bRONX, NY 10468	1,103	nONE
FOR SCHOOL'S ASTRONOMY PROGRAM	BHS PLANETARIUM	C/O ALUMNI ASSOC BRONX HIGH SCHOOL OF SCIENCE BRONX, NY 10468	2,571	NONE

TY 2007 Depreciation and Depletion Schedule

Name: ALUMNI ASSOCIATION OF
THE BRONX HIGH SCHOOL OF SCIENCE
EIN: 13-3068924

Asset	Amount
EQUIPMENT	41
printer	80
monitor	71
OFFICE COMPUTER	332
LAPTOP TREASURER	248

TY 2007 Investments - Other Schedule

Name: ALUMNI ASSOCIATION OF
THE BRONX HIGH SCHOOL OF SCIENCE

EIN: 13-3068924

Description	Book Value	Cost/FMV
neuberger berman funds	19,417	C
vanguard index trust--500 portfolio	111,742	C
ee savings bonds	30,000	C

TY 2007 Land etc. Schedule

Name: ALUMNI ASSOCIATION OF
THE BRONX HIGH SCHOOL OF SCIENCE

EIN: 13-3068924

Category/Item	Cost/Other Basis	Accumulated Depreciation	Book Value
EQUIPMENT	5,655	5,655	0
COMPUTER	3,183	3,183	0
FAX MODEM	200	200	0
DATABASE SOFTWARE	1,605	1,605	0
PRINTER	400	400	0
QUICKBOOKS SOFTWARE	191	191	0
PRINTER AND FAX	424	424	0
printer	400	367	33
monitor	357	296	61
COMPUTER SOFTWARE	424	424	0
OFFICE COMPUTER	1,659	526	1,133
LAPTOP TREASURER	1,239	393	846

TY 2007 Other Changes in Net Assets Schedule

Name: ALUMNI ASSOCIATION OF
THE BRONX HIGH SCHOOL OF SCIENCE

EIN: 13-3068924

Description	Amount
UNREALIZED CAPITAL gainLOSS - pERMANENTLY RESTRICTED INVESTMENTS	-1,357
UNREALIZED CAPITAL gainLOSS - unrestricted investments	-19,359

TY 2007 Other Liabilities Schedule

Name: ALUMNI ASSOCIATION OF
THE BRONX HIGH SCHOOL OF SCIENCE

EIN: 13-3068924

Description	Beginning of Year Amount	End of Year Amount
scholarships payable	3,000	13,103
due to related entities	1,000	1,000

TY 2007 Other Revenues Included Schedule

Name: ALUMNI ASSOCIATION OF
 THE BRONX HIGH SCHOOL OF SCIENCE
EIN: 13-3068924

Description	Amount
rounding	-2

TY 2007 Other Income Schedule

Name: ALUMNI ASSOCIATION OF
THE BRONX HIGH SCHOOL OF SCIENCE

EIN: 13-3068924

Description	2006	2005	2004	2003	Total
misc income	13,170	12,351	12,642	12,215	50,378

TY 2007 Scholarship Award Statement

Name: ALUMNI ASSOCIATION OF
THE BRONX HIGH SCHOOL OF SCIENCE

EIN: 13-3068924

Statement: STUDENT SCHOLARSHIPS ARE DISTRIBUTED BY THE ASSOCIATION ANNUALLY. THE CRITERIA FOR SELECTION IS SERVICE TO THE ASSOCIATION, AND ACADEMIC EXCELLENCE. APPLICATIONS SUBMITTED BY THE SCHOOL ADMINISTRATORS, TEACHERS, ADVISORS, ETC. TO THE BOARD OF TRUSTEES FOR APPROVAL.