

2007

Form 990 (2007)

RABBINICAL COLLEGE OF TELSHE, INC.

34-0801310 Page 5

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	3,572,058.
b	Amounts included on line a but not on Part I, line 12:			
1	Net unrealized gains on investments	b1	<210,164.>	
2	Donated services and use of facilities	b2		
3	Recoveries of prior year grants	b3		
4	Other (specify):	b4		
	Add lines b1 through b4	b	<210,164.>	
c	Subtract line b from line a	c	3,782,222.	
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	0.	
e	Total revenue (Part I, line 12). Add lines c and d	e	3,782,222.	

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

a	Total expenses and losses per audited financial statements		a	4,248,810.
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	0.	
c	Subtract line b from line a	c	4,248,810.	
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): ROUNDING	d2	1.	
	Add lines d1 and d2	d	1.	
e	Total expenses (Part I, line 17). Add lines c and d	e	4,248,811.	

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
RABBI SEYMOUR GEWIRTZ 28400 EUCLID AVENUE WICKLIFFE, OH 44092	VICE PRESIDENT	40.00 19,075.	0.	0.
RABBI ZALMAN GIFTER 28400 EUCLID AVENUE WICKLIFFE, OH 44092	PRESIDENT & TREASURER	20.00 10,795.	0.	0.
RABBI AIZIK AUSBAND 28400 EUCLID AVENUE WICKLIFFE, OH 44092	ASSISTANT SECRETARY	40.00 22,201.	0.	0.
RABBI CHAIM STEIN 28400 EUCLID AVENUE WICKLIFFE, OH 44092	DEAN	40.00 26,775.	0.	0.

Form 990 (2007)

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

• List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and **current** key employees. Enter -0- in columns (D), (E), and (F) if no compensation was paid.

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

<input type="checkbox"/> Check this box if the organization did not compensate any current or former officer, director, trustee or key employee		(5)	(5)
---	--	-----	-----

Form 990 (2009)