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DLN: 93493132011070

Form 990

Department of the Treasury

# Return of Organization Exempt From Income Tax

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

2008

OMB No 1545-0047

Inspection

▶ The organization may have to use a copy of this return to satisfy state reporting requirements Internal Revenue Service A For the 2008 calendar year, or tax year beginning 07-01-2008 and ending 06-30-2009 D Employer identification number B Check if applicable Please TILTON SCHOOL use IRS 02-0222239 Address change label or Doing Business As E Telephone number Name change print or type. See (603) 286-4342 Initial return Specific Number and street (or P O box if mail is not delivered to street address) Room/suite **G Gross receipts** \$ 14,446,025 Instruc-30 SCHOOL STREET Termination tions. City or town, state or country, and ZIP + 4 TILTON, NH 03276 Amended return Application pending Name and address of Principal Officer **H(a)** Is this a group return for JAMES R CLEMENTS affiliates? 30 SCHOOL STREET TILTON, NH 03276 H(b) Are all affiliates included? 501(c) ( 3 ) **4** (insert no ) √ 4947(a)(1) or 
√ 527 (If "No." attach a list See instructions ) Group Exemption Number 🕨 Web site: ► www tiltonschool org L Year of Formation 1845 M State of legal domicile NH Briefly describe the organization's mission or most significant activities Activities & Governance See Additional Data Table Check this box ┌ if the organization discontinued its operations or disposed of more than 25% of its assets 25 Number of voting members of the governing body (Part VI, line 1a)  $\cdot$   $\cdot$ 23 Number of independent voting members of the governing body (Part VI, line 1b)  $\,$  . 180 Total number of employees (Part V, line 2a) . 52 Total number of volunteers (estimate if necessary) . Total gross unrelated business revenue from Part VIII, line 12, column (C) . 0 Net unrelated business taxable income from Form 990-T, line 34 . 0 7b b **Current Year** Contributions and grants (Part VIII, line 1h) . . 1,436,748 1,901,273 8 9 Program service revenue (Part VIII, line 2g) . . 10,269,331 11,390,485 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) . 1,331,986 -244,396 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 0 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12 13,502,590 12,582,837 1,960,489 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 1,594,100 14 Benefits paid to or for members (Part IX, column (A), line 4) 0 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-15 5,274,222 Expenses 5,426,601 10) 16a Professional fundraising fees (Part IX, column (A), line 11e) 0 (Total fundraising expenses, Part IX, column (D), line 25  $\frac{767,641}{}$ b **17** Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f) 5,231,728 5,594,318 Total expenses—add lines 13-17 (must equal Part IX, line 25, column (A)) 12,100,050 12,981,408 18 Revenue less expenses Subtract line 18 from line 12 19 1,402,540 -398,571 8 % **End of Year** Beginning of Year Assets of Balance 20 Total assets (Part X, line 16) 42,469,133 38,289,287 21 Total liabilities (Part X, line 26) 23,197,112 21,734,199 22 Net assets or fund balances Subtract line 21 from line 20 16,555,088 19,272,021 Part II Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge **Please** 2010-05-10 Sign Signature of officer Here James R Clements CEO Type or print name and title Date Check if Preparer's PTIN (See Gen Inst ) Preparer's signature Paid empolyed 🕨 🦵 Preparer's Firm's name (or yours Nathan Wechsler & Company PA if self-employed). **Use Only** address, and ZIP + 4 70 Commercial Street Suite 401 Phone no (603) 224-5357 Concord, NH 03301 May the IRS discuss this return with the preparer shown above? (See instructions) . 

Cat No 11282Y

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

`			, ,	•
(Code	) (Expenses \$	including grants of \$	) (Revenue \$	)
(Code	) (Expenses \$	including grants of \$	) (Revenue \$	)
DURING THE SUMMER MONTI	ns, The school hosts s	EVERAL SCIENTIFIC CONFERENCES WITH	CH VARY IN SIZE FROM SU TO 150 PART	ICIPANTS EACH
(Code PRIVATE SECONDARY SCHOO	) (Expenses \$ L WHICH SERVICED 272 S	8,963,500 including grants of \$ STUDENTS DURING THE LAST YEAR, TEAC	) (Revenue \$ HING SUBJECTS SIMILAR TO THOSE TAU	11,390,485 ) GHT IN PUBLIC SCHOOLS
ection 501(c)(3) and (4	) organizations and 4	947(a)(1) trusts are required to r	eport the amount of grants and a	
ervices?				'es  No
			nducts any program	
•				es 🔽 No
n =	e prior Form 990 or 99 "Yes," describe these r d the organization ceas crvices? "Yes," describe these of escribe the exempt purp ection 501(c)(3) and (4 hers, the total expense  Code RIVATE SECONDARY SCHOO DURING THE SUMMER MONT	e prior Form 990 or 990-EZ?	e prior Form 990 or 990-EZ?	"Yes," describe these new services on Schedule O d the organization cease conducting or make significant changes in how it conducts any program rvices?

Part IV	Checklist of	Required	Schedules
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			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	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors? 🕏	2	Yes	
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		No
4	Section 501(c)(3) organizations Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4		No
5	Section $501(c)(4)$ , $501(c)(5)$ , and $501(c)(6)$ organizations. Is the organization subject to the section $6033(e)$ notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		Νο
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		No
10	Did the organization hold assets in term, permanent,or quasi-endowments? If "Yes," complete Schedule D, Part V	10	Yes	
11	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If "Yes," complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable	11	Yes	
12	Did the organization receive an audited financial statement for the year for which it is completing this return that was prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII .	12	Yes	
13	Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	Yes	
14a	Did the organization maintain an office, employees, or agents outside of the U S ?	14a		Νο
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the U S ? If "Yes," complete Schedule F, Part $I$	14b		No
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Part II	15		No
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		No
17	Did the organization report more than \$15,000 on Part IX, column (A), line 11e? <i>If</i> "Yes," complete Schedule G, Part I	17		No
18	Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		No
19	Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule $H$	20		No
21	Did the organization report more than \$5,000 on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		No
22	Did the organization report more than \$5,000 on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete Schedule J	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer questions 24b-24d and complete Schedule K. If "No," go to question 25	24a	Yes	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	Yes	
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		No
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		No
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 $I$			No
b	Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a prior year? If "Yes," complete Schedule L, Part I	25b		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial contributor, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		No

### Part IV Checklist of Required Schedules (Continued)

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

Pa	rt V Statements Regarding Other IRS Filings and Tax Compliance	e				
					Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal					
	of U.S. Information Returns. Enter -0- if not applicable					
		1a	41			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	1b	0			
_	Did the organization comply with backup withholding rules for reportable payments t	o ven	dors and reportable			
·	gaming (gambling) winnings to prize winners?			1c	Yes	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax					
	Statements filed for the calendar year ending with or within the year covered by this	2a	180			
<b>L</b>	return					
U	<b>Note:</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this			2b	Yes	
3a	Did the organization have unrelated business gross income of \$1,000 or more durin	g the	year covered by this	_		
_	return?			3a		No
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Sch			3b		
4a	At any time during the calendar year, did the organization have an interest in, or a sover, a financial account in a foreign country (such as a bank account, securities acaccount)?			4a		Νο
ь	If "Yes," enter the name of the foreign country					
	See the instructions for exceptions and filing requirements for <b>Form TD F 90-22.1</b> , <i>Re Financial Accounts</i> .	eport o	f Foreign Bank and			
5a	Was the organization a party to a prohibited tax shelter transaction at any time duri	ng the	tax year?	5a		Νο
b	Did any taxable party notify the organization that it was or is a party to a prohibited	tax sł	nelter transaction?	5b		Νo
c	If "Yes," to 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exemp	t Entit	ty Regarding Prohibited			
	Tax Shelter Transaction?	•		5c		
6a	Did the organization solicit any contributions that were not tax deductible?			6a		No
Ь	If "Yes," did the organization include with every solicitation an express statement the were not tax deductible?	natsu •••	ch contributions or gifts	6b		
7	Organizations that may receive deductible contributions under section 170(c).					
а	Did the organization provide goods or services in exchange for any quid pro quo con more?	trıbut	on of \$75 or	7a		N o
b	If "Yes," did the organization notify the donor of the value of the goods or services $\boldsymbol{p}$	rovide	d?	7b		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal prope		· ·	7-		NI -
الد	file Form 8282?	7d		7c		N o
u	If "Yes," indicate the number of Forms 8282 filed during the year	_ /u				
e	Did the organization, during the year, receive any funds, directly or indirectly, to pay benefit contract?	/ prem	nums on a personal	7e		Νο
f	Did the organization, during the year, pay premiums, directly or indirectly, on a pers	onalh	enefit contract?	76 7f		No
	For all contributions of qualified intellectual property, did the organization file Form 8			71 7g		No
9 h	For contributions of cars, boats, airplanes, and other vehicles, did the organization f			<i>'</i> 9		110
••	required?			7h		Νο
8	Section $501(c)(3)$ and other sponsoring organizations maintaining donor advised funds a					
	supporting organizations. Did the supporting organization, or a fund maintained by a sexcess business holdings at any time during the	spons	oring organization, have	8		
	year?					<u> </u>
9	Section $501(c)(3)$ and other sponsoring organizations maintaining donor advised funds.					
а	Did the organization make any taxable distributions under section 4966?			9a		
Ь	Did the organization make a distribution to a donor, donor advisor, or related person	۰ ،		9b		
10	Section 501(c)(7) organizations. Enter	1	I			
a	Initiation fees and capital contributions included on Part VIII, line 12	10a				
Ь	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b				
11	Section 501(c)(12) organizations Enter					
а	Gross income from members or shareholders	11a				
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them )	11b				
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in	ı lıeu d	of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the	12b				
	year		l .			

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

Section A.	Governing	Body	and	<u>Management</u>	

			Yes	No
	For each "Yes" response to lines 2-7 below, and for a "No" response to lines 8 or 9b below, describe the circumstances, processes, or changes in Schedule O. See instructions.			
1a	Enter the number of voting members of the governing body 1a 2	5		
Ь	Enter the number of voting members that are independent 1b 2	3		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2	Yes	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? .	. 3		No
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4	Yes	
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		Νo
6	Does the organization have members or stockholders?	6		No
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a		Νο
Ь	Are any decisions of the governing body subject to approval by members, stockholders, or other persons? .	. 7b		Νo
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	the governing body?	8a	Yes	
Ь	each committee with authority to act on behalf of the governing body?	8b	Yes	
9a	Does the organization have local chapters, branches, or affiliates?	9a		Νo
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?	9b		
10	Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations must describe in Schedule O the process, if any, the organization uses to review the Form 990	10		No
11	Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	11		No

### Section B. Policies

			Yes	No
12a	Does the organization have a written conflict of interest policy? If "No", go to line 13 $\cdot$ .	12a	Yes	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		No
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c		Νο
13	Does the organization have a written whistleblower policy?	13	Yes	
14	Does the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision			
а	The organization's CEO, Executive Director, or top management official?	15a	Yes	
b	Other officers or key employees of the organization?	15b	Yes	
	Describe the process in Schedule O			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		Νο
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable Federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?	16b		

### Section C. Disclosure

- 17 List the States with which a copy of this Form 990 is required to be filed  $\,$  NH  $\,$
- Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you make these available. Check all that apply own website. 

  upon request
- 19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public See Additional Data Table
- 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization

ELIZABETH SHEEHAN

TILTON SCHOOL 30 SCHOOL STREET

TILTON, NH 03276

(603) 286-1722

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

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

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

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

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

The check this box in the organization and i	·	<b>(C)</b> Position (check all that apply)							(E)	(F)
(A) Name and Title	(B) Average hours per week	Individual Trustee or Chrector	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W- 2/1099MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	Estimated amount of other compensation from the organization and related organizations
							-			

Part VII Continued

				(tion that a			all			(E)		(F)	
	<b>(A)</b> Name and Title	(B) Average hours per week	Individual Trustae or Director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	( <b>D)</b> Reportable compensation from the organization (W- 2/1099MISC)	Reportable compensation from related	or	Estima mount of compens from t ganizati relate organiza	fother ation he on and
1b	Total							<b> </b>	604,:	391	0		90,796
1b 2	Total	ig those in 1							,		0		90,796
	Total number of individuals (includin	ig those in 1							,		0	Yes	90,796 <b>No</b>
	Total number of individuals (includin	g those in 1 ▶4 officer, direc	a) who	recei	ved	mor ey e	e thar	n \$1	00,000 in reporta	ble	0	Yes	,
2	Total number of individuals (including compensation from the organization)  Did the organization list any former	g those in 1  4  officer, direct le J for such s the sum of	a) who	ruste	ved e, k	mor ey e •	e thar employ	n \$1 /ee, •	or highest compe	nsated employee	3		No
3	Total number of individuals (including compensation from the organization)  Did the organization list any <b>former</b> on line 1a? <i>If</i> "Yes," complete Schedut For any individual listed online 1a, is organization and related organization.	officer, direct le J for such the sum of ns greater the the sum of	a) who	ruste ual ble c 0,00	ved e, k omp 0? l	ey e ens f "Y fror	employ ation es," co	ee, and ompi	or highest compersor or highest compersor other compensate lete Schedule J for	nsated employee on from the such n for services	<u> </u>	<b>Yes</b> Yes	No
3 4 5	Total number of individuals (including compensation from the organization)  Did the organization list any <b>former</b> on line 1a? If "Yes," complete Schedus For any individual listed online 1a, is organization and related organization individual	officer, direct le J for such the sum of	a) who	ruste ual ble c 0,00	ved e, k omp 0? l	ey e ens f "Y fror	employ ation es," co	ee, and ompi	or highest compersor or highest compersor other compensate lete Schedule J for	nsated employee on from the such n for services	3		No No
3 4 5	Total number of individuals (including compensation from the organization)  Did the organization list any <b>former</b> on line 1a? If "Yes," complete Schedus For any individual listed online 1a, is organization and related organization individual	officer, directle J for such as the sum of t	a) who	ruste ual ble c 0,00  ensa	omp 0? I	ey e ens f "Y fror	employ ation (es," co	and sand	or highest compersor or highest compersor other compensate lete Schedule J for the schedule of	nsated employee on from the such n for services	3		No No
3 4 5	Total number of individuals (including compensation from the organization)  Did the organization list any <b>former</b> on line 1a? If "Yes," complete Schedus For any individual listed online 1a, is organization and related organization individual	officer, directle J for such as the sum of t	a) who	ruste ual ble c 0,00  ensa	omp 0? I	ey e ens f "Y fror	employ ation (es," co	and sand	or highest compersor or highest compensate of the schedule J for the s	nsated employee on from the such n for services	3		No No
3 4 5	Total number of individuals (including compensation from the organization)  Did the organization list any <b>former</b> on line 1a? If "Yes," complete Schedus For any individual listed online 1a, is organization and related organization individual	officer, directle J for such sthe sum of the	a) who	ruste ual ble c 0,00  ensa	omp 0? I	ey e ens f "Y fror	employ ation (es," co	and sand	or highest compersor or highest compensate of the schedule J for the s	nsated employee on from the such n for services ore than	3	Yes	No No
3 4 5	Total number of individuals (including compensation from the organization)  Did the organization list any <b>former</b> on line 1a? If "Yes," complete Schedus For any individual listed online 1a, is organization and related organization individual	officer, directle J for such sthe sum of the	a) who	ruste ual ble c 0,00  ensa	omp 0? I	ey e ens f "Y fror	employ ation (es," co	and sand	or highest compersor or highest compensate of the schedule J for the s	nsated employee on from the such n for services ore than	3	Yes	No No

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Part VIII

Statement of Revenue

				<b>(A)</b> Total Revenue	<b>(B)</b> Related or	<b>(C)</b> Unrelated	(D) Revenue
				i otal Revenue	Exempt	Business	Excluded from
					Function Revenue	Revenue	Tax under IRC 512, 513, or 514
	1a	Federated campaigns :	la				
mts Lite	b	Membership dues					
Contributions, gifts, grants and other similar amounts	c	Fundraising events	.b				
T, S, E	_	1	Lc				
ਣੇੰਛੋ	d	Related organizations					
ons sin	e		1,436,748				
真	f	All other contributions, gifts, grants, and similar amounts not included above					
真さ	g	Noncash contributions included	l <b>f</b> In				
00 e		lines 1a-1f \$					
-	h	Total (Add lines 1a-1f)		1,436,748 ————			
- n			Business Code				
EL.	2a	TUITION AND FEES	900,099	9,991,114	9,991,114		
- <del>2</del> 8-	Ь	ANCILLARY SERVICES	900,099	·	937,546		
- 0 - 0	С	Gordon research confer	900,099	461,825	461,825		
₹	d		_				
ه 2	e		_				
Program Serwce Revenue	f	All other program service revenu	ıe				
Ğ	g	Total. Add lines 2a-2f	<u> </u>				
	3	► \$ 11,390,485  Investment income (including di	vidends interest				
		other similar amounts)	· · · · ·	239,326			239,326
	4	Income from investment of tax-exempt	bond proceeds				
			►				
	5	Royalties					
	6a	(1) Real	(II) Personal				
	ь	Less rental					
	c	expenses Rental income					
	d	or (loss)  Net rental income or (loss).					
		<u> </u>	<u> </u>				
	7a	(i) Securities Gross amount 1,378,26	(II) O ther 5 1,200				
	"	from sales of assets other	,				
	ь	than inventory Less cost or 1,863,18	3				
	"	other basis and sales expenses					
	С	Gain or (loss) -484,92	2 1,200				
	d	Net gain or (loss)	<b>.</b>	-483,722			-483,722
	8a	Gross income from fundraising	i				
		events (not including					
Other Revenue		\$ of contributions reported on line					
क }		1c) See Part IV, line 18 Attach Schedule G if total exceeds					
æ		\$15,000	a				
ъ.	b	Less direct expenses	ь				
ŏ	С	Net income or (loss) from fundra	ısıng events				
	9a	Gross income from gaming					
		activities See part IV, line 19 Complete Schedule G if total					
		exceeds \$15,000					
			a				
	b c	Less direct expenses Net income or (loss) from gamin	<b>b</b>				
			<b>▶</b> -				
	10a	Gross sales of inventory, less returns and allowances					
			а				
	b	Less cost of goods sold					
	С	Net income or (loss) from sales	_				
	4.4	Miscellaneous Revenue	Business Code				
	11a		_				
	Ь		-				
	С		-				
	d	All other revenue					
	12	Total. Add lines 11a-11d  Total Revenue. Add lines 1h, 2g		12,582,837	11,390,485	0	-244,396
		8c,		,552,557	,555,105		
	]	9c, 10c, and 11e					

# Part IX Statement of Functional Expenses

A	Section 501(c)(3) and 501(c)(4) orgall other organizations must complete column (A) but are not re				).
Do ı	not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	( <b>B)</b> Program service expenses	(C) Management and general expenses	<b>(D)</b> Fundraising expenses
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21				
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22	1,960,489	1,960,489		
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	306,706	107,347	92,012	107,347
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$ ) and persons described in section $4958(c)(3)(B)$				
7	Other salaries and wages	4,172,108	2,651,021		386,773
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	162,081	105,892	43,781	12,408
9	Other employee benefits	468,186	295,717	127,464	45,005
10	Payroll taxes	317,520	196,387	86,856	34,277
11	Fees for services (non-employees)				
а	Management				_
b	Legal				
c	Accounting				
d	Lobbying				
e	Professional fundraising See Part IV, line 17				
f	Investment management fees				
g	Other				
12	Advertising and promotion				
13	Office expenses				
14	Information technology				
15	Royalties				
16	Occupancy				
17	Travel				
18	Payments of travel or entertainment expenses for any Federal, state or local public officials				
19	Conferences, conventions and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	818,526	818,526		
23	Insurance				
24	Other expenses—Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below )				
а	OPrtn & MAINT OF PLANT	1,315,425	1,315,425		
b	INTEREST/FINANCING EXP	863,315		863,315	_
С	ADMINISTRATIVE & OTHER	594,842		594,842	
d	ANCILLARY SERVICES	552,450	552,450		
e	AUXILIARY ENTERPRISES	273,251	273,251		
	All other expenses	1,176,509	686,995	307,683	181,831
25	Total functional expenses. Add lines 1 through 24f	12,981,408	8,963,500	3,250,267	767,641
26	Joint Costs. Check   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	22,504,100	3,333,300	3,230,201	,5,,011

Part X B	lance	Sheet
----------	-------	-------

			(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing	1,027,451	1	897,814
	2	Savings and temporary cash investments	10,865,273	2	10,646,558
	3	Pledges and grants receivable, net	1,055,840	3	494,319
	4	Accounts receivable, net	53,616		40,346
	5	Receivables from current and former officers, directors, trustees, key employees or other related parties <i>Complete Part II of Schedule L</i>		5	, , , , , , , , , , , , , , , , , , ,
	6	Receivables from other disqualified persons (as defined under section $4958(f)(1)$ ) and persons described in section $4958(c)(3)(B)$ Complete Part II of Schedule L		6	
	7	Notes and loans receivable, net	290,715	7	312,540
	8	Inventories for sale or use	38,082	8	40,484
90	9	Prepaid expenses and deferred charges	342,777	9	338,164
Assets	10a	Land, buildings, and equipment cost basis   10a   28,645,350			
~4	ь	Less accumulated depreciation Complete Part VI of	1		
		Schedule D	21,971,717	10c	21,853,722
	11	Investments—publicly traded securities	4,615,819	11	1,865,234
	12	Investments—other securities See Part IV, line 11 <i>Complete Part VII of Schedule D</i>	1,623,370	12	1,262,784
	13	Investments—program-related See Part IV , line 11 $\it Complete Part VIII$ of Schedule D .		13	
	14	Intangible assets		14	
	15	Other assets See Part IV, line 11 Complete Part IX of Schedule  D	584,473	15	537,322
	16	Total assets. Add lines 1 through 15 (must equal line 34)	42,469,133	16	38,289,287
	17	Accounts payable and accrued expenses .	1,159,160	17	908,786
	18	Grants payable		18	
	19	Deferred revenue	1,673,638	19	1,314,126
	20	Tax-exempt bond liabilities	17,000,000	20	16,710,000
<u>ŏ</u>	21	Escrow account liability Complete Part IV of Schedule D		21	
Liabilities	22	Payable to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified		•	
ï		persons Complete Part II of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties	1,651,416	23	56,952
	24	Unsecured notes and loans payable		24	
	25	Other liabilities Complete Part X of Schedule D	1,712,898	25	2,744,335
	26	Total liabilities. Add lines 17 through 25	23,197,112	26	21,734,199
ces		Organizations that follow SFAS 117, check here ▶ ▽ and complete lines 27 through 29, and lines 33 and 34.			
Balance	27	Unrestricted net assets	8,921,874	27	7,668,702
<u>е</u>	28	Temporarily restricted net assets	3,114,087	28	4,636,491
됟	29	Permanently restricted net assets	7,236,060	29	4,249,895
or Fund		Organizations that do not follow SFAS 117, check here ► ☐ and complete lines 30 through 34.			
9	30	Capital stock or trust principal, or current funds		30	
Assets	31	Paid-in or capital surplus, or land, building or equipment fund		31	
AS	32	Retained earnings, endowment, accumulated income, or other funds		32	
Net	33	Total net assets or fund balances	19,272,021	33	16,555,088
_	34	Total liabilities and net assets/fund balances	42,469,133	34	38,289,287
Pa	rt XI	Financial Statements and Reporting			

ParitXI	Financial	Statements	and Reporting

			Yes	No
1	Accounting method used to prepare the Form 990			_
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		Νo
b	Were the organization's financial statements audited by an independent accountant?	2b	Yes	
c	If "Yes" to lines 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c	Yes	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a		Νο
b	If "Yes," did the organization undergo the required audit or audits?	3b		

**Employer identification number** 

### **SCHEDULE A**

(Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

## **Public Charity Status and Public Support**

To be completed by all section 501(c)(3) organizations and section 4947(a)(1)nonexempt charitable trusts. Attach to Form 990 or Form 990-EZ. See separate instructions.

OMB No 1545-0047

Open to Public Inspection

TILTO	SCHO	OOL							proyer rac		
									-022223		
	rt I			harity Status (to be co					Instruct	ions)	
	rganı			ation because it is (Please							
1	<u> </u>	A church, convention of churches, or association of churches described in <b>Section 170(b)(1)(A)(i).</b>									
2	고			tion 170(b)(1)(A)(ii). (Attac							
3	<u></u>	-	•	e hospital service organizati			-		- '		•
4	ı	A medical research organization operated in conjunction with a hospital described in <b>Section 170(b)(1)(A)(iii).</b> Enter the									
	_	•	name, city, and								
5	ı	An organiza	ation operated 1	for the benefit of a college or	universit	y owned o	roperated	l by a gove	ernmental	unit desc	rıbed ın
	_	Section 170	0(b)(1)(A)(iv).	(Complete Part II )							
6		A federal, s	state, or local g	overnment or governmental	unıt descr	ribed in <b>Se</b>	ection 170	(b)(1)(A)	(v).		
7	Г			ally receives a substantial p		support fro	om a gove	rnmental u	ınıt or fror	n the gene	eral public
_	_		-	o)(1)(A)(vi) (Complete Par	•	l.+. D	+ TT \				
8	<u> </u>		•	ped in Section 170(b)(1)(A)		•	•			6	
9	ı			ally receives (1) more than							
		•		lated to its exempt functions	-		•	,	•		
				estment income and unrelate						k) irom bu	sinesses
10	_			on after June 30, 1975 See							*· \
10	<u> </u>	_	=	and operated exclusively to	•		•				•
11	ı	-	-	and operated exclusively fo orted organizations describe		, ,			,		· · ·
				type of supporting organiza		٠,	` '	•	, , ,		
		а Г⊤	ype I <b>b</b>	Type II c	Type III	- Function	nally Integ	grated	d	Гтуре	III - Other
e	Г	•		rtıfy that the organızatıon ıs						-	•
				agers and other than one or	more publ	licly supp	orted orga	nizations	described	ın sectior	1 509 (a)(1) or
f		section 50		d a written determination fro	m the IRS	Sthatitis	a Tyne I	Type II o	r Type III	supportir	na organization
•		check this			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		u . , po 1,	. , po 11 o	, po	очррони.	
g		_		as the organization accepte	d any gift	or contrib	utıon from	any of the	)		
		following pe					<b>.</b>		J ()		[ ]
				r indirectly controls, either a			tn persons	aescribe	a in (ii)	44	Yes No
			· -	ng body of the the supported	_	tion				11g	<del></del>
				erson described in (i) above						11g(	<del></del>
L		` '		ty of a person described in (	. , , ,					11g(	
h		Provide the	e ioliowing infor	mation about the organizatio	nis the org	janization	supports				
-	(i) N	ame of	(ii) EIN	(iii) Type of organization	/is/\ T	s the	(w) Did v	ou notify	/wi> 1	s the	(vii) A mount of
		orted	(11) LIN	(described on lines 1-9		ation in		nization		ation in	support?
		nization		`above or IRC section	_	listed in		i) of your		rganized	''
				(See Instructions))		verning	supp	ort?	ın the	US?	
document?							1	4			
	Yes No Yes No										
						-		-			_
						-		-		-	
						-		-		-	
						-		-		-	
			ı	I .	1	1	1	1	1	1	1

Total

Part II	Support Schedule for Organizations Described in IRC 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.)

Pι	ıblic Support		, ,	,				
Cale	endar year (or fiscal year beginning in)	(a) 2004	<b>(b)</b> 2005	(c) 2006	(d) 2007	(e)	2008	(f) Total
1	Gifts, grants, contributions, and							
	membership fees received (Do not							
	include any "unusual grants ")							
2	Tax revenues levied for the organization's							
	benefit and either paid to or expended on							
_	its behalf The value of services or facilities					<del> </del>		
3	furnished by a governmental unit to the							
	organization without charge							
4	Total. Add line 1-3					1		
5	The portion of total contribution by each							
5	person (other than a government unit or							
	publicly supported organization) included							
	on line 1 that exceed 2% of the amount							
	shown on line 11, column							
	· (f)							
6	Public Support subtract line 5 from line							
	4							
	otal Support		1		T			
	endar year (or fiscal year beginning in)	(a) 2004	<b>(b)</b> 2005	(c) 2006	(d) 2007	(e) :	2008	(f) Total
7	A mounts from line 4							
8	Gross income from interest, dividends,							
	payments received on securities loans,							
	rents, royalties and income from similar							
_	sources							
9	Net income from unrelated business							
	activities, whether or not the business is regularly carried on							
10	Other income Do not include gain or loss							
10	from the sale of capital assets (Explain in							
	Part IV )							
11	Total Support (Add lines 7 through 10)							
12	Gross receipts from related activities, etc	(See instructio	ns )		•	12		
13	First Five Years. If the Form 990 is for the	organization's f	irst second thu	d fourth or fifth	ntay vearas a F		3)	
	organization, check this box and <b>stop here</b>		mat, second, tim	u, rouren, or mer	rtax year as a s	/O1(C)(C	• •	<b>▶</b> □
								•
Co	omputation of Public Support Perc	entage						
14	Public Support Percentage for 2008 (line 6	5 column (f) dıvı	ded by line 11 c	olumn (f))		14		
15								
16a	33 1/3% Test - 2008. If the organization di	d not check the	box on line 13.	and line 14 is 3	3 1/3% or more.	check 1	this box	
	and <b>stop here.</b> The organization qualifies a				,			<b>▶</b> □
b	33 1/3% Test - 2007. If the organization d				15 is 33 1/3% d	r more,	check th	
	box and stop here. The organization qualifi	es as a publicly	supported orga	nızatıon				<b>▶</b> □
17a	10% Facts and Circumstances Test - 2008.							
	more, and if the organization meets the "fa		•					· —
	organization meets the "facts and circums							<b>►</b> □
Ь	10% Facts and Circumstances Test - 2007.							
	more, and if the organization meets the "fa		•					_
4.0	the organization meets the "facts and circu							n ▶
18	<b>Private Foundation.</b> If the organization did	not check the b	oux on line 13, 1	oa, 160, 1/a or	1/D, Check this	oox an	u see	<b>▶</b> □
	ınstructions							F-1

Pa	Support Schedule for On (Complete only if you ched				(2)		
	ction A. Public Support		_	,			
Cale	ndar year (or fiscal year beginning in)	(a) 2004	<b>(b)</b> 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not						
2	include any "unusual grants ") Gross receipts from admissions,						
2	merchandise sold or services performed,						
	or facilities furnished in any activity that						
	is related to the organization's tax-						
	exempt purpose						
3	Gross receipts from activities that are						
	not an unrelated trade or business under						
	section 513						
4	Tax revenues levied for the						
	organization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to the						
_	organization without charge						
6	Total Add lines 1-5						
7a	A mounts included on lines 1, 2, and 3						
	received from disqualified persons Amounts included on lines 2 and 3						
D	received from other than disqualified						
	persons that exceed the greater of 1% of						
	the total of lines 9, 10c, 11, and 12 for						
	the year or \$5,000						
c	Total of lines 7a and 7b						
8	Public Support (Substract line 7c from						
_	line 6)						
То	tal Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2004	<b>(b)</b> 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
9	A mounts from line 6						
10a	Gross income from interest, dividends,						
	payments received on securities loans,						
	rents, royalties and income from similar						
	sources						
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses						
	acquired after 30 June, 1975		+				
С	Add lines 10a and 10b						
11	Net income from unrelated business						
	activities not included in line 10b, whether or not the business is regularly						
	carried on						
12	Other income Do not include gain or loss						
	from the sale of capital assets						
	(Explain in Part IV )						
13	Total Support (Add lines 9, 10c, 11 and						
	12)						
14	First Five Years If the Form 990 is for the	organızatıon's fı	rst, second, thir	d, fourth, or fifth	ntax year as a 5	01(c)(3) organı	zation,
	check this box and <b>stop here</b>						<b>▶</b> □
	manufaction of Dublic Compact Days						
15	mputation of Public Support Perc Public Support Percentage for 2008 (line		dod by line 12 o	olumn (fl)		T 4= T	
			•	.orumin (1))		15	
16	Public Support Percentage for 2007 Schedule A, Part IV-A, line 27g						
		D					
Co	mputation of Investment Income Investment Income Percentage for 2008 (			ne 13 column /f	<u> </u>	17	
				-	"	17	
ΤQ	Investment Income Percentage from 2007	ocnequie A , Pa	TLIV-A, IINE 2/	H		18	

19a 33 1/3% Tests - 2008. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line

17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization **33 1/3% Tests - 2007.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization

Private Foundation If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions

Schedule A (Form 990 or 990-EZ) 2008

**▶**□

Part IV	<b>Supplemental Information.</b> Complete this part to provide the information required by Part II, line 10; Part II, line 17a or 17b, or Part III, line 12. Provide and any other additional information. (see instructions)							
	Facts and Circumstances Test							

Schedule A (Form 990 or 990-EZ) 2008

OMB No 1545-0047

Open to Public

## **SCHEDULE D**

(Form 990)

Department of the Treasury Internal Revenue Service

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

Supplemental Financial Statements

Inspection **Employer identification number** Name of the organization TILTON SCHOOL 02-0222239 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year Aggregate Contributions to (during year) 3 Aggregate Grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised □ No funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor or other impermissible private benefit? Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7 Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or pleasure) Preservation of an historically importantly land area Preservation of certified historic structure Protection of natural habitat Preservation of open space Complete lines 2a-2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Year 2a Total number of conservation easements h 2b Total acreage restricted by conservation easements 2c c Number of conservation easements on a certified historic structure included in (a) 2d d Number of conservation easements included in (c) acquired after 8/17/06 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during 3 the taxable year 🕨 Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, violations, and enforcement of the conservation easements it holds? Staff or volunteer hours devoted to monitoring, inspecting and enforcing easements during the year 🕨 7 A mount of expenses incurred in monitoring, inspecting, and enforcing easements during the year 🕨 \$ Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(ı) and 170(h)(4)(B)(ıı)? In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items

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

Revenues included in Form 990, Part VIII, line 1

(ii) Assets included in Form 990, Part X

Assets included in Form 990, Part X

following amounts required to be reported under SFAS 116 relating to these items

**►** \$

If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the

3	Using the organization's accession and othe								. <b>5</b> (CC	ntinued)
-	items (check all that apply)	,	<b>-</b> .		-	•				
а	Public exhibition		d	Γ	Loan or exc	hange programs	;			
b	Scholarly research		e	Γ	Other					
c	Preservation for future generations									
4	Provide a description of the organization's co Part XIV	ollections and explai	n hov	w the	y further the	organization's ex	xempt purpo	se in		
5	During the year, did the organization solicit of assets to be sold to raise funds rather than t						nılar	ΓY	es	┌ No
Pa	rt IV Trust, Escrow and Custodial A Part IV, line 9, or reported an an					anızatıon answ	ered "Yes	" to For	-m 9	90,
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?	ian or other interme	dıary	for c	ontributions	or other assets	not	ΓY	es	┌ No
b	If "Yes," explain why in Part XIV and comple	te the following tabl	е				1			
_								A moun	iτ	
C -	Beginning balance					1c				
d	Additions during the year					1d				
e	Distributions during the year					1e				
f	Ending balance					1f				
2a	Did the organization include an amount on Fo		21?					<b>┌</b> ¥	es	┌ No
b	If "Yes," explain the arrangement in Part XIV									
Pa	rt V Endowment Funds. Complete	If the organization (a)Current Year		)Prior		Form 990, Par wo Years Back (d)			Four V	nare Back
1a	Beginning of year balance	15,164,832	(1	PHOL	real (C)	wo rears back   (u)	Tillee Teals b	ack   (e)	oui re	ears back
b	Contributions	977,578								
c	Investment earnings or losses	-1,467,690								
d	Grants or scholarships	250,455								
e	Other expenditures for facilities	531,831								
_	and programs	·								
f	Administrative expenses									
g	End of year balance	13,892,434								
2	Provide the estimated percentage of the yea	r end balance held a	s							
а	Board designated or quasi-endowment 🕨	40 390 %								
ь	Permanent endowment 🕨 30 310 %									
С	Term endowment ► 29 300 %									
3a	Are there endowment funds not in the posses	ssion of the organiza	ition	that	are held and a	admınıstered for	the	_		
	organization by						г		Yes	No
	(i) unrelated organizations			•				3a(i)		No
	(ii) related organizations						[	3a(ii)		No
ь 4	If "Yes" to 3a(II), are the related organization Describe in Part XIV the intended uses of the	•					[	3b		
	rt VI Investments—Land, Buildings					art X line 10				
	<u> </u>	s, una Equipmei	14. 0		Cost or other	(b)Cost or other				
	Description of investment				is (investment)	basis (other)	(c) Deprecia	ation (	( <b>d)</b> Bo	ok value
1a	Land					3,778,225				3,778,225
	Buildings		•			22,308,383	ገ	0,905		6,577,478
	Leasehold improvements					, ,,,,,,,	,	·		. ,
	Equipment					2,539,590	1.06	0,723		1,478,867
	Other					19,152		, - ==		19,152
	II. Add lines 1a-1e (Column (d) should equal Fo		nn (B	), line	10(c).)	13,132		-+	2	1,853,722
		,,,	(-)	,	( / / -			ıle D (Fr		90) 200

Investments—Other Securities. See	Form 990, Part X, line 12.	/-X 14 11 1 2 2 1 1 1
<ul><li>(a) Description of security or cateory (including name of security)</li></ul>	(b)Book value	<b>(c)</b> Method of valuation Cost or end-of-year market value
nancial derivatives and other financial products		,
osely-held equity interests		
ther		
Column (h) should equal Form 000 Part V cal (B) Inc. 12 )		
otal. (Column (b) should equal Form 990, Part X, col (B) line 12 ) 🕨		
art VIII Investments—Program Related. Se	e Form 990, Part X, line 13.	
(a) Description of investment type	(b) Book value	<b>(c)</b> Method of valuation Cost or end-of-year market value
		Cost of enu-of-year market value
Total. (Column (b) should equal Form 990, Part X, col (B) line 13 )		
Part IX Other Assets. See Form 990, Part X, II (a) Descri		/EV P = -11
(a) Descri	μισπ	(b) Book value
otal. (Column (b) should equal Form 990, Part X, col.(B) line		
Part X Other Liabilities. See Form 990, Part X		
(a) Description of Liability  ederal Income Taxes	(b) A mount	
RESENT VALUE OBLIGATION OF CHARITABLE		
EMAINDER TRUST	10,299	
resent value obligation of charitable gift annuities	703,041	
nterest rate swap contract	2,030,995	
Total. (Column (b) should equal Form 990, Part X, col (B) line 25) 🕨	2,744,335	

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	12,582,837
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	12,981,408
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	-398,571
4	Net unrealized gains (losses) on investments	4	-1,055,714
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	-1,262,648
9	Total adjustments (net) Add lines 4 - 8	9	-2,318,362
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	-2,716,933
Par	t XII Reconciliation of Revenue per Audited Financial Statements With Revenue p	er R	eturn
1	Total revenue, gains, and other support per audited financial statements	1	9,566,634
2	A mounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments		
b	Donated services and use of facilities		
С	Recoveries of prior year grants		
d	Other (Describe in Part XIV)		
е	Add lines 2a through 2d	2e	-1,055,714
3	Subtract line <b>2e</b> from line <b>1</b>	3	10,622,348
4	A mounts included on Form 990, Part VIII, line 12, but not on line <b>1</b>		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a		
b	Other (Describe in Part XIV)	_	
_ C	Add lines <b>4a</b> and <b>4b</b>	4c	1,960,489
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	12,582,837
1	Reconciliation of Expenses per Audited Financial Statements With Expenses  Total expenses and losses per audited financial statements	1 1	11,020,919
2	Amounts included on line 1 but not on Form 990, Part IX, line 25	<u> </u>	11,020,515
a	Donated services and use of facilities		
b	Prior year adjustments	1	
С	Losses reported on Form 990, Part IX, line 25		
d	Other (Describe in Part XIV) 2d	1	
e	Add lines 2a through 2d	2e	0
3	Subtract line <b>2e</b> from line <b>1</b>	3	11,020,919
4	A mounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIV)	]	
c	Add lines <b>4a</b> and <b>4b</b>	4c	1,960,489
5	Total expenses Add lines <b>3</b> and <b>4c.</b> (This should equal Form 990, Part I, line 18)	5	12,981,408
Pai	rt XIV Supplemental Information		

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

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part XIV, lines 1b and 2b, Part V, line 4, Part X, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b

Return Reference	Explanation
Description of Intended Use of Endowment Funds	For generations, Tilton School has maintained a stable endowment through the generosity of grateful alumni and alumnae, friends and benefactors that have believed in the mission of the school to advance the passionate pursuit of lifelong learning. The endowment helps sustain the school annually with a draw based on a spending policy in line with UPMIFA to lend support to the operating budget. In order for the endowment funds to be available for perpetuity, the funds are invested with appropriate asset allocations that are reviewed throughout the year based on clear guidelines and objectives for preservation of capital and growth for long term viability, balancing its positive impact on Tilton School students today and in the future. With careful stewardship, the endowment funds are spent in accordance with donor intents and have enabled the school with assistance for a broad array of activities such as financial aid, merit scholarships, enrichment programs for faculty, continued education for faculty, theatre, arts, athletics and enhancements to buildings each year
	CURRENT YEAR DECREASE IN CSV OF LIFE INSURANCE 3805 CHANGE IN VALUE OF SPLIT-INTEREST AGREEMENT AND CHARITABLE REMAINDER TRUST -110453 CHANGE IN VALUE OF INTEREST RATE SWAP AGREEMENT - 1156000
	FINANCIAL AID TO STUDENTS (TUITION IS SHOWN NET ON FINANCIAL REPORT) 1960489
	FINANCIAL AID (NET WITH TUITION ON FINANCIAL REPORT) 1960489
	Part VI, Line 1b The costs basis and accumulated depreciation for Buildings includes both buildings and building improvements
	Description of Intended Use of Endowment Funds

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DLN: 93493132011070

OMB No 1545-0047

2008

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule I

(Form 990)

Complete if the organization answered "Yes," on Form 990, Part IV, lines 21 or 22. Attach to Form 990.

**Grants and Other Assistance to Organizations,** 

Governments and Individuals in the U.S.

Open to Public Inspect ion Employer identification number

TILTON SCHOOL						02-0222239	
Does the organization mathe selection criteria use Describe in Part IV the co	aintain records to sed to award the gran	nts or assistance? edures for monitoring the	of the grants or assista 	he United States			
Form 990, Part Part IV and Sch	IV, line 21 for ar iedule I-1 if addit	ny recipient that rece Gional space is	ived more than \$5,0	00. Check this box	if no one recipient rec	eived more than \$5,	
1(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	'•'	(h) Purpose of grant or assistance
2 Enter total number of sec			I.	<u> </u>	_		
organizations 3 Enter total number of oth					• 		•
For Paperwork Reduction Act Not	tice, see the Instruct	ions for Form 990.		Cat No 50055	p	Sc	hedule I (Form 990) 2008

Part III	Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.
	Use Schedule I-1 (Form 990) if additional space is needed.

(a) Type of grant or assistance (b) Number of recipients (c) Amount of cash grant (d) Amount of non-cash assistance (e) Method of valuation (book, FMV, appraisal, other)  109 students were awarded financial aid and scholarships for the year (f) Description of non-cash assistance (e) Method of valuation (book, FMV, appraisal, other)  (a) Type of grant or assistance (e) Method of valuation (book, FMV, appraisal, other)  (b) Description of non-cash assistance (e) Method of valuation (book, FMV, appraisal, other)					
	(a)Type of grant or assistance			(book, FMV, appraisal,	(f)Description of non-cash assistance
		109	1,960,489		

Part TV	Supplemental Information, Co.	onlete this part to	provide the information rec	uured in Part I line 2	, and any other additional information.
	Supplemental Information est	ipiece and pare to	provide the information red	Janea III I are 1, IIIIe 2	, and any outer additional information.

Ident if ier	Return Reference	Explanation

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DLN: 93493132011070

OMB No 1545-0047

**Schedule J** (Form 990)

**Compensation Information** 

**Employer identification number** 

Department of the Treasury Internal Revenue Service

TILTON SCHOOL

Name of the organization

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

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

Open to Public Inspection

			02-0222239			
Pa	rt I Questions Regarding Compensatio	n				
					Yes	Νo
1a	Check the appropriate box(es) if the organization pro 990, Part VII, Section A, line 1a Complete Part II					
	First class or charter travel	<u>  -                                   </u>	Housing allowance or residence for personal use			
	Travel for companions	Γ	Payments for business use of personal residence			
	Tax idemnification and gross-up payments	Γ	Health or social club dues or initiation fees			
	Discretionary spending account	<b>▽</b>	Personal services (e g , maid, chauffeur, chef)			
b	If line 1a is checked, did the organization follow a w provision of all the expenses described above? If "I			1b	Yes	
2	Did the organization require substantiation prior to officers, directors, trustees, and the CEO/Executive			2	Yes	
3	Indicate which, if any, of the following the organizationganization's CEO/Executive Director Check all t					
	Compensation committee	<u> </u>	Written employment contract			
	✓ Independent compensation consultant	<u> </u>	·			
	Form 990 of other organizations	<u>  -</u>	Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990,	Part VI	I, Section A, line 1a			
а	Receive a severance payment or change of control	payment	t?	4a		Νo
b	Participate in, or receive payment from, a suppleme	ental non	nqualified retirement plan?	4b	Yes	
c	Participate in, or receive payment from, an equity-b	ased co	mpensation arrangement?	4c		Νo
	If "Yes" to any of lines 4a-c, list the persons and pi	rovide th	ne applicable amounts for each item in Part III			
	501(c)(3) and 501(c)(4) organizations only must co	omplete	lines 5-8.			
5	For persons listed in form 990, Part VII, Section A, compensation contingent on the revenues of	, line 1a,	, did the organization pay or accrue any			
а	The organization?			5a		Νo
Ь	Any related organization?			5b		Νo
	If "Yes," to line 5a or 5b, describe in Part III					
6	For persons listed in form 990, Part VII, Section A, compensation contingent on the net earnings of	, line 1a,	, dıd the organızatıon pay or accrue any			
а	The organization?			6a		Νo
b	Any related organization?			6b		Νo
	If "Yes," to line 6a or 6b, describe in Part III					
7	For persons listed in form 990, Part VII, Section A payments not described in lines 5 and 6? If "Yes,"			7		No
8	Were any amounts reported in Form 990, Part VII, subject to the initial contract exception described in Part III					

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

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

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

(A) Name	(B) Breakdown of	W-2 and/or 1099-MI	SC compensation	(C) Deferred	(D) Nontaxable	(E) Total of columns	(F) Compensation
	(i) Base compensation	(ii) Bonus & ıncentive compensation	(iii) Other compensation	compensation	benefits	(B)(ı)-(D)	reported in prior Form 990 or Form 990-EZ
JAMES R CLEMENTS (1)	204,809	30,000	2,897		35,690	273,396	290,640
(ii)							
(i)							
(ii)							
(i)							
(ii)							
(i)							
(ii)	)						
(i)							
(ii)	)						
(i)							
(ii)							
(i)							
(ii)							
(i)							
(ii)	)						

### Part III Supplemental Information

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

Ident if ier	Ret urn Reference	Explanation
	Part I, Line 1a	The Head of School as Chief Executive Officer is required to live on campus as a condition of employment for a boarding school. The school provides a home for the Head of School and his family as part of his salary arrangement. The valuation of the housing benefit is determined through data comparison with similar schools in the Independent Schools Association of Northern New England of which Tilton School is a member. The school does provide personal maid service for the home of the Head of School. As the home is often used for meetings and fundraising activities, cleaning services are provided through the school's Housekeeping Division. The valuation of this service has been computed by determining the number of personnel assigned to this task and the hours per week.
	Part I, Line 4a	James R Clements received payments from a supplemental nonqualifed retirement plan amounting to \$15,500

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DLN: 93493132011070 OMB No 1545-0047

Open to Public **Inspection** 

# **Supplemental Information on Tax Exempt Bonds**

Department of the Treasury Internal Revenue Service

Schedule K

(Form 990)

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

Name of the organization TILTON SCHOOL

Employer identification number 02-0222239

Pa	(a) Issuer Name	(b) Issuer EIN	(c) CUSIP #	(d) Date	Issued	(e) Issue	Price	(f) Des	cription of	Purpose	( <b>g</b> ) De	efeased	Bel	n) On half of suer
											Yes	No	Yes	No
A	new hampshire health and education facilities authority	02-0279866	644614nx3	02-23-	2006	17,0	000,000	CONSTRUC	TION FIN	ANCING		х		х
Pa	rt III Proceeds (Optional fo	or 2008)											<u> </u>	
		•			Α.	I	3	(	С		)		E	
1	Total Proceeds of Issue													
2	Gross Proceeds in Reserve Fund	ds												
3	Proceeds in Refunding or Defeas	sance Escrows												
4	Other Unspent Proceeds													
5	Issuance Costs from Proceeds													
6	Working Capital Expenditures fro	om Proceeds												
7	Capital Expenditures from Proce	eeds												
8	Year of Substantial Completion									1				
				Yes	No	Yes	No	Yes	No	Yes	No	Ye	s	No
9	Were the bonds issued as part o	f a current refunding is	sue?											
10	Were the bonds issued as part o	f an advance refunding	ıssue?											
11	Has the final allocation of proce	eds been made?												
12	Does the organization maintain a	adequate books and re	cords to support the											
Pa	rt IIII Private Business Us	e (Optional for 2008	3)				•							
					١	ı	3	(	Ç		)		E	
				Yes	No	Yes	No	Yes	No	Yes	No	Ye	s	No
1	Was the organization a partner is which owned property financed b		ember of an LLC,											
2	Are there any lease arrangemen which may result in private busii		inanced property											
For	Paperwork Reduction Act Notice, see t	the Instructions for Forn	n 990.			Cat No 501	L93E			S	chedule K	(Form 99	0) 200	8

Schedule K	(Form 990) 20	800	
Part III	Private Bu	siness Use	(Continued)

		4	A	E	3	(	С	I	D	I	E
		Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
3a	Are there any management or service contracts with respect to the financed property which may result in private business use?										
3b	Are there any research agreements with respect to the financed property which may result in private business use?										
3с	Does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts or research agreements relating to the financed property?										
4	Enter the percentage of financed property used in a private business use by entities other than a 501(c)(3) organization or a state or local government										
5	Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another 501(c)(3) organization, or a state or local government										
6	Total of lines 4 and 5										
7	Has the organization adopted management practices and procedures to ensure the post-issuance compliance of its tax-exempt bond liabilities?										
Pai	rt IV Arbitrage (Optional for 2008)										
		ı	Α	E	3	(	<u>c</u>	ı	<u> </u>	ı	Ε
		Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
1	Has a Form 8038-T been filed wth respect to the bond issue?										
2	Is the bond issue a variable rate issue?										
3a	Has the organization or the government issuer identified a hedge with respect to the bond issue on its books and records?										
ь	Name of provider										
С	Term of hedge										
4a	Were gross proceeds invested in a GIC?										
ь	Name of provider										
С	Term of GIC										
d	Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?										
5											
	Were any gross proceeds invested beyond an available temporary period?										

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# **SCHEDULE 0**

Department of the Treasury
Internal Revenue Service

(Form 990)

# **Supplemental Information to Form 990**

2008

OMB No 1545-0047

Open to Public Inspection

Name of the organization TILTON SCHOOL

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

Employer identification number

02-0222239

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section A, line 2		Board members Ellen Finn and Dr R Thomas Finn have a family relationship James R Clements, the head of the school and a board member, has a family relationship with Beverly Clements who is an employee of the School Board member Elaine Derigo has a family relationship with Tom Derigo, who is an employee of the School

ldentifier	Return Reference	Explanation					
Form 990, Part VI, Section A, line 4		Tilton School amended and restated their bylaws on May 8, 2009 See Tilton School bylaws at Statement A					

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section A, line 4		Tilton School Bylaw's were amended and restated as of 5/8/09. The amended and restated bylaw's provided greater detail of the role of the Board of Trustees, Officers, head of the school and the various committees of the school. The trustee eligibility qualifications are also included in greater detail in the amended bylaw's. The article of amendments and dissolutions was also amended. The number of board of trustees was also amended to no few er than ten nor more than twenty-seven persons elected. The amended of bylaw's also included a waiver of term limitation.

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section A, line 10		Policy Tilton School recognizes that the governance role of its Board of Trustees includes the annual review of Form 990 (Return of Organizations Exempt from Taxation). Accordingly, Tilton School requires review of the Form 990 by the Board of Trustees prior to its filing on an annual basis. Schedule B is received by the Audit Committee only. This Committee recommends approval to the full Board. Procedures. 1. Senior management of Tilton School is responsible for the timely preparation of Form 990. 2. The completed From 990 will be provided to the Audit Committee of the Board of Trustees sufficiently in advance of the filing deadline to enable a detailed and conscientious review by all members of the committee. All questions, concerns, etc. of the Audit Committee will be addressed by the Director of Finance. & Operations and incorporated into the Form 990 as appropriate. 3. All members of the Board of Trustees will be invited to review the completed Form 990 in advance of filing deadline via the Trustee portal of the school's wiebsite at www tiltonschool org. Should a trustee not have wiebsite access, they may request an electronic copy via email or hard copy via US mail to review. All questions, concerns, etc. of the members of the Board of Trustees will be addressed by the Director of Finance & Operations and incorporated into the Form 990 as appropriate. 4. After all of the input from the Board of Trustees and the Audit Committee has been appropriately addressed, senior management of Tilton School will file the final Form 990 as required.

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section B, line 12c		The School received advice from prior counsel that an annual review of the conflict of interest policy was not required. Based on advice from new counsel, going forward the School will update, monitor, and enforce compliance with the conflict of interest policy on an annual basis beginning in May of 2010.

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section B, Ine 15		The Policy on the Process of Determining Compensation of Tilton School applies to the compensation of the following persons employed by Tilton School 1. Tilton School Employed Executive by tittle. Head of School 2. Other Officers or Key Employees of Tilton School by title. (N/A) The process of determining compensation includes the following elements. (1) review and approval by the Board of Directors as recommended by the Compensation. Committee of the Board of Directors, (2) use of industry data as to comparable compensation, (3) review and approval by an independent compensation of the person is reviewed and approved by the Board of Directors as recommended and presented by the Compensation Committee. Any Board member with a conflict of interest with respect to the compensation arrangement is not involved in this review and approval. 2. Use of Industry data as to comparable compensation. Annually the Compensation Committee requests industry data on comparable salary that is provided by the Director of Finance and Operations. The school participates in salary surveys of its national and local independent school associations annually in order to obtain comparable data and remain current in the industry trends. 3. Review and approval by an independent compensation specialist. The Board of Directors from time-to-time may hire an independent compensation specialist to review and approve the compensation package of the Chief Employed Executive (Head of School) and other Key employees when appropriate and not required annually. This review helps to ensure that appropriate comparable data is used and the written salary arrangement is properly managed by the school. 4. Contemporaneous documentation and recordkeeping. There is contemporaneous documentation and recordkeeping the compensation arrangement. The compensation arrangement does result in a written, formal contract signed by the Chair of the Board of Directors and the Chief Executive Officer.

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section C, line 19		Tilton School's 990 is available on-line at www guidestar org. Governing documents and the conflict of interest policy are available upon request. Financial statements and the Form 990 are available for inspection at the School.

ldentifier	Return Reference	Explanation
FOrm 990, Part XI, Line 2c		The School's audit committee assumes responsibility for the oversight of the audit and recommends the independent auditor. The full Board of Trustees votes to accept the audit and the independent auditor. There have been no changes in this process from the prior year.

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section B, Line 12b		As with Trustees, Officers, Chief Executive Officer and Key Employees, the school is expanding its Conflict of Interest Policy to include all employees to disclose family and business relationships across the organization. This policy is expected to be implemented in Fiscal year 2009/10.

ldentifier	Return Reference	Explanation
FOrm 990, Part VII		The Board of Trustees formally meets three times a year At its Spring meeting, held in May 2009, a new slate of officers were elected. Their appointment takes place immediately upon election. Therefore, there are two board presidents, 1st vice presidents, 2nd vice presidents, treasurers, and secretaries listed in this section. The following officers had a term of May 2009 - June 2009. Stephen Anderson, Sarah Bird, J and Terrill Judd. The following officers had a term of May 2008 - April 2009. Thomas Callahan, Rovert Graham, Philip Hamblet and Dr. Robert Wilson. Robert J.S. Roriston servered as treasurer from May 2008 - January 2009 when he stepped down and Jamie A. Rome became the acting treasurer by board vote. Jamie A. Rome was formally elected to the 1-year position at the annual election of officers at the may 2009 meeting.

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Cat No 51056K

Schedule O (Form 990) 2008

### Software ID: Software Version:

**EIN:** 02-0222239 Name: TILTON SCHOOL

Form 990, Part VII - Section Aaa											
		Posit t	(C tion ( hat a	chec		I			(5)	(F)	
(A) Name and Title	(B) Average hours per week	Individual Trustee or Director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W- 2/1099MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	Estimated amount of other compensation from the organization and related organizations	
STEPHEN ANDERSON , Board President	25 00	х		х				0	0	0	
JAMES R CLEMENTS , HEAD OF SCHOOL	40 00	Х		х				237,706	0	35,690	
THOMAS CALLAHAN , BOARD PRESIDENT	3 00	Х		х				0	0	0	
MARCIA CLEVELAND , TRUSTEE	1 00	Х						0	0	0	
TIMOTHY CLOUDMAN , TRUSTEE	2 00	Х						0	0	0	
DR R THOMAS FINN Jr , TRUSTEE	1 00	Х						0	0	0	
ROBERT GRAHAM , 1ST VICE PRESident	2 00	Х		х				0	0	0	
PHILIP HAMBLET , 2ND VICE PResident	3 00	×		х				0	0	0	
ROBERT HENDERSON JR , TRUSTEE	1 00	Х						0	0	0	
ANNE HOWE , TRUSTEE	1 00	Х						0	0	0	
MARK MCAULIFFE , TRUSTEE	3 00	Х						0	0	0	
SARAH bird , 1st Vice President	10 00	Х		Х				0	0	0	
ROBERT RORISTON , TreaSURER	3 00	Х		Х				0	0	0	
DrROBERT WILSON, SECRETARY	2 00	Х		Х				0	0	0	
STEPHEN CAMANN , TRUSTEE	1 00	Х						0	0	0	
MELISSA thompson CURRIER, TRUSTEE	1 00	Х						0	0	0	
ELLEN FINN , TRUSTEE	1 00	Х						0	0	0	
LARRY BARTELL , TRUSTEE	10 00	Х						0	0	0	
THOMAS MALONEY , TRUSTEE	1 00	Х						0	0	0	
J TERRILL JUDD, 2nd VICE PRESident	10 00			Х				0	0	0	
JAMIE ROME , treaSURER	10 00	Х		Х				0	0	0	
SHARON SPANOS , Parents association pres	1 00	Х						0	0	0	
john morton , truSTEE	1 00							0		0	
richard ammons , truSTEE	1 00							0	_	0	
elaine derigo , faculty rep to board	1 00							37,656		15,732	
Lawrence O'Rourke , truSTEE	1 00				_			0		0	
Charles Patten , trustEE	3 00							0	_	0	
Kırk Wheale , trusTEE	1 00	X						0	0	0	
ELIZABETH SHEEHAN , Director of Finance & Op	40 00					Х		106,020		13,223	
Thomas Trafton , Dir of Devel	40 00					X		114,219	0	6,686	

**Employer identification number** 

### SCHEDULE E

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

# **Schools**

Attach to Form 990 or Form 990-EZ. To be completed by organizations that answer "Yes" to Form 990, Part IV, line 13, or Form 990-EZ, Part VI, line 48.

OMB No 1545-0047

2008

Open to Public

LTOI	N SCHOOL			
	02-0222239		YES	NO
1	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws,			
•	other governing instrument, or in a resolution of its governing body?	1	Yes	
2	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	2	Yes	
3	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe If "No,"		103	
	please explain THE SCHOOL'S NON-DISCRIMINATION POLICY IS CLEARLY STATED IN ITS PROMOTIONAL CATALOG AND IS AVAILABLE ON THE WEBSITE	3	Yes	
4	Does the organization maintain the following?			
а	Records indicating the racial composition of the student body, faculty, and administrative staff?	4a	Yes	
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	4b	Yes	
c	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing			
	with student admissions, programs, and scholarships?	4c	Yes	
d	Copies of all material used by the organization or on its behalf to solicit contributions?	4d	Yes	
	Does the organization discriminate by race in any way with respect to Students' rights or privileges?			No
	Admissions policies?	5b		No
c	Employment of faculty or administrative staff?	5c		Νo
d	Scholarships or other financial assistance?	5d		Νo
е	Educational policies?	5e		Νo
f	Use of facilities?	5f		Νo
g	Athletic programs?	5g		Νo
h	Other extracurricular activities?  If you answered "Yes" to any of the above, please explain (If you need more space, attach a separate statement)	5h_		No
6-	Does the organization receive any financial aid or assistance from a governmental agency?	6a	Yes	
	Has the organization's right to such aid ever been revoked or suspended?	6b	162	No
_	If you answered "Yes" to either 6a or b, please explain using an attached statement 🦸			
7	Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05			
	of Day Dree 75 50 1075 2 C.B. 597 cavering regist pends arimination? If "No." attack an explanation	-	Vaa	

Form 990, Part VII - Section Aaa

<b>(A)</b> Name and Title	(B) Average hours per week	(C) Position (check all that apply)							(5)	(F)
		Individual Trustee or Director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W- 2/1099MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	Estimated amount of other compensation from the organization and related organizations
Stephen Poirot , Asst Head of School	40 00					Х		108,790	0	19,465

### Form 990, Part I, Line 1 - Briefly describe the Organization's mission or most significant activities:

Tilton School is an independent, coeducational, college preparatory school serving students from 9th to 12th grade and post-graduates. Tilton's student body of 272 consists of 54 day students and 218 boarding students from 23 states and 17 countries. Although the Tilton Experience is different for every student, it challenges all students to try new things, learn new skills, and set new goals. Tilton School for over 160 years has believed in and seen the Power of Potential - the idea that every student has the ability to achieve, to excel, to uncover their innate skills and develop new ones. The Power of Potential is about both the outcome and process - a process of discovery, of challenge, of young adults stretching and accomplishing beyond their imagination or preconceived notion of their capabilities. Students leave Tilton with the skills, knowledge, and values essential to a life of personal and professional success and with a commitment to serve others.

### Form 990, Part III, Line 1 - Briefly describe the organization's mission:

Tilton School is an independent, coeducational, college preparatory school serving students from 9th to 12th grade and post-graduates. Tilton's student body of 272 consists of 54 day students and 218 boarding students from 23 states and 17 countries. Although the Tilton Experience is different for every student, it challenges all students to try new things, learn new skills, and set new goals. Tilton School for over 160 years has believed in and seen the Power of Potential - the idea that every student has the ability to achieve, to excel, to uncover their innate skills and develop new ones. The Power of Potential is about both the outcome and process - a process of discovery, of challenge, of young adults stretching and accomplishing beyond their imagination or preconceived notion of their capabilities. Students leave Tilton with the skills, knowledge, and values essential to a life of personal and professional success and with a commitment to serve others.