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Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

OMB No 1545-0047

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

Open to Public Inspection

<u>-</u>	<u>A</u> F	or the 2	2008 calendar year, or tax year beginning JUL 1, 2008 and ending	<u>JUN 30, 2009</u>	
ı	B c	heck if pplicable	Please C Name of organization	D Employer identif	cation number
		Address change	labet or green GREENHILLS SCHOOL		
		Name change	type Doing Business As	38-6	143974
		Initial return	See Number and street (or P.O. box if mail is not delivered to street address) Room/su		
		Termin- ation	Specific Instruct 850 GREENHILLS DRIVE	734-	769-4010
		Amende return	tions City or town, state or country, and ZIP + 4	G Gross receipts \$	14,061,552.
		Applica- tion	ANN ARBOR, MI 48105	H(a) Is this a group r	
		pending	F Name and address of principal officer.PETER B. FAYROIAN	for affiliates?	Yes X No
_			SAME AS C ABOVE	H(b) Are all affiliates in	cluded? Yes No
-			npt status X 501(c) (3) ◀ (insert no) 4947(a)(1) or 527		list (see instructions)
			► WWW.GREENHILLSSCHOOL.ORG	H(c) Group exemption	
9 7			ganization: X Corporation Trust Association Other ► L Yi Summary	ear of formation: 1968 i	M State of legal domicile: MI
2010	ij		riefly describe the organization's mission or most significant activities: GREENHIL	LS SCHOOL TS	ΔNT
₩4	ဦ		NDEPENDENT, NON-DENOMONATIONAL, COED, COLLEGE		
=	Governance	_	heck this box I if the organization discontinued its operations or disposed of m		
FEB	Š		umber of voting members of the governing body (Part VI, line 1a)	3	19
ij,			umber of independent voting members of the governing body (Part VI, line 1b)	4	19
\bigcirc	S Se		otal number of employees (Part V, line 2a)	5	168
Щ	Activities		otal number of volunteers (estimate if necessary)	6	55
5	5	7a To	otal gross unrelated business revenue from Part VIII, line 12, column (C)	7a	0.
SCANNED		b N	et unrelated business taxable income from Form 990 T, line 34	7b	0.
S				Prior Year	Current Year
	g		ontributions and grants (Part VIII, line 1h)	1,947,563.	1,535,018.
	Revenue		rogram service reverue Harry (1) (Ine 29)	<u>8,712,251.</u>	9,175,520.
	ě		vestment income (Part VIII, column (A), Junes 3, 4, and 7d)	264,409.	232,614.
		11 0	ther revenue (Part VIII, column (A), line 5, 6d, 8c, 9c, 10c, and 11e)	527,803.	405,623.
-			otal revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	11,452,026.	11,348,775.
	- 1		rants and similar amounts paid (Part X dolumn (A), lines 1-3)	1,094,589.	1,157,797.
		14 B	enefits paid to representers (Part IX, column (A), line 4) alaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	6 252 706	6 000 061
	ses			6,353,706.	6,882,261. 78,080.
	Expenses		rofessional fundraising fees (Part IX, column (A), line 11e) otal fundraising expenses (Part IX, column (D), line 25) 630,875.		76,080.
	M		ther expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	2,618,286.	2,458,386.
			otal expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	10,066,581.	10,576,524.
			evenue less expenses Subtract line 18 from line 12	1,385,445.	772,251.
-	58			Beginning of Year	End of Year
	Assets or d Balances	20 To	otal assets (Part X, line 16)	22,585,543.	22,010,657.
•	Y B	21 To	otal liabilities (Part X, line 26)	4,300,602.	4,533,042.
	Fige	22 N	et assets or fund balances Subtract line 21 from line 20	18,284,941.	17,477,615.
Ĺ	Pa	rt II	Signature Block		
		l a	Inder penalties of perjury, I declare that I have examined this return, including accompanying schedules and statemer nd complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowlet	its, and to the best of my knowled age	ge and belief, it is true, correct,
			(101/.1)	مه حسست ا	
	Sigr		Sonature of offiger	Date	ay 2010
ı	Here	e '	Z-6-T-	Date	
			JOHN NICKEL, DIRECTOR OF FINANCE Type or print name and title		
-		'	Preparer's Date		er's identifying number
	Paid -	s	1 A AAAA AAAAA AAAAA AAAAA AAAAAA AAAAAA		structions) 9 1 9 2
		arer's F	irm's name (or DANTE & MORAN DI.I.C	EIN ▶	
ı	Use	5, s	elf-employed). 1000 OAKBROOK DRIVE, SUITE 400		
			ANN ARBOR, MI 48104	Phone no. ► 7	34-665-9494
1	May	the IRS	discuss this return with the preparer shown above? (see instructions)		X Yes No

LHA For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions. 832001 12-18-08 SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

Form 990 (2008)

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Form 990 (2008) GREENHILLS SCHOOL
Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1_	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3_		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If Yes, complete Schedule C, Part II	4		X
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		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	_		17
_	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II			X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete	_		v
_	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X; or provide	_		Х
10	credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV Did the organization hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V	9	х	
11	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25?	10	^	
• •	If "Yes," complete Schedule D, Parts VI, VIII, IX, or X as applicable	11	x	
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	х	
13	Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	X	
14a	Did the organization maintain an office, employees, or agents outside of the U.S.?	14a		X
ь	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		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity	-		
	located outside the United States? If "Yes," complete Schedule F, Part II	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals			
	located outside the United States? If "Yes," complete Schedule F, Part III	16		Х
17	Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I	17	X	
18	Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	Х	
19	Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19	Х	
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		<u> </u>
21	Did the organization report more than \$5,000 on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
22	Did the organization report more than \$5,000 on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Х	
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete Schedule J	23	X	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer questions 24b-24d and complete Schedule K.			
	If "No", go to question 25	24a		<u> </u>
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a	05-		v
L	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		<u> </u>
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	OEL		x
26		25b		
40	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		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial	26	-	
۷,	contributor, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		X
	Complete Controlled to Cash an individual in 100, Complete Controlled E, 1 art in		990 (2	
			(-	

Form 990 (2008) GREENHILLS SCHOOL
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	1		
	indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other			
	person(s) listed in Part VII, Section A)? If "Yes," complete Schedule L, Part IV	28a		X
b	Have a family member who had a direct or indirect business relationship with the organization?]		
	If "Yes," complete Schedule L, Part IV	28b	_	X
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		_ X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		_ X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	_ 32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity?			
	If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		X
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?			
	If "Yes," complete Schedule R, Part V, line 2	35		X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
			~~~	

Form **990** (2008)

				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 23		•	
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	1b 1			
C	Did the organization comply with backup withholding rules for reportable payments to vendors and i	eportable gaming			
	(gambling) winnings to prize winners?		1c	X	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,	<u>i</u> i	ĺ		
	filed for the calendar year ending with or within the year covered by this return	2a 168			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax retu	rns?	2b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see	instructions)			
За	Did the organization have unrelated business gross income of \$1,000 or more during the year covered	ed by this return?	За		X
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	·	3b		
	At any time during the calendar year, did the organization have an interest in, or a signature or other	authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial	account)?	4a		Х
b	If "Yes," enter the name of the foreign country:				
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign	Bank and	<b>!</b>		
	Financial Accounts				
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5a		Х
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transfer	action?	5b		Х
С	If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity	Regarding Prohibited			
	Tax Shelter Transaction?		5c		l
6a	Did the organization solicit any contributions that were not tax deductible?		6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contribu	tions or gifts			
	were not tax deductible?		6b		
7	Organizations that may receive deductible contributions under section 170(c).				
а	Did the organization provide goods or services in exchange for any quid pro quo contribution of mor	e than \$75?	7a		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it w	as required			1
	to file Form 8282?		7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d			
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a	personal			l
	benefit contract?		7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit cont	ract?	7f		Х
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required	?	7g		Х
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-	C as required?	7h		Х
8	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and sec				l
	supporting organizations. Did the supporting organization, or a fund maintained by a sponsoring or	rganization, have			l
	excess business holdings at any time during the year?		_8_		<u> </u>
9	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.				1
а	Did the organization make any taxable distributions under section 4966?		9a		<u> </u>
b	Did the organization make a distribution to a donor, donor advisor, or related person?		9b		<del>                                     </del>
10	Section 501(c)(7) organizations. Enter N/A	11			ĺ
a	Initiation fees and capital contributions included on Part VIII, line 12	10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b			
11	Section 501(c)(12) organizations. Enter. N/A	144-1			
_	Gross income from members or shareholders	11a			
D	Gross income from other sources (Do not net amounts due or paid to other sources against	445			
40-	amounts due or received from them)	11b	10-		
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form If "Yes," enter the amount of tax-exempt interest received or accrued during the year N/A	1041 ?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year N/A	140	Form	990 (	20087
			1 01111	~~~(	ردوون

Form 990 (2008) GREENHILLS SCHOOL 38-6143974 Part VI Governance, Management, and Disclosure (Sections A, B, and C request information about policies not required by the Internal Revenue Code )

	tion A. Governing Body and Management				
				Yes	No
	For each "Yes" response to lines 2-7b below, and for a "No" response to lines 8 or 9b below, describe the circumstances,				
	processes, or changes in Schedule O. See instructions				
1a	Enter the number of voting members of the governing body	19			
b	Enter the number of voting members that are independent 1b	19			
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		Х
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?	i	3		_X_
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?		4		X
5	Did the organization become aware during the year of a material diversion of the organization's assets?		5		X
6	Does the organization have members or stockholders?		6		X
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the				
	governing body?		7a		_X
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?		7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year				
	by the following.	ŀ			
а	The governing body?	L	8a	X	
b	Each committee with authority to act on behalf of the governing body?		8b	X	
9a	Does the organization have local chapters, branches, or affiliates?	L	9a		Х
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates,	i			
	and branches to ensure their operations are consistent with those of the organization?	Ļ	9b		
10	Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations must	ŀ			
	describe in Schedule O the process, if any, the organization uses to review the Form 990		10		X
11	Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the				
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O		11		<u> </u>
Sec	tion B. Policies				
		r		Yes	No
	Does the organization have a written conflict of interest policy? If "No," go to line 13		12a	Х	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise				
		ı			
	to conflicts?		12b	x	
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe		12b		
	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done		12c	X	
13	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done  Does the organization have a written whistleblower policy?	-	12c 13	X	
13 14	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done  Does the organization have a written whistleblower policy?  Does the organization have a written document retention and destruction policy?	-	12c	X	
13	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done  Does the organization have a written whistleblower policy?  Does the organization have a written document retention and destruction policy?  Did the process for determining compensation of the following persons include a review and approval by independent	-	12c 13	X	
13 14 15	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done  Does the organization have a written whistleblower policy?  Does the organization have a written document retention and destruction policy?  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	- - -	12c 13 14	X X	
13 14 15	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done  Does the organization have a written whistleblower policy?  Does the organization have a written document retention and destruction policy?  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  The organization's CEO, Executive Director, or top management official?	-	12c 13 14	X X X	
13 14 15	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done  Does the organization have a written whistleblower policy?  Does the organization have a written document retention and destruction policy?  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  The organization's CEO, Executive Director, or top management official?  Other officers or key employees of the organization?	-	12c 13 14	X X	
13 14 15 a b	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done  Does the organization have a written whistleblower policy?  Does the organization have a written document retention and destruction policy?  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  The organization's CEO, Executive Director, or top management official?  Other officers or key employees of the organization?  Describe the process in Schedule O (see instructions)	- - - - -	12c 13 14	X X X	
13 14 15 a b	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done  Does the organization have a written whistleblower policy?  Does the organization have a written document retention and destruction policy?  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  The organization's CEO, Executive Director, or top management official?  Other officers or key employees of the organization?  Describe the process in Schedule O (see instructions)  Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a	- - - - -	12c 13 14 15a 15b	X X X	
13 14 15 a h	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done.  Does the organization have a written whistleblower policy?  Does the organization have a written document retention and destruction policy?  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.  The organization's CEO, Executive Director, or top management official?  Other officers or key employees of the organization?  Describe the process in Schedule O (see instructions)  Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	- - - - -	12c 13 14	X X X	x
13 14 15 a h	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done  Does the organization have a written whistleblower policy?  Does the organization have a written document retention and destruction policy?  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  The organization's CEO, Executive Director, or top management official?  Other officers or key employees of the organization?  Describe the process in Schedule O (see instructions)  Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?  If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation	-	12c 13 14 15a 15b	X X X	x
13 14 15 a h	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done  Does the organization have a written whistleblower policy?  Does the organization have a written document retention and destruction policy?  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  The organization's CEO, Executive Director, or top management official?  Other officers or key employees of the organization?  Describe the process in Schedule O (see instructions)  Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?  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	-	12c 13 14 15a 15b	X X X	
13 14 15 a h	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done.  Does the organization have a written whistleblower policy?  Does the organization have a written document retention and destruction policy?  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. The organization's CEO, Executive Director, or top management official?  Other officers or key employees of the organization?  Describe the process in Schedule O (see instructions)  Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?  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?	-	12c 13 14 15a 15b	X X X	x
13 14 15 a h 16a b	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done.  Does the organization have a written whistleblower policy?  Does the organization have a written document retention and destruction policy?  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. The organization's CEO, Executive Director, or top management official?  Other officers or key employees of the organization?  Describe the process in Schedule O (see instructions)  Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?  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?  Ition C. Disclosure		12c 13 14 15a 15b	X X X	x
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# Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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

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

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

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and current key employees. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

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MR. ROBERT TISCH       3.00 X       0. 0. 0.         TRUSTEE       3.00 X       0. 0. 0.         MRS. LYNN WOOTEN       0. 0. 0.       0. 0.         TRUSTEE       3.00 X       0. 0. 0.         MRS. GENIE SHERARD       0. 0. 0.       0. 0.         TRUSTEE PRESIDENT       5.00 X       X       0. 0. 0.         DR. KEVIN TREMPER       0. 0. 0.       0. 0.         TRUSTEE TREASURER       5.00 X       X       0. 0. 0.											
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MRS. LYNN WOOTEN       3.00 X       0. 0. 0.         TRUSTEE       3.00 X       0. 0. 0.         MRS. GENIE SHERARD       0. 0. 0. 0.       0. 0. 0.         TRUSTEE PRESIDENT       5.00 X X       0. 0. 0.         DR. KEVIN TREMPER       0. 0. 0. 0.       0. 0.         TRUSTEE TREASURER       5.00 X X       0. 0. 0.									_	_	
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MRS. GENIE SHERARD       5.00 X X       0. 0. 0.         TRUSTEE PRESIDENT       5.00 X X       0. 0. 0.         DR. KEVIN TREMPER       0. 0. 0.         TRUSTEE TREASURER       5.00 X X       0. 0. 0.		3 00	v						ا م	0	0
TRUSTEE PRESIDENT         5.00 X         X         0.         0.         0.           DR. KEVIN TREMPER         5.00 X         X         0.         0.         0.         0.           TRUSTEE TREASURER         5.00 X         X         0.         0.         0.         0.		3.00	^		-				0.		. 0.
DR. KEVIN TREMPER TRUSTEE TREASURER 5.00 X X 0. 0. 0.		5.00	x		x				l. o.l	0.	0.
	TRUSTEE TREASURER	5.00	X		X				<u> </u>	0.	

832007 12-18-08

Form **990** (2008)

(A)	(B)				C)			(D)	(E)	(F)
Name and title	Average	١.		Pos				Reportable	Reportable	Estimated
	hours per week	individual trustee or director	Institutional trustee		Key emptoyee	Ť	from from rela the organizati		compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
MR. PAUL GARGARO				-	┢	+				
TRUSTEE SECRETARY	5.00	Х		X				0.	0.	0.
DR. DAVID CANTER TRUSTEE VICE PRESIDENT	5.00	x		х				0.	0.	0.
MR. PETER B. FAYROIAN HEAD OF SCHOOL	50.00			x				199,811.	0.	30,395.
MR. JOHN R. NICKEL DIRECTOR OF FINANCE	50.00			X				98,284.	0.	17,351.
MARGARITE FOURCROY DIRECTOR OF DEVELOPMENT	50.00					x		108,171.	0.	28,069.
1b Total	<u> </u>					<u> </u>	<u></u>	406,266.	0.	75,815.
Total number of individuals (including those compensation from the organization	e in 1a) who re	ceiv	ed n	nore	tha	n \$1	00,	000 in reportable	<b>&gt;</b>	2
										Yes No
3 Did the organization list any former officer,			, ke	y em	nplo	yee,	or h	nighest compensated en	nployee on	2 Y

For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual

Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? If "Yes," complete Schedule J for such person

_ 3		x
4	X	
5		х

Section B. Independent Contractors

Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization.

(A) Name and business address	(B) Description of services	(C) Compensation
ANN ARBOR ARCHITECTURAL COLLABORATIVE 210 E. HURON, ANN ARBOR, MI 48104	ARCHITECTURAL	308,638
PHOENIX CONTRACTORS, INC. 2111 GOLFSIDE, YPSILANTI, MI 48197	CONSTRUCTION	219,220

from the organization

Form 990 (2008)

art	VIII		NHILLS SC nue				38-6143	3974 Page
·					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 513, or 514
<u> </u>	1 a	Federated campaigns	1a					
and other similar amounts	b	Membership dues	1b					
티	C	Fundraising events	1c	44,296.				İ
<u> </u>	d	Related organizations	1d					
Ē	е	Government grants (contribut	tions) 1e					
S	f	All other contributions, gifts, gran	nts, and					
בֻּוֹ		similar amounts not included abo	ove <b>1f 1</b>	490722.				
ğ	g	Noncash contributions included in lines	s 1a-1f \$	15,107.				
<u></u>	_ h	Total. Add lines 1a-1f			1,535,018.			
				Business Code				
2	2 a	TUITION		611600	9,175,520.	9,175,520.		
اه	b							
Ì	С							
Kevenue	d						-	
~	е							
	f	All other program service reve	enue					
	g	Total. Add lines 2a-2f		<b>&gt;</b>	9,175,520.			
3	3	Investment income (including	dividends, inter					
		other similar amounts)		•	232,614.			232,614
4	1	Income from investment of ta	x-exempt bond p	oroceeds >	•			
5	5	Royalties		•				
		•	(ı) Real	(II) Personal				
6	3 a	Gross Rents		1	1			
	b	Less: rental expenses			1			ļ
-		Rental income or (loss)		<u></u>	j			
	d	Net rental income or (loss)		<b>•</b>	1			
١,		Gross amount from sales of	(i) Securities	(II) Other		_	-	
'	_	assets other than inventory	2439865.	Liy Gardi				
-	b	Less cost or other basis						
1	_	and sales expenses	2439865.					
1	c	Gain or (loss)	2233000					
		Net gain or (loss)	L	<b>•</b>	1			
ء ا		Gross income from fundraisin	a events (not					
	_	including \$ 44,2		ļ.				
:		contributions reported on line						
		Part IV, line 18		113,519.				
	h	Less direct expenses		52,433.				
1		Net income or (loss) from fund		<b>D</b>	61,086.			61,086
.		Gross income from gaming a			01/0001		<u>_</u>	01,000
`	, .	Part IV, line 19	а	45,550.				
	<b>h</b>	Less direct expenses	b					
		Net income or (loss) from gan	-	<u> </u>	13,984.	13,984.		
10		Gross sales of inventory, less	-		10,004.	10,003.		
"	<i>,</i> a	and allowances		267,169.				
	h	Less: cost of goods sold		188,913.				
		Net income or (loss) from sale		<u>• CIC ( CC</u>	78,256.			78,256
-	C			Business Code		<del></del>		10,236
-	• -	Miscellaneous Revenu		Business Code		252 207		
11		AFTER SCHOOL CA		611710	252,297.	252,297.		+
	b			<del></del>				<del> </del>
	C	***		<u> </u>				<del> </del>
	d	All other revenue		L	252 225			<del> </del>
	е	Total. Add lines 11a-11d		<b>•</b>	252,297.			251
- 1	2	Total Revenue. Add lines 1h, 2g, 3,	4 5 8d 7d 8c 9c 10	Oc and 11e	i II34×775.	9,441,801.	0.	371,956

### Part IX | Statement of Functional Expenses

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

Da	not include amounts renewted on lines 6h	(A)	(B)	(C)	(D).
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	<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	1,157,797.	1,157,797.		
3	Grants and other assistance to governments,	1,131,131	1,131,131.		
Ū	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	355,305.	47,038.	273,744.	34,523
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	5,128,859.	4,030,583.	806,396.	291,880.
8	Pension plan contributions (include section 401(k)				
	and section 403(b) employer contributions)	342,183.	253,614.	70,901.	17,668.
9	Other employee benefits	651,267.	517,571.	88,315.	45,381.
10	Payroll taxes	404,647.	307,552.	73,392.	23,703.
11	Fees for services (non-employees):				
а	Management				
b	Legal	4,185.		4,185.	
С	Accounting	21,000.		21,000.	
d	Lobbying				· <del></del>
е	Professional fundraising services. See Part IV, line 17	<u>78,08</u> 0.			78,080.
f	Investment management fees				
g	Other	101,012.		101,012.	
12	Advertising and promotion				
13	Office expenses	456,027.	315,745.	115,389.	24,893.
14	Information technology				
15	Royalties				
16	Occupancy	191,175.	191,175.		
17	Travel	6,920.		6,920.	
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				_
19	Conferences, conventions, and meetings	52,896.	48,957.	3,939.	
20	Interest	121,690.	120,309.		1,381.
21	Payments to affiliates	F00 640	700 640		
22	Depreciation, depletion, and amortization	700,640.	700,640.		
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	PROVISION FOR BAD DEBTS	27,753.		18,783.	8,970.
b	SENIOR TRIP	104,965.	104,965.		
С	ATHLETICS	101,572.	101,572.		
d	INSURANCE	91,877.		91,877.	
е	ADMISSIONS	81,276.	81,276.		
f	All other expenses	395,398.	118,081.	172,921.	104,396.
25_	Total functional expenses. Add lines 1 through 24f	10,576,524.	8,096,875.	1,848,774.	630,875.
26	Joint Costs. Check here   If following	T			
	SOP 98-2. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation		Ī		

					<del></del>
			(A) Beginning of year		<b>(B)</b> End of year
	1	Cash · non-interest-bearing	63,283.	1	19,601.
		•	1,582,310.	1	2,263,966.
	2	Savings and temporary cash investments	730,670.	2	
	3	Pledges and grants receivable, net		3	618,179.
	4	Accounts receivable, net	40,430.	4	46,195.
	5	Receivables from current and former officers, directors, trustees, key		_	
	_	employees, or other related parties. Complete Part II of Schedule L		5	<del> </del>
	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	
ets	7	Notes and loans receivable, net	20 157	7	01 220
Assets	8	Inventories for sale or use	22,157.	8	21,338.
	9	Prepaid expenses and deferred charges		9	<del></del>
	l	Land, buildings, and equipment cost basis 10a 20,322,525.		İ	
	Ь	Less: accumulated depreciation Complete	11 005 606		11 112 850
		Part VI of Schedule D 10b 8,908,773.	11,275,676.		11,413,752.
	11	Investments - publicly traded securities	8,871,017.	11	7,627,626.
	12	Investments · other securities. See Part IV, line 11		12	
	13	Investments - program-related. See Part IV, line 11	· · · · · · · · · · · · · · · · · · ·	13	
	14	Intangible assets		14	<del>.</del>
	15	Other assets See Part IV, line 11	00 505 540	15	00 010 655
	16	Total assets. Add lines 1 through 15 (must equal line 34)	22,585,543.	16	22,010,657.
	17	Accounts payable and accrued expenses	104,267.	17	327,243.
	18	Grants payable	1 075 504	18	1 407 400
	19	Deferred revenue	1,275,594.	19	1,407,409.
Liabilities	20	Tax-exempt bond liabilities	7	20	
	21	Escrow account liability. Complete Part IV of Schedule D		21	
	22	Payables to current and former officers, directors, trustees, key employees,			
Liat		highest compensated employees, and disqualified persons Complete Part II			
_		of Schedule L	0.000.000	22	0.664.000
	23	Secured mortgages and notes payable to unrelated third parties	2,802,000.	23	2,664,000.
	24	Unsecured notes and loans payable	110 541	24	124 200
	25	Other liabilities Complete Part X of Schedule D	118,741.	25	134,390.
	26	Total liabilities. Add lines 17 through 25	4,300,602.	26	4,533,042.
		Organizations that follow SFAS 117, check here			
ces		lines 27 through 29, and lines 33 and 34.	10 500 400		0 060 040
lan	27	Unrestricted net assets	10,588,428.	27	9,868,242.
Ва	28	Temporarily restricted net assets	2,468,568.	28	2,347,782.
ınd	29	Permanently restricted net assets	5,227,945.	29	5,261,591.
FF		Organizations that do not follow SFAS 117, check here			
Net Assets or Fund Balances		complete lines 30 through 34.			
set	30	Capital stock or trust principal, or current funds		30	
As	31	Paid in or capital surplus, or land, building, or equipment fund		31	
Vet	32	Retained earnings, endowment, accumulated income, or other funds	10 204 041	32	10 400 615
_	33	Total net assets or fund balances	18,284,941.	33	17,477,615.
Date	34 + VI	Total liabilities and net assets/fund balances	22,585,543.	34	22,010,657.
Pai	LAI	Financial Statements and Reporting			Yes No
_	A = = =	unting method used to prepare the Form 990:  Cash X Accrual	Other		163 140
1			Other		
2a		the organization's financial statements compiled or reviewed by an independent a	accountant?		2a X
b		the organization's financial statements audited by an independent accountant?	antalian dan an		2b X
С		es" to lines 2a or 2b, does the organization have a committee that assumes respon		audit,	
٥.		w, or compilation of its financial statements and selection of an independent accordance to the compilation of a foderal event was the organization required to underesting a cultivariation of a foderal event.		I_ A	2c X
зa		result of a federal award, was the organization required to undergo an audit or aud and OMB Circular A-133?	ins as set forth in the Sing	IE AUG	
L					3a X
		es," did the organization undergo the required audit or audits?	<del> </del>		3b     Form <b>990</b> (2008)
03201	1 12-18	<del>-</del> 00			romi <b>330</b> (2000)

#### SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

**Public Charity Status and Public Support** 

To be completed by all section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts.

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

OMB No 1545-0047

2008 Open to Public Inspection

Name of the organization

Employer identification number

	<del>,</del>		LLS SCHOOL						38	<u>8-6143</u>	<u> 1974</u>	
Part I	Reason	for Public Char	rity Status (All organiz	zations mu	st comple	te this par	t ) (see ins	tructions)				
he orgar	nization is not a	a private foundation	because it is: (Please ch	neck only <b>c</b>	ne organi	zation)						
1 🔲	A church, co	nvention of churche	s, or association of chur	ches desc	nbed in se	ection 170	(b)(1)(A)(i)	).				
2 X	A school des	cribed in section 17	70(b)(1)(A)(ii). (Attach Sc	hedule E)								
з 🗔	A hospital or	a cooperative hosp	ital service organization	described	n section	170(b)(1)	<b>(A)</b> (iii). (At	tach Sche	dule H.)			
4 🗔	A medical res	search organization	operated in conjunction	with a hos	pital desc	rıbed ın se	ction 170	(b)(1)(A)(ii	ii). Enter th	ne hospita	l's nam	ie,
	city, and stat	te										
5 🔲	An organizat	on operated for the	benefit of a college or u	niversity o	wned or o	perated by	a govern	mental uni	t describe	ed in		
	section 170	(b)(1)(A)(iv). (Compl	ete Part II )									
6	A federal, sta	ate, or local governm	ent or governmental uni	t describe	d in sectio	n 170(b)(	1)(A)(v).					
7 🔲	An organizati	on that normally red	eives a substantial part	of its supp	ort from a	governme	ental unit o	or from the	general p	ublic desc	ribed ii	n
	section 170(	(b)(1)(A)(vi). (Comple	ete Part II)									
8 🔲	A community	trust described in s	section 170(b)(1)(A)(vi).	(Complete	Part II)							
9 🗔	An organizati	on that normally red	eives (1) more than 33	1/3% of its	support f	rom contr	butions, n	nembershi	p fees, an	d gross re	ceipts f	from
	activities rela	ited to its exempt fu	nctions - subject to certa	aın excepti	ons, and (	2) no more	than 33 1	1/3% of its	support 1	from gross	investi	ment
	income and i	unrelated business t	axable income (less sec	tion 511 ta	x) from bu	sinesses a	acquired b	y the orga	ınızatıon a	fter June 3	30, 197	5
	See section	509(a)(2). (Complete	e the Part III )									
10 🖳	An organizat	ion organized and o	perated exclusively to te	st for publ	c safety	See <b>sect</b> io	n 509(a)(4	<b>1).</b> (see ins	tructions)			
11 🔲	An organizati	ion organized and o	perated exclusively for th	ne benefit i	of, to perfe	orm the fu	nctions of,	or to carr	y out the p	ourposes o	of one o	or
	more publicly	y supported organiza	ations described in secti	on 509(a)(1	1) or section	on 509(a)(2	2) See sec	ction 509(	<b>a)(3).</b> Che	ck the box	that	
		<u>~</u> _	organization and compl	ete lines 1	1e through	11h.						
	a L Type			• •		tionally in	•		d 📖	Type III - 0		
e 📖	By checking	this box, I certify that	at the organization is not	controlled	I directly o	r indirectly	by one o	r more disi	ប់កេនាច្រុមក្	ersons oth	her that	n
	foundation m	nanagers and other t	han one or more publicl	y supporte	d organiza	ations des	cribed in s	ection 509	9(a)(1) or s	ection 509	}(a)(2)	
f	If the organiz	ation received a write	tten determination from	the IRS tha	at it is a Ty	pe I, Type	II, or Type	e III				
	supporting o	rganization, check tl	nis box									
g	-		organization accepted ar			•						
		· ·	irectly controls, either al	lone or tog	ether with	persons o	described	ın (ıı) and (	III) below,		Yes	<u>No</u>
	•	- •	upported organization?							11g(i)	$\vdash$	
		-	n described in (i) above?							11g(ii)	<b></b>	
			person described in (i)							11g(iii)		
h	Provide the f	ollowing information	about the organizations	the organ	ization su	oports.						
		<u> </u>	(III) Type of	T		I <u>.</u> .			. 1			
(i) Name	of supported	(ii) EIN	(iii) Type of organization	p ,	organization sted in your	(v) Did you	u notify the ion in col.	(vi) ls organization	the	(vii) An	nount of	f
org	anization		(described on lines 1-9		document?		support?	(i) organiz U.S	ed in the	sup	port	
			above or IRC section	Yes	No	Yes	No	Yes	No			
			(see instructions))	163	140	163	140	163	140			
<del></del>									-			
	<del>-</del>								<del> </del>	-		
					<del> </del>	<u> </u>						
								1				
				1				<del>                                     </del>			-	
otal					<u> </u>	L						

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

Schedule A (Form 990 or 990-EZ) 2008

Pa	Support Schedule for				(b)(1)(A)(iv) an	d 170(b)(1)(A)(	vi)
80	(Complete only if you checke	the box on line	5, 7, or 8 of Part I)	) 	<del></del>	· ·	
	<del></del>		7	1	1	T	<del></del>
	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 organ-		<del> </del>	<del>                                     </del>	<del> </del>	<del>                                     </del>	
~	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities	· · · · · · · ·					
Ů	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 - 3	-					
5	The portion of total contributions						<del></del>
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						
	Public Support. Subtract line 5 from line 4			<u> </u>			
Sec	ction B. Total Support						
Cald	endar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
7	Amounts from line 4			<u> </u>	-	<del></del>	<del></del>
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
_	and income from similar sources		<u>                                     </u>		<u> </u>	1	
9	Net income from unrelated business						
	activities, whether or not the	•					
40	business is regularly carried on		<del> </del>				
10	Other income. Do not include gain or loss from the sale of capital						
	assets (Explain in Part IV.)						
11							
	Gross receipts from related activities,	etc. (see instruct	ions)	1		12	
	First five years. If the Form 990 is for	•	,	rd fourth or fifth ta	ax vear as a sectio		
	organization, check this box and stop		J	, ,	, ou. 45 4 505	00 . (0)(0)	ightharpoonup
Sec	ction C. Computation of Publ		rcentage	_		-	
14	Public support percentage for 2008 (	line 6, column (f) d	livided by line 11,	column (f))		14	%
15	Public support percentage from 2007	' Schedule Λ, Part	: IV-A, line 26f			15	%
16a	33 1/3% support test - 2008. If the	organization did no	ot check the box o	n line 13, and line	14 is 33 1/3% or r	nore, check this bo	x and
	stop here. The organization qualifies	as a publicly supp	oorted organizatioi	n			ightharpoons
b	33 1/3% support test - 2007. If the o	organization did no	ot check a box on	line 13 or 16a, and	line 15 is 33 1/3%	or more, check th	nis box
	and stop here. The organization qual	ifies as a publicly	supported organiz	zation			
17a	10% -facts-and-circumstances tes	<b>t - 2008.</b> If the org	janization did not e	check a box on line	e 13, 16a, or 16b,	and line 14 is 10%	or more,
	and if the organization meets the "fac	ts-and-circumstar	nces" test, check t	his box and <b>stop</b> h	i <b>ere.</b> Explain in Pa	rt IV how the organ	nization
	meets the "facts-and-circumstances"	test. The organiza	ation qualifies as a	publicly supported	d organization		
b	10% -facts-and-circumstances tes	-	•			*	
	more, and if the organization meets the				•		•
	organization meets the "facts-and-cire		<del>-</del>	•			▶Щ
18	Private foundation. If the organization	n did not check a	box on line 13, 16	<u>6a, 16b, 17a, or 17t</u>			
					Scho	edule A (Form 990	or 990-EZ) 2008

•						
Schedule A (Form 990 or 990-EZ) 2008						Page 3
Part III   Support Schedule for O	rganizations	Described in	Section 509(a	)(2) (Complete only	y if you checked the bi	ox on line 9 of Part I.)
Section A. Public Support			·			
Calendar year (or fiscal year beginning in)	(a) 2004	<b>(b)</b> 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
Gifts, grants, contributions, and	ļ					
membership fees received (Do not						
ınclude any "unusual grants ")						
2 Gross receipts from admissions, 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 bus-						
iness under section 513						
4 Tax revenues levied for the organ-						
ization's benefit and either paid to						
or expended on its behalf						
·					<del> </del>	
5 The value of services or facilities						
furnished by a governmental unit to						
the organization without charge					-	
6 Total. Add lines 1 - 5						
7a Amounts included on lines 1, 2, and						
3 received from disqualified persons  b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the total of lines 9, 10c, 11, and 12 for the year or \$5,000						
c Add lines 7a and 7b						-
8 Public support (Subtract line 7c from line 6)					-	
Section B. Total Support			-	•		
Calendar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
9 Amounts from line 6		-				
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
<b>b</b> Unrelated business taxable income						
(less section 511 taxes) from businesses						
acquired after June 30, 1975						
c Add lines 10a and 10b  11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income Do not include gain or loss from the sale of capital						
assets (Explain in Part IV)  13 Total support (Add lines 9, 10c, 11, and 12)						<del></del>
14 First five years. If the Form 990 is for	the organization's	s first second thu	d fourth or fifth ta	ax vear as a section	on 501(c)(3) organiz	ation
check this box and stop here	o.ga.nzanom		_, /ou/an, or mark	, our us a soon	on so honor organiz	<b></b>
Section C. Computation of Public	Support Pe	rcentage				
15 Public support percentage for 2008 (lin			column (fl)		15	%
16 Public support percentage from 2007		•			16	<u>%</u>
Section D. Computation of Inves				-		
17 Investment income percentage for 200			ne 13. column (f)\		17	%
18 Investment income percentage from 2	•	•	.5 .5, 55.6 (1))		18	<u>%</u>
19a 33 1/3% support tests - 2008 If the c		•	on line 14, and line	15 is more than		

Schedule A (Form 990 or 990-EZ) 2008

more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

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

**b 33 1/3**% support 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

#### Schedule D

(Form 990)

Department of the Treasury Internal Revenue Service

## **Supplemental Financial Statements**

▶ Attach to Form 990. To be completed by organizations that answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12. OMB No 1545-0047 Open to Public

Inspection

Name of the organization **Employer identification number** GREENHILLS SCHOOL 38-6143974 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the Part I 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 1 Aggregate contributions to (during year) 2 Aggregate grants from (during year) 3 4 Aggregate value at end of year 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised 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? 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 important land area Protection of natural habitat Preservation of certified historic structure 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 Total number of conservation easements 2a Total acreage restricted by conservation easements 2b Number of conservation easements on a certified historic structure included in (a) 2c 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 the taxable 3 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 Amount 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)(i) and section 170(h)(4)(B)(ii)? 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 Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 9 1a 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 b 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 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items: a Revenues included in Form 990, Part VIII, line 1 Assets included in Form 990, Part X LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule D (Form 990) 2008

832051 12-23-08

		LLS SCHOOL	I				3	8-61	4397	<b>4</b> P	age 2
Pai	t III   Organizations Maintaining C	collections of A	rt, His	torical Tr	easures,	or Othe					
3	Using the organization's accession and othe	r records, check any	of the	following tha	it are a signif	icant use	of its collec	ction ite	ms (chec	k all	
	that apply).										
а	Public exhibition	d	ı 🛄	Loan or exc	hange progr	ams					
b	Scholarly research	е	$\Box$	Other					_		
C	Preservation for future generations										
4	Provide a description of the organization's co	ollections and explai	n how t	hey further tl	he organizat	on's exen	npt purpos	e in Parl	t XIV		
5	During the year, did the organization solicit of	ir receive donations	of art, n	istorical trea	sures, or oth	er sımılar	assets				
	to be sold to raise funds rather than to be ma								Yes		No
Pai	t IV Trust, Escrow and Custodial		- Comp	lete if organi	zation answ	ered "Yes	" to Form 9	90, Par	t IV, line	9, or	
	reported an amount on Form 990, Pa	rt X, line 21.									
1a	Is the organization an agent, trustee, custod	an or other intermed	diary for	contribution	is or other as	sets not i	ncluded		_		_
	on Form 990, Part X?								Yes		No
b	If "Yes," explain the arrangement in Part XIV	and complete the fo	llowing	table.							
									Amount	<u>.</u>	
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 Fe	orm 990, Part X, line	21?						Yes		No
	If "Yes," explain the arrangement in Part XIV										
Pai	t V Endowment Funds. Complete	f organization answe								_	
		(a) Current year	(b) F	Prior year	(c) Two yea	rs back (	d) Three yea	irs back	(e) Four	years	back
1a	Beginning of year balance	7,173,051.									
b	Contributions	33,646.									
С	Investment earnings or losses	-1156498.						•			
d	Grants or scholarships	45,722.				-  -	<del></del>				
е	Other expenditures for facilities	245 504									
	and programs	315,584.			-	ļ					
f	Administrative expenses	5 600 000					•				
g	•	5,688,893.		,							
2	Provide the estimated percentage of the year										
a	Board designated or quasi-endowment	7.88	_%								
b	Permanent endowment ▶ 92.12	%									
C	· · · · · · · · · · · · · · · · · · ·	%									
Зa	Are there endowment funds not in the posse	ssion of the organiz	ation th	at are neid a	na aaministe	rea for th	e organizat	lion	Г	1	
	by.									Yes X	No
	(ii) unrelated organizations (ii) related organizations								3a(i)	-^-	X
_	If "Yes" to 3a(ii), are the related organizations	historiae regulired a	n Caba	dula D2					3a(ii)	-	
b	Describe in Part XIV the intended uses of the	•							_3b		
Par	t VI Investments - Land, Building				Part V John	10					—
	Description of investment	(a) Cost or o		(b) Cost			progration	$\overline{}$	(d) Book	, value	
	Description of investment	basis (investr		basis (	1	(c) De	preciation		(a) Boor	value	<b>;</b>
1a	Land	,	•		3,981.				17	3.9	81.
	Buildings				5,560.	6.5	64,88	1.	8,170		
c	Leasehold improvements				3,817.		28,32			5,4	
d	Equipment				5,260.		65,660				94.
_	Other				3,907.		49,900				07.
Total	. Add lines 1a-1e (Column (d) should equal Fo	orm 990, Part X, colu	ımn (B),	line 10(c) )				<b>1</b>			52.

Schedule D (Form 990) 2008

Schedule D (Form 990) 2008

under FIN 48 832053 12-23-08

Schedule D (Form 990) 2008

	t XI Reconciliation of Change in Net Assets from Form 990 to	Einar	oial Statemer	nto	36-	01439/4	Page 4
	<del></del>	riiiai				11 240	775
1	Total revenue (Form 990, Part VIII, column (A), line 12)		1			11,348	
2	Total expenses (Form 990, Part IX, column (A), line 25)		2			10,576	
3	Excess or (deficit) for the year Subtract line 2 from line 1  Net unrealized gains (losses) on investments		3			-1,579	<u>,251.</u>
4	• ,		4			-1,5/5	,3//.
5	Donated services and use of facilities		_ 5				_
6	Investment expenses		6			-	
7	Prior period adjustments		7	_			-
8	Other (Describe in Part XIV)		8	<u> </u>		1 570	
9	Total adjustments (net) Add lines 4-8		9			<u>-1,579</u>	
10 Dar	Excess or (deficit) for the year per financial statements. Combine lines 3 and 9  t XII Reconciliation of Revenue per Audited Financial Stateme	nto M	ith Povenue r	L P	Otur		<u>,326.</u>
		1113 11	itti Nevenue p	Jei I	1 1	8,899	007
1	Total revenue, gains, and other support per audited financial statements  Amounts included on line 1 but not on Form 990, Part VIII, line 12				1	0,033	,30/.
2	Net unrealized gains on investments	1 0-1	-1,579,5	77			
a b	Donated services and use of facilities	2a 2b	-1,319,3	//.			
_					1		
C	Recoveries of prior year grants  Other (Decembers Boot XIV)	2c	83,9	9.0			
d	Other (Describe in Part XIV)	2d	03,3	<i></i>		1 405	E70
	Add lines 2a through 2d				2e	-1,495 $10,395$	
3	Subtract line 2e from line 1				3_	10,393	,303.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1	ا ـ ا					
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a 4b	953,2	1 /	ł		
b	Other (Describe in Part XIV) Add lines 4a and 4b	40	333,4	10.	.	0.5.3	210
	Total revenue. Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)				4c 5	11,348	<u>,210.</u>
5 Pai	t XIII Reconciliation of Expenses per Audited Financial Stateme	ents V	Vith Expenses	ner			, //5.
1	Total expenses and losses per audited financial statements		THE EXPONE	. ро.	1	9,707	313
2	Amounts included on line 1 but not on Form 990, Part IX, line 25.					3,707	, , , , , ,
a	Donated services and use of facilities	_{2a}					
_	Prior year adjustments	2b			i i		
Ь	Losses reported on Form 990, Part IX, line 25	2c					
d	Other (Describe in Part XIV)	2d	83,9	<u>a a</u>			
_	Add lines 2a through 2d		65,5	99.	20	ρa	,999.
е 3	Subtract line 2e from line 1				2e 3	9,623	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1.				-3-	2,023	, JI=•
•	Investment expenses not included on Form 990, Part VIII, line 7b	امدا					
a b	Other (Describe in Part XIV)	4a 4b	953,2	1.0			
-	Add lines 4a and 4b	40	755,2	10.	4.	053	,210.
	Total expenses. Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)				4c	10,576	524
	t XIV Supplemental Information				<u> </u>	10,370	, , , , , , ,
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III	l lines 1	la and 4 Part IV I	ines 1	h and t	2h Part V line	4 Part
	rt XI. line 8. Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b	,	a and if all right		. a		.,
	RT V, LINE 4: TO PROVIDE FUNDS FOR FINANCIA	AL A	ID. UPKEE	PΟ	F T	HE	
ATI	HLETIC FIELDS, UPKEEP OF THE THEATRE, FACUI	YTL	GROWTH AN	D L	EAR	NING,	
INS	STRUCTIONAL ENHANCEMENT PROGRAMS FOR ARTS A	AND	SCIENCE,	SEN	IOR	AWARDS	
ANI	FACULTY RETIREMENT AND COMPENSATION.		<del></del>				
PAF	RT XII, LINE 2D - OTHER ADJUSTMENTS:						
					_		
SPE	ECIAL EVENTS DIRECT EXPENSE: 83999.						<del></del>

12-23-08

Schedule D (Form 990) 2008 GREENHILLS SCHOOL	38-6143974 Page 5
Part XIV Supplemental Information (continued)	
PART XII, LINE 4B - OTHER ADJUSTMENTS:	
FINANCIAL AID: 953210.	
111111011111 11111 1 3 3 3 2 1 0 ·	
PART XIII, LINE 2D - OTHER ADJUSTMENTS:	<del></del>
SPECIAL EVENTS DIRECT EXPENSE: 83999.	
DIECIAL EVENIO DIRECT ENTENDE. 03777.	
PART XIII, LINE 4B - OTHER ADJUSTMENTS:	
FINANCIAL AID: 953210.	
TIMMCIAL AID. 955210.	
<del></del>	
<del></del>	
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	-
	- · · · · · · · · · · · · · · · · · · ·
	<u> </u>
	<del>.</del>
	<del></del>
<del></del>	<del> </del>

#### **SCHEDULE E**

(Form 990 or 990-EZ)

Name of the organization

Schools

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

Inspection

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

▶ Attach to Form 990 or Form 990-EZ. **Employer identification number** 

GREENHILLS SCHOOL 38-6143974 YES NO 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? X Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, X catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships? 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 X 3 THE POLICY IS COMMUNICATED ON OUR WEBSITE, PRINTED ON INFORMATIONAL BROCHURES, APPLICATION MATERIALS, ADVERTISING, AND OTHER DIRECT MARKETING ITEMS. Does the organization maintain the following? X a Records indicating the racial composition of the student body, faculty, and administrative staff? 4a X b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis? 4b c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships? X 4c d Copies of all material used by the organization or on its behalf to solicit contributions? X 4d If you answered "No" to any of the above, please explain (If you need more space, attach a separate statement) Does the organization discriminate by race in any way with respect to a Students' rights or privileges? b Admissions policies? Х 5b X c Employment of faculty or administrative staff? <u>5c</u> X d Scholarships or other financial assistance? 5d Х Educational policies? Use of facilities? 5f Х X g Athletic programs? 5g X h Other extracurricular activities? 5h If you answered "Yes" to any of the above, please explain (If you need more space, attach a separate statement) 6a Does the organization receive any financial aid or assistance from a governmental agency? X 6a b Has the organization's right to such aid ever been revoked or suspended? 6b If you answered "Yes" to either line 6a or line 6b, please explain using an attached statement 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

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

Schedule E (Form 990 or 990-EZ) 2008

#### **SCHEDULE G** (Form 990 or 990-EZ)

# **Supplemental Information Regarding Fundraising or Gaming Activities**

▶ Attach to Form 990 or Form 990-EZ. Must be completed by organizations that answer "Yes" to Form 990,

OMB No 1545-0047

nternal Revenue Service	i 17, 18, or 19, and by organizations tha	it enter m	ore tha	ın \$15,000 on Form 99	O-EZ, line 6a.	Inspection
Name of the organization					1 ' '	identification number
	IILLS SCHOOL				38-61	43974
	es. Complete if the organization ans			<del></del>		
1 Indicate whether the organization a X Mail solicitations		_			•	
a X Mail solicitations b X Email solicitations			_	overnment grants nment grants		
c X Phone solicitations	g X Spec		-	-		
d X In-person solicitations	g (A) Spec	iai iuliule	alonig	events		
2 a Did the organization have a writte	n or oral agreement with any individu	ual (includ	dina o	fficers, directors, tru	stees or	
	, Part VII) or entity in connection with		_			res No
<b>b</b> If "Yes," list the ten highest paid i	ndividuals or entities (fundraisers) pu	irsuant to	agre	ements under which		
compensated at least \$5,000 by	the organization. Form 990-EZ filers a	are not re	quire	d to complete this ta	ble	
		/iii\	D.d		(v) Amount par	d
(i) Name of individual or entity (fundraiser)	(ii) Activity	(iii) fundr have c	aiser	(iv) Gross receipts	to (or retained b	y) (vi) Amount paid to (or retained by)
or entity (idilaraiser)		or con	trol of	from activity	fundraiser listed in col. (i)	organization
HAMMOND & ASSOCIATES	· 1	Yes	No			
LLC	CONSULTANT		X	0.		<u>78,080.</u>
					<del></del>	
	ļ					
					ı	
	<del></del>					
					·	
<u> </u>		>				78,080.
3 List all states in which the organiza	ation is registered or licensed to solic	it funds o	or has	been notified it is ex	empt from regist	ration or licensing.
<u> </u>						
		_			<del></del>	
		-				
· · · · · · · · · · · · · · · · · · ·	<del></del>				<del>_</del>	
					<u> </u>	
	-			<del></del>		

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

Schedule G (Form 990 or 990-EZ) 2008

Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 on Form 990-EZ, line 6a. List events with gross receipts greater than \$5,000. (a) Event #1 (b) Event #2 (c) Other Events (d) Total Events ANNUAL ANNUAL GOLF NONE (Add col (a) through AUCTION OUTING col (c)) (total number) (event type) (event type) 152,255 5,560 157,815. Gross receipts 4,990 39,306 44,296. 2 Less Charitable contributions 112,949 570 Gross revenue (line 1 minus line 2) 113,519. Cash prizes Non-cash prizes Direct Expenses Rent/facility costs 51,471 962 Other direct expenses 52,433. 52,433.) 8 Direct expense summary Add lines 4 through 7 in column (d) 61,086. Net income summary Combine lines 3 and 8 in column (d) Gaming. Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a. (b) Pull tabs/Instant (d) Total gaming (Add (c) Other gaming Revenue (a) Bingo bingo/progressive bingo col (a) through col (c)) 45,550 Gross revenue 45,550. 6,000 2 Cash prizes 6,000. **Direct Expenses** 20,000 20,000. Non-cash prizes Rent/facility costs 5,566 5,566. Other direct expenses X Yes 90.00 % % Yes % Yes Volunteer labor Direct expense summary Add lines 2 through 5 in column (d) 31,566) 13,984. Net gaming income summary. Combine lines 1 and 7 in column (d) Yes No Enter the state(s) in which the organization operates gaming activities. MI a is the organization licensed to operate gaming activities in each of these states? X 9a b If "No," Explain: Х 10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? 10a b If "Yes," Explain. Х Does the organization operate gaming activities with nonmembers? 11 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer chantable gaming?

Schedule G (Form 990 or 990-EZ) 2008

Sch	edule G (Form 990 or 990-EZ) 2008 GREENHILLS SCHOOL 38 - 6	<u> 14397</u>	4 P	age 3
			Yes	No
13	Indicate the percentage of gaming activity operated in		i	
а	The organization's facility 13a 95.00	%		
b	An outside facility 5.00	%		
14	Provide the name and address of the person who prepares the organization's gaming/special events books and records			
	Name ▶ GAIL FOSS	_		
		ĺ		
	Address ► 850 GREENHILLS DRIVE - ANN ARBOR, MI 48105	_		
		ĺ	l	
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?	15a		X
b	If "Yes," enter the amount of gaming revenue received by the organization > \$ and the amount			
	of gaming revenue retained by the third party > \$			
C	If "Yes," enter name and address:			
	Name	_		
	Address	_		
		ŀ		
16	Gaming manager information:			
	Name N CATL FORG			
	Name ► GAIL FOSS	-		
	Gaming manager compensation ▶ \$36,880.			
	Gaining manager compensation			
	Description of services provided ► RECORD KEEPING, DEPOSITS	į		
		-		
		-		
		-		
	Director/officer			
17	Mandatory distributions			
	Is the organization required under state law to make charitable distributions from the gaming proceeds to			
	retain the state gaming license?	17a		X
b	Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the			<del></del> -
	organization's own exempt activities during the tax year > \$			

SCHEDULE								OMB No 1545-0047
(Form 990)			Governn	Grants and Other Assistance to Organizations, Governments, and In Jividuals in the U.S.	e to Organizations luals in the U.S.	v ⁶		5008
Department of the Treasury Internal Revenue Service		М Сомрі	► Complete if the organization	n answered "Yes," on F ► Attach to Form 990.	," on Form 990, P. m 990.	ganization answered "Yes," on Form 990, Part IV, lines 21 or 22.  P Attach to Form 990.		Open to Public ' Inspection
Name of the organization	on GREENHILLS	SCHOOL					ш	Employer identification number 38-6143974
Part I General In	General Information on Grants and Assistance	d Assistance						
1 Does the organiza	Does the organization maintain records to substantiate the amount of the grants or assistance, and the selection	substantiate the	amount of the grants	or assistance the	grantees' eligibilit	y for the grants or assi	stance, and the selection	uc
criteria used to a	criteria used to award the grants or assistance?	ınce?						. X Yes
2 Describe in Part I	Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States	edures for monit	oring the use of grant	funds in the United	d States			
Part II Grants and	Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any	overnments and	Organizations in the	United States. C	omplete if the orga	anization answered "Y	es" on Form 990, Part I	V, line 21, for any
recipient th	recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Part IV and Schedule I-1 (Form 990) if additional space is needed	,000 Check this	box if no one recipien	t received more th	ian \$5,000 Use Pa	art IV and Schedule I-1	(Form 990) if additional	Space is needed
1 (a) Name and ad or gov	1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
2 Enter total numbe	Enter total number of section 501(c)(3) and government organizations	l government orç	janizations					•
3 Enter total numbe	Enter total number of other organizations							<b>A</b>
LHA For Privacy Act	For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.	ion Act Notice,	see the Instructions f	for Form 990.				Schedule I (Form 990) 2008

Schedule I (Form 990) 2008

Page 2

38-6143974

(Form 990) 2008 GREENHILLS SCHOOL 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. Part III

(a) Type of grant of assistance	(b) Number of recipients	(c) Amount of cash grant	(a) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
NEED BASED FINANCIAL AID	5.5	0	953,210		REDUCTION IN GROSS TUITION DUE
TUITION REMISSION PROGRAM FOR FACULTY MEMBERS	17	0	204,587,	PMV	REDUCTION IN GROSS TUITION DUE
Part IV   Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information	le the information	required in Part I, I	ine 2, and any other	additional information	
SCHEDULE I, PART I, LINE 2: NEED BASED	- 1	ANCIAL AID	FINANCIAL AID IS AWARDED TO	D TO	
QUALIFIED FAMILIES AS A REDUCTION IN THEIR GROSS TUITION AMOUNT. NO CASH	IN THEIR	GROSS TUI	TION AMOUN	T. NO CASH	
AWARD IS ACTUALLY DISTRIBUTED. IF 1	THEY DO 1	DO NOT ACCEFT THE	THE AWARD	AWARD AND ENROLL	
THEIR CHILD, THE FINANCIAL AID AWARD IS DISTRIBUTED TO SOMEONE ELSE	RD IS DIS	STRIBUTEL	TO SOMEONE	ELSE.	

Schedule I (Form 990) 2008

#### SCHEDULE J (Form 990)

Department of the Treasury

# **Compensation Information**

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.

OMB No 1545-0047

2008

Open to Public Inspection

Internal Revenue Service

Name of the organization

Part I Questions Regarding Compensation

GREENHILLS SCHOOL Employer identification number 38-6143974

				i
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990,		Yes	No
	Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel  Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments  Health or social club dues or initiation fees			
	M Discretionary spending account Personal services (e.g., maid, chauffeur, chef)			
b	If line 1a is checked, did the organization follow a written policy regarding payment or reimbursement or provision			
	of all of the expenses described above? If "No," complete Part III to explain	1b	X	
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors,			
	trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	2	x	
3	Indicate which, if any, of the following the organization uses to establish the compensation of the organization's			
•	CEO/Executive Director Check all that apply			
	X Compensation committee X Written employment contract			
	Independent compensation consultant  X Compensation survey or study			
	X Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a.			
	Receive a severance payment or change of control payment?	4.		X
	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4â		X
	Participate in, or receive payment from, an equity-based compensation arrangement?	4b		X
C		4c		Λ_
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III			
	Only 501(c)(3) and 501(c)(4) organizations must complete lines 5-8.			
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the revenues of			
а	The organization?	5a		X
b	Any related organization?	5b		X
	If "Yes," to line 5a or 5b, describe in Part III.			
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the net earnings of			
ą	The organization?	6a		X
	Any related organization?	6b		X
-	If "Yes" to line 6a or 6b, describe in Part III			
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments			
•	not described in lines 5 and 6? If "Yes," describe in Part III	7		х
A	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			
	initial contract exception described in Regs. section 53 4958-4(a)(3)? If "Yes," describe in Part III			Х
	initial contract exception described in negs. Section 33 43304(a)(3)? IT 185, Describe in Part III	8		

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

Schedule J (Form 990) 2008

GREENHILLS SCHOOL

Schedule J (Form 990) 2008 GI

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

		(B) Breakdown of	(B) Breakdown of W-2 and/or 1099-MISC compensation	SC compensation	9	(Q)	(E)	9
					Deferred	Nontaxable	Total of columns	Compensation
(A) Name		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other compensation	compensation	benefits	(D)·(l)(B)	reported in prior Form 990 or Form 990-EZ
	€	199,811.	0	0	14.630.	15.765.	230.206.	0
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MR. FEIER D. FRIRUIAN	3		0	•	•	0	0	)
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Schedule J (Form 990) 2008

#### **SCHEDULE 0**

(Form 990)

Department of the Treasury Internal Revenue Service

# **Supplemental Information to Form 990**

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

2008
Open to Public Inspection

Name of the organization

Employer identification number 38-6143974

GREENHILLS SCHOOL	38-6143974
FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MIS	SION:
ENROLLING GRADES 6-12.	
FORM 990, PART VI, SECTION A, LINE 10: THE FINANCE COMMIT	TEE REVIEWS A
COPY OF THE FORM 990 BEFORE FILING. THE FINANCE COMMITTEE	HAS BEEN GIVEN
THE AUTHORITY BY THE ENTIRE BOARD OF TRUSTEES TO ACT ON I	TS BEHALF RELATING
TO FINANCIAL MATTERS.	
FORM 990, PART VI, SECTION B, LINE 12C: CONFLICT OF INTER	EST STATEMENTS
ARE RENEWED AND UPDATED EVERY YEAR AT THE BEGINNING OF TH	E FISCAL YEAR
FORM 990; PART VI, SECTION B, LINE 15: COMPENSATION FOR T	HE HEAD OF SCHOOL
IS DETERMINED BY THE EXECUTIVE COMMITTEE OF THE BOARD OF	TRUSTEES. A
PERFORMANCE REVIEW IS CONDUCTED BY ALL TRUSTEES AND COMPA	RATIVE
COMPENSATION DATA IS ANALYZED. ALL OTHER SALARIES ARE DET	ERMINED BY THE
HEAD OF SCHOOL WITHIN A BUDGET REVIEWED AND APPROVED BY T	HE FINANCE
COMMITTEE.	
FORM 990, PART VI, SECTION C, LINE 19: UPON REQUEST, THIS	INFORMATION WILL
BE PROVIDED TO THE PUBLIC	
PART XI, LINE 2C	
THIS PROCESS HAS NOT CHANGED FROM THE PREVIOUS YEAR.	
	<del></del>