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DLN: 93493124011841

Form **990**

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

OMB No 1545-0047

Open to Public Inspection

B Che	eck if an		C Name of organization		710	D Employer ic	lentification number	
	ress ch	ricase	The Trustees of Fryeburg Academy		01-0211505			
┌ Nar	me char		Doing Business As Fryeburg Academy	•	E Telephone number			
┌ Inıt	ial retur		Number and street (or P O box if mail is	s not delivered to street add	ress) Room/suite	(207) 935		
┌ Ter	mınated	tions.	745 Main Street			G Gross receipt	5 \$ 21,615,642	
_	ended r		City or town, state or country, and ZIP + Fryeburg, ME 04037	- 4	•			
 App	olication	pending			_			
			ne and address of principal officer Pike IV			is a group retu ites?	rn for ┌ Yes ┌ No	
			aın Street rg, ME 04037			ites.		
		Pryebo	Tg, ME 04037			ll affiliates inclu	ded? Yes No t (see instructions)	
I Ta	x-exem	pt status 🔽 501(d) (3) ◀ (insert no)	527		o, attach a lis ip exemption n		
J W	ebsit e	www fryeburg	icademy org		7 `			
_			tion Trust Association Other 🕨		L Year of fo	rmation 1790	M State of legal domicile ME	
Pa	rt I	•	e organization's mission or most sig					
Activities & Governance	2 3 4 5	Check this box Mumber of voting Number of indepet	omprehensive academic program, encess in higher education and the work of the organization discontinued its members of the governing body (Paradent voting members of the governing body (Paradent voting members of the governing body).	s operations or dispose t VI, line 1a)	ed of more than	25% of its net		
	7a	Total gross unrela	ted business revenue from Part VII	I, column (C), line 12		7	7a 316,23	
	b	Net unrelated bus	iness taxable income from Form 990	D-T, line 34			7b	
		C	d (D \/ 111			r Year	Current Year	
ā	8		d grants (Part VIII, line 1h) revenue (Part VIII, line 2g)		5,299,432	5,263,631		
Revenue	10		me (Part VIII, column (A), lines 3, 4			-406,001	316,233	
ά	11	Other revenue (F	art VIII, column (A), lines 5, 6d, 8c	c, 9c, 10c, and 11e)		431,587	549,127	
	12		dd lines 8 through 11 (must equal P		ine	15,486,916	16,244,190	
	13		ar amounts paid (Part IX, column (A			0	0	
	14	Benefits paid to	or for members (Part IX, column (A),	, lıne 4)		0	0	
\$?	15	Salaries, other c 10)	ompensation, employee benefits (Pa	rt IX, column (A), lines	5 5 –	7,300,745	7,319,198	
Expenses	16a	,	draising fees (Part IX, column (A), lir	ne 11e)		0	0	
Š	ь	Total fundraising ex	penses (Part IX, column (D), line 25) 🕨 684,6	608				
ш	17		(Part IX, column (A), lines 11a–11d			5,018,965	5,148,241	
	18		Add lines 13–17 (must equal Part I			12,319,710	12,467,439	
	19	Revenue less ex	penses Subtract line 18 from line 13	2	D	3,167,206	3,776,751	
<u>জ</u>					_	g of Current 'ear	End of Year	
do ox ences		T-+-1	rt X, line 16)			35,999,081	39,268,538	
lssets or Bafances	20							
let Assets or and Balances	21	Total liabilities (Part X, line 26)			6,496,472		
	21 22	Total liabilities (Net assets or fu	nd balances Subtract line 21 from li			6,496,472 29,502,609	, ,	
	21	Total liabilities (Net assets or fur Signature Bl Under penalties of p	nd balances Subtract line 21 from li	ne 20	ng schedules and s	29,502,609 tatements, and to	33,279,356 the best of my knowledge	
Par Sign	21 22 t II	Net assets or fur Signature BI Under penalties of p and belief, it is true, Signature of office	ock ergury, I declare that I have examined this recorrect, and complete Declaration of preparer	ne 20	ng schedules and s sed on all informat	29,502,609 tatements, and to	33,279,356 the best of my knowledge	
Par Sign	21 22 t II	Total liabilities (Net assets or fur Signature BI Under penalties of p and belief, it is true, Signature of office Asa O Pike IV Pre Type or print nar	ock ergury, I declare that I have examined this recorrect, and complete Declaration of preparer	ne 20 eturn, including accompanyi rer (other than officer) is ba	ng schedules and s sed on all informat 2010- Date	29,502,609 tatements, and to ion of which prepa	33,279,356 the best of my knowledge arer has any knowledge	
Par Sign Here	21 22 t II	Net assets or fur Signature BI Under penalties of p and belief, it is true, Signature of office Asa O Pike IV Pre	ock ergury, I declare that I have examined this recorrect, and complete Declaration of preparer	ne 20	ng schedules and s sed on all informat 2010-	29,502,609 tatements, and to ion of which prepa	33,279,356 the best of my knowledge arer has any knowledge	
Sign Here Paid Prepa	21 22 rt III	Total liabilities (Net assets or fur Signature Bl Under penalties of p and belief, it is true, Signature of office Asa O Pike IV Pre Type or print nar Preparer's signature Firm's name (or your	ock ergury, I declare that I have examined this recorrect, and complete Declaration of preparers er	ne 20 eturn, including accompanyi rer (other than officer) is ba	ng schedules and s sed on all informat 2010 Date Check if self-	29,502,609 tatements, and to ion of which prepared. 05-10 Preparer's iden (see instruction	33,279,356 the best of my knowledge arer has any knowledge	
Sign Here	21 22 rt III	Total liabilities (Net assets or fur Signature Bl Under penalties of p and belief, it is true, Signature of office Asa O Pike IV Pre Type or print nar Preparer's signature	ock ergury, I declare that I have examined this recorrect, and complete Declaration of preparer	ne 20 eturn, including accompanyi rer (other than officer) is ba	ng schedules and s sed on all informat 2010 Date Check if self-	29,502,609 tatements, and to lon of which prepared.	arer has any knowledge	

Part III Statement of Program Service Accomplishments

Briefly describe the organization's mission

Fryeburg Academy is an independent secondary school that serves a widely diverse population of local day students and boarding students from across the nation and around the world

e) (Expenses \$ and maintenance of facility e) (Expenses \$ and food service operations er program services (Describe in Sc								
and maintenance of facility e) (Expenses \$ and food service operations								
and maintenance of facility e) (Expenses \$								
and maintenance of facility e) (Expenses \$								
(Code) (Expenses \$ 5,910,076 including grants of \$ 0) (Revenue \$ 0) Elementary & Secondary Education Secondary Education of High School Students (644)								
en								

	•		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		N o
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4		N o
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 similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		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? <i>If "Yes," complete Schedule D, Part II</i>	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	Yes	
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, directly or through a related organization, hold assets in term, permanent,or quasi- endowments? If "Yes," complete Schedule D, Part V 🗗	10	Yes	
11	Is the organization's answer to any of the following questions "Yes"? If so,complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable	11	Yes	
	◆ Did the organization report an amount for land, buildings, and equipment in Part X, line10? If "Yes," complete Schedule D, Part VI.			
	◆ Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.			
	◆ Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.			
	◆ Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.			
	◆ Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.			
	◆ Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X.			
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12	Yes	
12A	Was the organization included in consolidated, independent audited financial statements for the tax year? Yes No			
	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional	j		
13	Is the organization a school 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 United States?	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 United States? If "Yes," complete Schedule F, Part I	14b		Νο
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 U S? If "Yes," complete Schedule F, Part II	15		Νο
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 U S ? If "Yes," complete Schedule F, Part III	16		Νο
17	Did the organization report a total of more than \$15,000, of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		Νο
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		Νο
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		Νο

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		N o
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		N o
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	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 line 25	24a		N o
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
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		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		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, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		No
28	Was the organization a party to a business transaction with one of the following parties? (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a	Yes	
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		Νο
c	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or owner? If "Yes," complete Schedule L, Part IV	28c		N o
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30	Yes	
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		N o
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		N o
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? <i>If</i> "Yes," complete Schedule R, Part I	33		N o
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		N o
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		N o
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If</i> "Yes," complete Schedule R, Part V, line 2	36		N o
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		N o
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	
		F	orm 990	(2009)

			Yes	No
la	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1 c	Yes	
а	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 return			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions)	2b	Yes	
a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this	20		No
h	return?	3a 3b		Νo
а	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		Νο
b	If "Yes," enter the name of the foreign country See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
3	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Νο
ь	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Νo
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?	5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?	6a		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
	Organizations that may receive deductible contributions under section 170(c).			
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		No
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		No
u	11 Tes, indicate the number of Forms 8282 filed during the year			
e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No
	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g	Yes	
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7h	Yes	
	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
	Section 501(c)(7) organizations. Enter			
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
	Section 501(c)(12) organizations. Enter			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
2a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			

745 Main Street Fryeburg, ME 04037 (207) 935-2001

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

Sa	ction A. Governing Body and Management				
36	ction A. Governing body and Management			Yes	N-
				res	No
1a	Enter the number of voting members of the governing body 1a	18			
ь	Enter the number of voting members that are independent 1b	16			
2	Did any officer, director, trustee, or key employee have a family relationship or a busine other officer, director, trustee, or key employee?	ss relationship with any	2	Yes	
3	Did the organization delegate control over management duties customarily performed by		3	1 00	NI -
4	supervision of officers, directors or trustees, or key employees to a management compa Did the organization make any significant changes to its organizational documents since	·			Νο
	filed?		4		No
5	Did the organization become aware during the year of a material diversion of the organiz	ation's assets?	5		Νo
6	Does the organization have members or stockholders?		6		Νo
7a	Does the organization have members, stockholders, or other persons who may elect one governing body?		7a		Νο
b	Are any decisions of the governing body subject to approval by members, stockholders,		7b		Νo
8	Did the organization contemporaneously document the meetings held or written actions year by the following	undertaken during the			
а	The governing body?		8a	Yes	
ь	Each committee with authority to act on behalf of the governing body?		8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who				
	organization's mailing address? If "Yes," provide the names and addresses in Schedule		9		Νo
	ction B. Policies (This Section B requests information about policies not req	uired by the Internal			
Re	venue Code.)				
				Yes	No
10a	Does the organization have local chapters, branches, or affiliates?		10a		Νo
b	If "Yes," does the organization have written policies and procedures governing the activ affiliates, and branches to ensure their operations are consistent with those of the organ		10b		
11	Has the organization provided a copy of this Form 990 to all members of its governing b	ody before filing the form?	11	Yes	
444	Describe in Schedule O the process, if any, used by the organization to review the Form	000	-11	res	
IIA	Describe in Schedule O the process, if any, used by the organization to review the Form	990			
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13 $$.		12a		Νo
b	Are officers, directors or trustees, and key employees required to disclose annually inte to conflicts?	rests that could give rise	12b		
c	Does the organization regularly and consistently monitor and enforce compliance with the describe in Schedule O how this is done	ne policy? If "Yes,"	12c		
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		163	
	independent persons, comparability data, and contemporaneous substantiation of the de		_		, .
	The organization's CEO, Executive Director, or top management official		15a		No
ь	Other officers or key employees of the organization		15b		Νο
	If "Yes" to line a or b, describe the process in Schedule O (See instructions)				
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or si taxable entity during the year?		16a		No
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization				110
	participation in joint venture arrangements under applicable federal tax law, and taken s organization's exempt status with respect to such arrangements?	teps to safeguard the	461		
<u> </u>			16b		
	ction C. Disclosure				
17	List the States with which a copy of this Form 990 is required to be filed ME	00 1000 T (F01(-)			
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 9 (3)s only) available for public inspection. Indicate how you make these available. Check Own website Another's website. Upon request				
19	Describe in Schedule O whether (and if so, how), the organization makes its governing d interest policy, and financial statements available to the public See Additional Data Ta	•			
20	State the name, physical address, and telephone number of the person who possesses t		ne orda	ınızatıor	n ▶
	Barbara Kollander		9 4		-

Part VIII 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 Report compensation for the calendar year ending with or within the organization's tax year. Use Schedule J-2 if additional space is needed

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

Check this box if the organization did not compensate any current or former officer, director, trustee or key employee										
(A) Name and Title	(B) Average hours per	(C) Position (check all that apply)						(D) Reportable compensation from the	(E) Reportable compensation	(F) Estimated amount of other
	week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	organization (W- 2/1099-MISC)	from related organizations (W- 2/1099- MISC)	compensation from the organization and related organizations
See add'l data										

- Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization ►1

- 5 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

Section B. Independent Contractors

1 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	Description of services	(C) Compensation
AAA Energy Service Co PO Box 908 Scarborough, ME 040700908	Energy services and boiler repair	101,204
Lampron Energy PO Box 1360 Standish, ME 04080	Fuel oil for the boilers	239,103
	Building contractor for the new Performing Arts Center	111,502

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization ►3

Yes

5

No

Νo

Nο

Form 99								Page 9
Part	/1111	Statement of	of Revenue		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
\$ \$	1a	Federated cam	paigns 1a	0				
grant mount	ь	Membership du	es 1b	0				
్ర్త	c	Fundraising eve	ents 1c	0				
¥ ¥	d	Related organiz	rations 1d	0				
Contributions, gifts, grants and other similar amounts	e	Government grants	s (contributions) 1e	0				
	_f	All other contribution	ons, gifts, grants, and 1f	5,263,631				
	-		ot included above					
<u></u>	g		butions included in 2,799					
S E	h	IIIIes Ia-II \$ _		▶	5,263,631			
				Business Code				
a Ele	2a	Tuition from Towns	c	611,110	5,903,968	5,903,968	0	
Program Service Revenue	ь		ers net of Contributions	611,110	3,659,099	3,659,099	0	0
	, c	Language Program					0	0
	l .			611,110	255,750	255,750		0
	d	Application Fee Re		611,110	10,149	10,149	0	0
	e	Departmental Fees		611,110	87,023	87,023	0	0
	f	All other progra	am service revenue		199,210	199,210	0	0
	g	Total. Add lines	s 2a – 2f		10,115,199			
	3	Investment inc	ome (including dividend	ds, interest				
		and other simila	aramounts)	▶	235,884	0	235,884	0
	4	Income from inves	stment of tax-exempt bond p	proceeds 🕨 🕨	0	0	0	0
	5	Royalties			0	0	0	0
			(ı) Real	(II) Personal				
	6a	Gross Rents Less rental						
	b	expenses						
	С	Rental income or (loss)	0	0				
	d	Net rental inco	me or (loss)					
			(ı) Securities	(II) O ther				
	7a	Gross amount from sales of assets other than inventory	5,451,801	0				
	ь	Less cost or	5,371,452	0				
		other basis and sales expenses						
	С	Gain or (loss)	80,349	0				
	d	Net gain or (los	s)	►	80,349	0	80,349	0
une	8a	Gross income f events (not inc \$	_					
Other Revenue		of contributions	reported on line 1c) le 18					
<u> </u>	Ь	less direct ou	penses b					
⇟			(loss) from fundraising (events 🛌				
	9a		rom gamıng actıvıtıes					
	ь		a penses b					
	10a	Gross sales of returns and allo		vities				
	ь		a oods sold b					
	c		(loss) from sales of inve	entory ►				
		Miscellaneous		Business Code				
	11a	Student Activit		611,710	208,882	208,882	О	o
	ь	Faculty Housin	_	611,710	44,456	44,456	0	0
	c	Food Service R		611,710	104,145	104,145	0	0
	d	All other reven			191,644	191,644	0	0
		Total. Add lines	l					
	12		See Instructions	. · · · ►	549,127			
	J				16,244,190	10,664,326	316,233	0

Form	990 (2009)				Page 10
Par					
Δ	Section 501(c)(3) and 501(c)(4) organizations m Il other organizations must complete column (A) but are not required to			(D)	
	ot include amounts reported on lines 6b,	(A)	(B)	(C)	(D)
	o, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to governments and organizations in the U S See Part IV, line 21	0		general enpeneer	
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22	0	0		
3	Grants and other assistance to governments, organizations, and individuals outside the U S See Part IV, lines 15 and 16	0			
4	Benefits paid to or for members	0	0		
5	Compensation of current officers, directors, trustees, and	290,660	212 200	79.460	0
6	key employees Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$	290,000			0
7	Other salaries and wages	5,340,816	4,824,380	186,490	329,946
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	36,592	17,279	7,546	11,767
9	Other employee benefits	1,651,130	1,507,101	55,699	88,330
10	Payroll taxes	0	, ,	,	0
11	Fees for services (non-employees)				
а	Management	0	0	0	0
ь	Legal	13,561	0	13,561	0
С	Accounting	33,240	0	33,240	0
d	Lobbying	0	0	0	0
e	Professional fundraising See Part IV, line 17	0			0
f	Investment management fees	77,349	0	77,349	0
g	Other	0	0	· · ·	0
12	Advertising and promotion	2,839	2,839	0	0
13	Office expenses	93,924	82,083	4,689	7,152
14	Information technology	172,264	150,087	13,352	8,825
15	Royalties	0	,	· · ·	0
16	Occupancy	970,517	875,507	95,010	0
17	Travel	165,771	119,225	· -	44,069
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0		0	0
19	Conferences, conventions, and meetings	0	0	0	0
20	Interest	185,665	0	185,665	0
21	Payments to affiliates	0	0	0	0
22	Depreciation, depletion, and amortization	798,120	798,120	0	0
23	Insurance	30,321	0		0
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	Administration inclusive of programs	871,159	787,706	78,030	5,423
b	Student Recruitment Fees & Admissions	380,992	380,992	0	
c	Alumnı & Development Expenses	113,917	0	0	113,917
d	Food cost & Food Services other	434,425	424,375	10,050	0
е	Miscellaneous	804,177	83,834	645,164	75,179
f	All other expenses				
25	Total functional expenses. Add lines 1 through 24f	12,467,439	10,265,728	1,517,103	684,608
26	Joint costs. Check here ► ☐ If following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				·

Pa	rt X	Balance Sheet						
				(A) Beginning of year		(B) End of year		
	1	Cash—non-interest-bearing		943,579	1	1,891,984		
	2	Savings and temporary cash investments	•	3,461,148	2	356,524		
	3	Pledges and grants receivable, net		1,366,187	3	121,908		
	4	Accounts receivable, net		108,006	4	135,201		
	5	Receivables from current and former officers, directors, trustees highest compensated employees Complete Part II of	s, key employees, and					
		Schedule L		0	5	0		
	6	Receivables from other disqualified persons (as defined under s persons described in section $4958(c)(3)(B)$ Complete Part II of						
		Schedule L		0	6	0		
stess	7	Notes and loans receivable, net		0	7			
SS	8	Inventories for sale or use		82,289	8	120,650		
٧	9	Prepaid expenses and deferred charges		133,125	9	88,724		
	10a	Land, buildings, and equipment cost or other basis <i>Complete</i> Part VI of Schedule D	28,174,566	3				
	ь	Less accumulated depreciation	10b 4,660,850	23,764,712	10c	23,513,716		
	11	Investments—publicly traded securities		5,353,685	11	12,253,481		
	12	Investments—other securities See Part IV, line 11	195,000	12	195,000			
	13	Investments—program-related See Part IV, line 11			13			
	14	Intangible assets	0	14	0			
	15	Other assets See Part IV, line 11	591,350	15	591,350			
	16	Total assets. Add lines 1 through 15 (must equal line 34)	es 1 through 15 (must equal line 34)					
	17	Accounts payable and accrued expenses .		1,063,273	17	896,355		
	18	Grants payable	0	18	0			
	19	Deferred revenue	rred revenue					
	20	Tax-exempt bond liabilities		0	20	0		
je s	21	Escrow or custodial account liability Complete Part IV of Schedul	leD	0	21	0		
Liabilities	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified						
7		persons Complete Part II of Schedule L		0	22	0		
	23	Secured mortgages and notes payable to unrelated third parties		4,412,153	23	3,148,259		
	24	Unsecured notes and loans payable to unrelated third parties		0	24	0		
	25	Other liabilities Complete Part X of Schedule D		0	25	0		
	26	Total liabilities. Add lines 17 through 25		6,496,472	26	5,989,182		
رد ط		Organizations that follow SFAS 117, check here ► $\sqrt{}$ and comp through 29, and lines 33 and 34.	olete lines 27					
ĕ	27	Unrestricted net assets		21,674,363	27	22,800,453		
<u> </u>	28	Temporarily restricted net assets		3,477,195		2,107,508		
Fund Balance	29	Permanently restricted net assets		4,351,051	\vdash	8,371,395		
nn	29	Organizations that do not follow SFAS 117, check here ▶ ☐ ar	od complete	4,001,001	29			
ΥF		lines 30 through 34.	id Complete					
s or	30	Capital stock or trust principal, or current funds			30			
Assets	31	Paid-in or capital surplus, or land, building or equipment fund			31			
455	32	Retained earnings, endowment, accumulated income, or other fu			32			
Net /	33	Total net assets or fund balances		29,502,609	-	33,279,356		
Z	34	Total liabilities and net assets/fund balances		35,999,081		39,268,538		
	<u> </u>			1				

Part XI 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	Yes	
b	Were the organization's financial statements audited by an independent accountant?	2b	Yes	
c	If "Yes," to 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? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	2c	Yes	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both			
	Separate basis Consolidated basis Both consolidated and separated basis			
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? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3b		

Form **990** (2009)

Employer identification number

OMB No 1545-0047

SCHEDULE A (Form 990 or 990EZ)

Department of the Treasury

Name of the organization

Internal Revenue Service

Public Charity Status and Public Support

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

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

Inspection

The Trustees of Fryeburg Academy Reason for Public Charity Status (All organizations must complete this part.) See instructions The organization is not a private foundation because it is (For lines 1 through 11, check only one box) A church, convention of churches, or association of churches section 170(b)(1)(A)(i). $\overline{\mathbf{v}}$ A school described in section 170(b)(1)(A)(ii). (Attach Schedule E) 7 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi) (Complete Part II) A community trust described in **section 170(b)(1)(A)(vi)** (Complete Part II) An organization that normally receives (1) more than 331/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 331/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III) 10 An organization organized and operated exclusively to test for public safety Seesection 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h c Type III - Functionally integrated Type III - Other Type I **b** Type II By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) If the organization received a written determination from the IRS that it is a Type I, Type II or Type III supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? (i) a person who directly or indirectly controls, either alone or together with persons described in (ii) Yes No and (III) below, the governing body of the the supported organization? 11g(i) (ii) a family member of a person described in (i) above? 11g(ii) (iii) a 35% controlled entity of a person described in (i) or (ii) above? 11g(iii) Provide the following information about the supported organization(s) h

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 9 above or IRC section (see	(iv) Is the organization in col (i) listed in your governing document?		(v) Did you not organizati col (i) of suppor	on in your	organızatı col (ı) orga	Is the organization in col (i) organized in the US?	
		ınstructions))	Yes	No	Yes	No	Yes	No	
Total									

ınstructions

P	Support Schedule (Complete only if yo					and 170(b)	(1)(A)(vi)
S	ection A. Public Support	a checked tile	DOX OII IIIC 3,	,, or o or rare.	÷·/		
	endar year (or fiscal year beginning	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
	ın)	(a) 2005	(b) 2006	(6) 2007	(d) 2008	(e) 2009	(I) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not						
	include any "unusual						
_	grants ") Tax revenues levied for the						
2	organization's benefit and either						
	paid to or expended on its						
	behalf						
3	The value of services or facilities						
-	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions by						
	each person (other than a						
	governmental unit or publicly						
	supported organization) included on						
	line 1 that exceeds 2% of the						
	amount shown on line 11, column						
_	(f) Dublic Support Subtract line F from						
6	Public Support. Subtract line 5 from line 4						
S	ection B. Total Support	1		-			
	endar year (or fiscal year beginning	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
	ın)	(a) 2005	(b) 2000	(6) 2007	(d) 2008	(e) 2009	(1) Total
7	A mounts from line 4						
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar						
9	sources Net income from unrelated						
9	business activities, whether or						
	not the business is regularly						
	carried on						
10	Other income (Explain in Part						
	IV) Do not include gain or loss						
	from the sale of capital assets						
11	Total support (Add lines 7						
4.5	through 10)	/5					
12	Gross receipts from related activities	,	•			12	
13	First Five Years If the Form 990 is f	or the organizati	on's first, second	, third, fourth, or	fifth tax year as a	501(c)(3) orga	inization, ▶□
	check this box and stop here						-1
S	ection C. Computation of Pub	lic Support P	ercentage				
14	Public Support Percentage for 2009			11 column (f))		14	
15	Public Support Percentage for 2008	Schedule A . Pa	rt II. line 14			15	
	33 1/3% support test—2009. If the	•	,	v on line 13 and	line 14 is 33 1/30		k this hox
_	and stop here. The organization qua	-		·	IIIIC 14 13 33 1/3/	o or more, ence	▶ □
ь	33 1/3% support test—2008. If the				5a, and line 15 is	33 1/3% or moi	
	box and stop here. The organization				,		▶
17a	10%-facts-and-circumstances test-	-2009. If the org	anızatıon dıd not	check a box on lı	ne 13, 16a, or 16	b and line 14	
	ıs 10% or more, and ıf the organizat						
	in Part IV how the organization mee	ts the "facts and	l cırcumstances"	test The organiz	ration qualifies as	a publicly supp	
L	organization	_2009 Ifthe c==	onization did net	chack a bay as li	no 12 165 164	or 17a and line	▶□
D	10%-facts-and-circumstances test- 15 is 10% or more, and if the organ	_					
	Explain in Part IV how the organizat						clv
	supported organization						▶ ┌
10	Deiveta Farmdation Ifthe averages	on did not obselv	a hay an line 12	16- 16- 17-	17	hay and cas	•

▶□

Part III Support Schedule for Organizations Described in IRC 509(a)(2)

	(Complete only if you	cnecked the	box on line 9 o	r Part I.)			
	ction A. Public Support				1	T	ı
Cale	ndar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not						
_	include any "unusual grants ")						
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						
3	purpose Gross receipts from activities that				+		
3	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 through 5				-		
7a	A mounts included on lines 1, 2, and 3 received from disqualified						
	persons				1		
ь	Amounts included on lines 2 and 3						
	received from other than						
	disqualified persons that exceed						
	the greater of \$5,000 or 1% of the amount on line 13 for the year						
с	Add lines 7a and 7b						
8	Public Support (Subtract line 7c						
	from line 6)						
	ction B. Total Support		1			1	Γ
Cale	ndar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(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						
ь	Unrelated business taxable						
	ıncome (less section 511 taxes)						
	from businesses acquired after						
_	June 30, 1975 Add lines 10a and 10b						
c 11	Net income from unrelated						
11	business activities not included						
	ın lıne 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,						
14	11 and 12) First Five Years If the Form 990 is for	or the organizat	lon's first, second	L third fourth or	l fifth tax vear as a	1 a 501(c)(3) organ	l uzation
	check this box and stop here	or the organizat		., 4,	men tax your as t	(c)(c) c.gu.	▶ ┌
	ction C. Computation of Publ						
15	Public Support Percentage for 2009	(line 8 column	(f) divided by line	13 column (f))		15	
16	Public support percentage from 200	8 Schedule A , F	art III, line 15			16	
Se	ction D. Computation of Inve	stment Inco	ome Percenta	ge			
17	Investment income percentage for 2	009 (line 10c c	olumn (f) dıvıded	by line 13 columi	n (f))	17	
18	Investment income percentage from	2008 Schedule	A, Part III, line 1	L 7		18	
19a	33 1/3% support tests—2009. If the	organization di	d not check the b	ox on line 14, and	d line 15 is more	than 33 1/3% and	d line 17 is not
	more than 33 1/3%, check this box a	ind stop here. T					
L	organization 33 1/3% support tests—2008. If the	► C	d not chastes been	on line 14 amilion	100 and line 4	5 ic mara +ha= 22	1/20/2 and line
b	שר בו בע suppoit tests—zouo. If the	organization (I	и посепеска вох	OILLINE TH OLINE	= ⊥⊃a, anu nne 1(us more man 33	1/370 and ine

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

Part IV

Supplemental Information. Supplemental Information. Complete this part to provide the explanation required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Provide any other additional information. See instructions

Schedule A (Form 990 or 990-EZ) 2009

Additional Data

Software ID: Software Version:

EIN: 01-0211505

Name: The Trustees of Fryeburg Academy

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)

(Code) (Expenses \$	715,034	including grants of \$	0) (Revenue \$	0)
The Admission de	partment expenses and studer	nt recruitment i	fees paid out		
(Code) (Expenses \$	423,271	including grants of \$	0)(Revenue\$	0)
Athletics provided	for the students at the Acade	my			
(Code) (Expenses \$	274,473	including grants of \$	0) (Revenue \$	0)
Information techn	ology provided to the students	at the Acaden	ny		
	\/E	238,607	including grants of \$	0) (Revenue \$	0)
(Code) (Expenses \$	250,007			
•) (Expenses \$ es rovided for the boarding stu	•			

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Compensated Employees, and Independent Contractors												
(A) Name and Title	(B) A verage hours		(C tion (hat a	che		II		(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of other		
	per week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	from the organization (W- 2/1099-MISC)	from related organizations (W- 2/1099- MISC)	compensation from the organization and related organizations		
ASA O Pike IV President	10	Х		×				0	0	0		
Thomas D Shafner Vice President	5	Х		х				0	0	0		
Steven P Cote Trustee	5	Х		х				0	0	0		
Carol S Sudduth Secretary	5	Х		х				0	0	0		
Ellen Pope Trustee	5	Х						0	0	0		
June W Hammond Trustee	5	Х						0	0	0		
B Dean Stearns Trustee	5	Х						0	0	0		
Alan D Bennett Trustee	5	Х						0	0	0		
Christopher M Gordon Trustee	5	X						0	0	0		
Bretton D Russell Trustee	5	Х						0	0	0		
Nancy S Hogan RN PhD Trustee Bradley B Nelson	5	X						0	0	0		
Trustee Elaine Weeks Trueblood	5	Х						0	0	0		
Trustee Shannon D McKeen	5	Х						0	0	0		
Trustee	5	Х						0	0	0		
James A Osgood Trustee	5	X						0	0	0		
Roy E Andrews Trustee Richard A Jones	5	Х						0	0	0		
Trustee	5	X						0	0	0		
David Rohde Trustee	5	Х						0	0	0		
Daniel E Lee Jr Headmaster	40				Х			212,200	0	0		

Form 990, Part VIII - Statement of Revenue - 2a - 2g Program Service Revenue -

-					
	Business Code	(A) Total Revenue	(B) Related or Exempt Function Revenue	(C) Unrelated Business Revenue	(D) Revenue Excluded from Tax under IRC 512, 513, or 514
Tuition from Towns	611,110	5,903,968	5,903,968	0	0
Tuition from Boarders net of Contributions	611,110	3,659,099	3,659,099	0	0
Language Program Tuition	611,110	255,750	255,750	0	0
Application Fee Revenue	611,110	10,149	10,149	0	0
Departmental Fees	611,110	87,023	87,023	0	0

Form 990, Part IX - Statement of Functional Expenses - 24a - 24e Other Expenses

Do not include amounts reported on line 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
Administration inclusive of programs	871,159	787,706	78,030	5,423
Student Recruitment Fees & Admissions	380,992	380,992	0	
Alumnı & Development Expenses	113,917	0	0	113,917
Food cost & Food Services other	434,425	424,375	10,050	0
Miscellaneous	804,177	83,834	645,164	75,179

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As Filed Data

DLN: 93493124011841

OMB No 1545-0047

Open to Public Inspection

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

Employer identification number Name of the organization The Trustees of Fryeburg Academy 01-0211505 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 for any other purpose conferring 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 a 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 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 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, handling of violations, and enforcement of the conservation easements it holds?

- Staff and volunteer hours devoted to monitoring, inspecting and enforcing conservation easements during the year 🕨 A mount of expenses incurred in monitoring, inspecting, and enforcing conservation 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 1 591,350 (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
 - 0 Revenues included in Form 990, Part VIII, line 1 Assets included in Form 990, Part X

0

ar	Titl Organizations Maintaining Co	<u>llections of Art</u>	, His	toric	cal Tre	eası	ures, or (<u> </u>	r Simila	r Asse	ets (co	ntınued)
3	Using the organization's accession and othe items (check all that apply)	r records, check any	y of th	e follo	owing th	nat ai	re a sıgnıfıc	ant ι	ise of its co	ollectio	n	
а	Public exhibition		d	Γ	Loan o	rexc	hange prog	rams	;			
b	Scholarly research		e	Γ	Other							
c	Preservation for future generations											
ı	Provide a description of the organization's content XIV	ollections and expla	ın how	v they	further	the	organızatıo	n's ex	xempt purp	ose in		
5	During the year, did the organization solicit assets to be sold to raise funds rather than			,					nılar	Г	Yes	√ No
Pa।	t IV Escrow and Custodial Arrang						n answere	ed "Y	es" to Fo	rm 990),	
	Part IV, line 9, or reported an ar											
.a	Is the organization an agent, trustee, custoo included on Form 990, Part X?					ions	or other as:	sets	not	Γ	Yes	∏ No
b	If "Yes," explain the arrangement in Part XI	/ and complete the	follow	ıng ta	ble		ı		1			
							ŀ			A mou	ınt	
с	Beginning balance							1c				
d	Additions during the year							1d				
e	Distributions during the year							1e				
f	Ending balance							1f				
a	Did the organization include an amount on F	orm 990, Part X, line	e 21?							Γ	Yes	┌ No
	If "Yes," explain the arrangement in Part XI\											
Pa	rt V Endowment Funds. Complete										\F \/	
_	Paganning of woor holonog	(a)Current Year 8,813,540	(b	Prior '	year ,571,681	├ `	wo Years Bac	K (d)Three Years	Back (e	e)Four Ye	ears Back
a	Beginning of year balance	4,010,000			,159,191	-		+		_		
b	Contributions	80,349			-865,129			+				
C	Investment earnings or losses	00,549			003,123			+				
d	Grants or scholarships	216,567			0			+				
е	Other expenditures for facilities and programs	210,307			U							
f	Administrative expenses	77,349			52,203							
g	End of year balance	12,609,973		8	,813,540							
2	Provide the estimated percentage of the yea	r end balance held a	as							•		
а	Board designated or quasi-endowment	19 %										
ь	Permanent endowment ► 65 %											
c	Term endowment ▶ 16 %											
a	Are there endowment funds not in the posse	ssion of the organiza	atıon t	:hat a	re held	and a	admınıstere	d for	the			
	organization by										Yes	No
	(i) unrelated organizations			•		•		•		3a(i)	Yes	
	(ii) related organizations					•		•		3a(ii)		N o
b	If "Yes" to 3a(II), are the related organization Describe in Part XIV the intended uses of the					•		•		3b		
	t VI Investments—Land, Building					Λ D	art V line	10				
Q.	Description of investment	s, and Equipmen	<u> </u>	(a)	Cost or of	ther	(b)Cost or o	ther	(c) Accumu		(d) Boo	ok value
	Land					0	66	4,065		-+		664,065
	Buildings					0	25,11	•		79,035	2	2,138,944
	Leasehold improvements		•			0	•	0,122		81,010		99,112
	Equipment					0		2,400		00,805		611,595
	Other		•			0	2,21	0		00,003		011,555
_			-	1		٧	i e	J	1	٧١		,

23,513,716

Part VII Investments—Other Securities. See (a) Description of security or category			od of valuation
(including name of security)	(b)Book value	Cost or end-o	f-year market value
Financial derivatives	195,000		
Closely-held equity interests Other			
Other			
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)	105.000		
	· · · · · · · · · · · · · · · · · · ·		
Part VIII Investments—Program Related. See			od of valuation
(a) Description of investment type	(b) Book value		f-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, III (a) Descrip			(b) Book value
Art Work			591,350
			,
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1			591,350
Part X Other Liabilities. See Form 990, Part X			591,350
			591,350
Part X Other Liabilities. See Form 990, Part X	, line 25.		591,350
Part X Other Liabilities. See Form 990, Part X (a) Description of Liability	, line 25.		591,350
Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes	, line 25.		591,350
Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes	, line 25.		591,350
Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes	, line 25.		591,350
Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes	, line 25.		591,350
Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes	, line 25.		591,350
Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes	, line 25.		591,350
Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes	, line 25.		591,350
Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes	, line 25.		591,350
Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes	, line 25.	.	591,350
Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes	, line 25.		591,350
Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes	, line 25.		591,350
Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes	, line 25.		591,350
Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes	, line 25.		591,350
Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes	, line 25.		591,350
Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes	, line 25.		591,350

Par	TAXLE Reconciliation of Change in Net Assets from Form 990 to Financial Statemen	nts	
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	16,244,190
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	12,467,439
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	3,776,751
4	Net unrealized gains (losses) on investments	4	48,768
5	Donated services and use of facilities	5	C
6	Investment expenses	6	77,349
7	Prior period adjustments	7	C
8	Other (Describe in Part XIV)	8	C
9	Total adjustments (net) Add lines 4 - 8	9	126,117
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	3,902,868
Par	XIII 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	16,292,958
2	Amounts 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 2b		
c	Recoveries of prior year grants		
d	Other (Describe in Part XIV) 2d 0		
e	Add lines 2a through 2d	2e	48,768
3	Subtract line 2e from line 1	3	16,244,190
4	A mounts included on Form 990, Part VIII, line 12, but not on line 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a 0		
b	Other (Describe in Part XIV) 4b 0		
c	Add lines 4a and 4b	4c	C
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	16,244,190
Part	Reconciliation of Expenses per Audited Financial Statements With Expenses	per	
1	Total expenses and losses per audited financial	1	12,467,439
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
– a	Donated services and use of facilities		
b	Prior year adjustments		
c	Other losses		
d	Other (Describe in Part XIV) 2d 0		
e	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	12,467,439
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 0		
b	Other (Describe in Part XIV) 4b 0		
c	Add lines 4a and 4b	4c	C
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5	12,467,439
Par	t XIV Supplemental Information		

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b Also complete this part to provide any additional information

Ident if ier	Return Reference	Explanation
SchD_P03_S00_L04	Schedule D, Part III, Line 4	The collection consists of numerous works of art that were donated to the Academy for display at the Stephen Pace Gallery in the Performing Arts Center and at several other locations on the campus All of the works of Art have been appraised by a noted art appraiser
SchD_P05_S00_L04	Schedule D, Part V, Line 4	3% of the trailing 12 quarters are used to support operating expenses of the school

Employer identification number

SCHEDULE E

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

Schools

►Complete if the organization answered "Yes" to Form 990, Part IV, line 13, or Form 990-EZ, Part VI, line 48.

► Attach to Form 990 or Form 990-EZ.

OMB No 1545-0047

2009

Open to Public Inspection

The Trustees of Fryeburg Academy 01-0211505 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? 1 Yes 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? Yes 2 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 Yes Fryeburg Academy has 657 students Our student population continues to be a mix of students from around the world (school year 2009-2010 China, Korea, Vietnam, Japan, Spain, Thailand, Taiwan, Turkey, Russia, Denmark, Sweden, Nepal and Rwanda) and students from our local communities (Fryeburg, Brownfield, Denmark, Lovell, Sweden, Stoneham & Stow and additionally, Chatham, NH and Albany Township, ME) Fryeburg Academy admits students of any race, religion, gender, national origin, or sexual orientation in all the rights, privileges, programs and activities available to students at the school Fryeburg Academy does not discriminate in the administration of its educaional policies, admission policies, financial aid, or any other programs administered by the school Does the organization maintain the following? a 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 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 4d Yes d Copies of all material used by the organization or on its behalf to solicit contributions? If you answered "No" to any of the above, please explain If you need more space, use Schedule O (Form 990) Does the organization discriminate by race in any way with respect to a Students' rights or privileges? 5a Νo **b** Admissions policies? 5b Νo c Employment of faculty or administrative staff? 5c Νo d Scholarships or other financial assistance? 5d Νo e Educational policies? Νo 5e f Use of facilities? 5f Νo g Athletic programs? 5g Νo h Other extracurricular activities? 5h Νo If you answered "Yes" to any of the above, please explain If you need more space, use Schedule O (Form 990) 6a Does the organization receive any financial aid or assistance from a governmental agency? Yes 6a **b** Has the organization's right to such aid ever been revoked or suspended? 6b Νo If you answered "Yes" to either line 6a or line 6b, explain on Schedule O (Form 990) 🎜 7 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," explain on Schedule O (Form 7 Yes 990)

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DLN: 93493124011841

OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury Internal Revenue Service

Compensation Information

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

► Complete if the organization answered "Yes" to Form 990, Part IV, question 23.

Open to Public Inspection

Internal Revenue Service	Attach to Form 990. See separate instructions.	Inspection
Name of the organization The Trustees of Fryeburg Academy		Employer identification number
		01-0211505
Part I Ouestions Rega	rding Compensation	

	Questions Regarding compensation			T 1		
	Charlette annual temples (1)			Yes	No	
1a	Check the appropriate box(es) if the organization provided ar 990, Part VII, Section A, line 1a Complete Part III to prov	ide any relevant information regarding these items				
	<u> </u>	Housing allowance or residence for personal use				
	Travel for companions	Payments for business use of personal residence				
	Tax idemnification and gross-up payments	Health or social club dues or initiation fees				
	Discretionary spending account	Personal services (e g , maid, chauffeur, chef)				
b	If any of the boxes in line 1a are checked, did the organization reimbursement orprovision of all the expenses described abo		1b	Yes		
2	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?					
3	Indicate which, if any, of the following the organization uses organization's CEO/Executive Director Check all that apply					
	Compensation committee	Written employment contract				
	☐ Independent compensation consultant ✓	·				
	Form 990 of other organizations	Approval by the board or compensation committee				
4	During the year, did any person listed in Form 990, Part VII or a related organization	, Section A , line 1a with respect to the filing organization				
а	a Receive a severance payment or change-of-control payment?					
ь	p Participate in, or receive payment from, a supplemental nonqualified retirement plan?					
c					Νo	
	If "Yes" to any of lines 4a-c, list the persons and provide the	e applicable amounts for each item in Part III				
	Only 501(c)(3) and 501(c)(4) organizations only must comp	lete lines 5-9.				
5	For persons listed in form 990, Part VII, Section A, line 1a, compensation contingent on the revenues of	did the organization pay or accrue any				
а	The organization?		5a		Νo	
b	Any related organization?		5b		Νο	
	If "Yes," to line 5a or 5b, describe in Part III					
6	For persons listed in form 990, Part VII, Section A, line 1a, compensation contingent on the net earnings of	did the organization pay or accrue any				
а	The organization?		6a		Νo	
ь	b Any related organization?					
	If "Yes," to line 6a or 6b, describe in Part III					
7	For persons listed in Form 990, Part VII, Section A, line 1a, payments not described in lines 5 and 6? If "Yes," describe		7		Νo	
8	Were any amounts reported in Form 990, Part VII, paid or a subject to the initial contract exception described in Regs s in Part III		8		No	
9	If "Yes" to line 8, did the organization also follow the rebutta section 53 4958-6(c)?	ble presumption procedure described in Regulations	9			

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)(1)-(III) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a

(A) Name		(B) Breakdown of (i) Base compensation	W-2 and/or 1099-MI (ii) Bonus & incentive compensation	SC compensation (iii) Other reportable compensation	(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(ı)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
Daniel E Lee Jr	(I) (II)	212,200 0	0	0	0	_	· · · · · · · · · · · · · · · · · · ·	

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	Return Reference	Explanation
	Schedule J, Part I, Line 1a	The Headmaster lives in Fryeburg Academy housing, namely the headmaster's house

Schedule J (Form 990) 2009

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DLN: 93493124011841

OMB No 1545-0047

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Schedule L

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Transactions with Interested Persons

► Complete if the organization answered "Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V lines 38a or 40b. ► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

Name of the organization The Trustees of Fryeburg Academy **Employer identification number**

Part I Excess Benefit Tra	neacti	one (s	ection 501(c)(3	l) ar	nd section 501	(c)		1-02115 zations (
Complete if the organization										40b		
1 (a) Name of disq				(b) Description of transaction						(c) Corrected?		
(2, 112		P 0.00			(b) Desc	. II pti	on or trains			Yes	No	
										+	+	
											+	
2 Enter the amount of tax impos	ed on t	he orga	nization managers	or	disqualified ners	one	during the v	ear unde	r		•	
section 4958		· ·			· · · ·			Þ	; • \$			
3 Enter the amount of tax, If any	, on line	2, abo	ve, reimbursed by	the	organization .			🕨	- \$			
									-			
Part II Loans to and/or					D = == 11/ 1:== 2.6	1						
Complete if the organi			a res on Form 9	,90,	, Part IV, line 26	, or i	-orm 990-t	(f)	, line 38a			
(a) Name of interested person and		oan to m the	(c)O riginal				e) In	Approv	ved (g) Writte	en	
purpose	1	zation?	principal amour	nt	(d)Balance due	d∈	fault?	I		greement?		
F F	To	From				Ye	s No	Yes	1	Yes	No	
	10	FIOIII		_		16	S NO	res	NO	res	NO	
				\dashv								
				\dashv								
Total			🕨 s	\$			•			•		
Part III Grants or Assistan Complete if the orga						/, lır	ie 27.					
(a) Name of Interested pers	on	(b) Relationship be		•	rson	(c)An	nount of a	rant or type	ofassis	tance	
(a) Name of meerosted pers			and the	org	anızatıon		(0)////					
		-										
Part IV Business Transact												
Complete if the orga	nızatı	n ans	wered "Yes" on	For	m 990, Part IV	/, lır	ie 28a, 28	b, or 28	с.			
) Relationship ween interested		(-) (1, ,	naring of ization's	
(a) Name of interested perso	n		erson and the		(c) A mount of transaction		(d) Desc	rıptıon of	transaction	-	nues?	
			organization							Yes	No	
Asa O Pıke IV		Nancy	S Hogan			0	Brother & S Trustees	Sister in la	aws both		No	
Steven Cote			ırg Academy		11,3		Trustee is				Νο	
			e and President						of record for			
		Compa	Imers Insurance				the Acadei years	ny for hui	nerous			
Bradley B Nelson			urg A cademy	t	111.5	02	Trustee ov	ns the ge	neral	1	Νο	
·		Truste	e and owner of		.,-		contracting	compan	y hıred to			
		Sherid	an Corporation	1			build the P	erforming	Arts Center		-	
		1		1						+		

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SCHEDULE M (Form 990)

Department of the Treasury Internal Revenue Service

▶Complete if the organization answered "Yes" on Form 990, Part IV, lines 29 or 30. ► Attach to Form 990.

NonCash Contributions

	e of the organization rustees of Fryeburg Academy				Employer identification number
me I	rustees of Fryebuig Academy				01-0211505
Pa	Tt I Types of Property				
		(a) Check If applicable	(b) Number of Contributions	(c) Revenues reported on Form 990, Part VIII, line 1g	(d) Method of determining revenues
1	Art—Works of art	Х	1	1,000	market value
2	Art—Historical treasures .				
3	Art—Fractional interests				
4	Books and publications	X		522	market value
5	Clothing and household goods				
6	Cars and other vehicles	X	1	5.095	market value
7	Boats and planes			-,	
8	Intellectual property				
9	Securities—Publicly traded .				
10	Securities—Closely held stock $$.				
11	Securities—Partnership, LLC,				
4.7	or trust interests				
13	Securities—Miscellaneous Qualified conservation contribution—Historic structures				
14	Qualified conservation contribution—Other				
15	Real estate—Residential .				
16	Real estate—Commercial				
17 18	Real estate—Other Collectibles		11		markat value
	Food inventory	X	11	9	market value
20	Drugs and medical supplies .				
21	Taxidermy				
22	Historical artifacts				
23	Scientific specimens				
24	Archeological artifacts				
	12 Lenevo Thinkpas, Kodak Scan Mate, Computers Equipment & PDF		_		
25	Other ► (Converter 6) Musical	X	5	26,104	market value
	Instruments, Trumpet, Trombone, Kohlert Bassoon,				
26	Other ► (Guitar & Amp)	X	6	9,499	market value
	13048 miles @ 50 per				
27	Other ► (mile)	×	2	6,524	Allowed IRS per mile cost
	Miscellaneous				
28	school Other►(expenses)	×	10	4.046	 market value
29	Number of Forms 8283 received		anızatıon durıng the tax yea	,	
	for which the organization compl	eted Form	8283, Part IV, Donee Ackr	owledgement	29
					Yes No
30a	During the year, did the organiza				
	must hold for at least three year for exempt purposes for the enti				
h	If "Yes," describe the arrangement				30a No
31	Does the organization have a gif				
32a	Does the organization hire or us contributions?	•	ies or related organizations	to solicit, process, or sell	non-cash 32a No
	If "Yes," describe in Part II				
33	If the organization did not report describe in Part II	revenues i	n column (c) for a type of p	roperty for which column (a) is checked,

Page 2

Part II

Supplemental Information. Complete this part to provide the information required by Part I, lines 30b, 32b, and 33. Also complete this part for any additional information.

Identifier Return Reference Explanation

Schedule M (Form 990) 2009

Software ID: Software Version:

EIN: 01-0211505

Name: The Trustees of Fryeburg Academy

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DLN: 93493124011841

SCHEDULE 0

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990

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

Attach to Form 990.

OMB No 1545-0047

2009

Open to Public Inspection

Name of the organization

The Trustees of Fryeburg Academy

Employer identification number

01-0211505

ldentifier	Return Reference	Explanation
F990_P06_S0A_L02	Form 990, Part VI, Section A, Line 2	There is a trustuee to trustee relation father/son The trustee is on the board and the father is a Trustee Emeritus All transactions are at arms-length and Fair Market Value

ldentifier	Return Reference	Explanation
F990_P06_S0B_L11	Form 990, Part VI, Section B, Line 11	The form 990 w as turned over to the Fryeburg Academy treasurer and financial committee for review

ldentifier	Return Reference	Explanation
F990_P06_S0C_L19	Form 990, Part VI, Section C, Line 19	The Academy gains its accreditation from the New England Association of Schools and Colleges They routinely inspect governing documents, conflict of interest policies, and our financial statements. The results of this accreditation are shared with the State of Maine as a requirement of our School Approval. The results are also shared with Maine School Administrative District #72 as a matter of legal contract. MSAD 72 has a local, elected public school board.