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Department of the Treasury

### Return of Organization Exempt From Income Tax

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

2009

OMB No 1545-0047

▶The organization may have to use a copy of this return to satisfy state reporting requirements Internal Revenue Service Inspection calendar year, or tax year beginning 07-01-2009 and ending 06-30-2010 A For the 2009 D Employer identification number Name of organization Phillips Exeter Academy B Check if applicable use IRS Address change 02-0222174 label or Doing Business As E Telephone number print or Name change type. See Specific (603) 772-4311 Initial return Number and street (or P O box if mail is not delivered to street address) Room/suite Instruc-G Gross receipts \$ 536,929,147 Terminated tions. City or town, state or country, and ZIP + 4 Exeter, NH 038332460 Amended return Application pending Name and address of principal officer Is this a group return for THOMAS E HASSAN affiliates? 20 MAIN STREET EXETER, NH 038332460 Γ Yes Γ No H(b) Are all affiliates included? If "No," attach a list (see instructions) **✓** 501(c) (3) **◄** (insert no) Tax-exempt status Group exemption number 🕨 **Website:** ► www.exeter.edu K Form of organization 🔽 Corporation Trust 🗆 Association 🗀 Other 🕨 M State of legal domicile NH L Year of formation 1781 Summary Briefly describe the organization's mission or most significant activities SEE SCHEDULE O Activities & Governance Check this box 🔰 if the organization discontinued its operations or disposed of more than 25% of its net assets Number of voting members of the governing body (Part VI, line 1a) . . . Number of independent voting members of the governing body (Part VI, line 1b)  $\,$  .  $\,$  . Total number of employees (Part V. line 2a) . . . 1,227 Total number of volunteers (estimate if necessary) . 2,215 -3,200,987 Total gross unrelated business revenue from Part VIII, column (C), line 12 Net unrelated business taxable income from Form 990-T, line 34  $\,$  . -3,475,225 **Prior Year Current Year** 8 Contributions and grants (Part VIII, line 1h) . 11,967,067 12,735,963 Program service revenue (Part VIII, line 2g) . 44,327,713 46,184,035 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) . -26,404,537 17,096,785 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 1,087,483 1,934,297 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12 30,977,726 77,951,080 18,837,267 18,328,074 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3). 14 Benefits paid to or for members (Part IX, column (A), line 4) . . 0 0 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5 15 45.470.474 45.011.226 **Expenses** 16a Professional fundraising fees (Part IX, column (A), line 11e) . . 0 0 Total fundraising expenses (Part IX, column (D), line 25)  $\blacktriangleright 5,542,438$ Ь **17** Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f) . . 29,505,742 26,417,083 18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) 93,813,483 89,756,383 -11,805,303 19 Revenue less expenses Subtract line 18 from line 12 . -62.835.757 t Assets or | nd Balances | **Beginning of Current End of Year** Year 20 Total assets (Part X, line 16) . 1,207,792,676 1,179,439,142 Total liabilities (Part X, line 26) . . 180,920,244 130,250,588 22 1,026,872,432 Net assets or fund balances Subtract line 21 from line 20 1,049,188,554 Part II Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge Sign 2011-05-12 Here Signature of officer CHRISTOPHER V WEJCHERT CHIEF FINANCIAL OFFICER Type or print name and title Preparer's identifying number Preparer's signature Check if Date 2011-05-07 Paid empolyed 🕨 🛘 Preparer's Firm's name (or yours PricewaterhouseCoopers LLP EIN ▶ if self-employed), **Use Only** address, and ZIP + 4 125 High Street Phone no (617) 530-5000 Boston, MA 02110

May the IRS discuss this return with the preparer shown above? (see instructions) .

Yes ┌No

Form **990** (2009)

### Part III Statement of Program Service Accomplishments

Briefly describe the organization's mission

SEE SCHEDULE O

4e	Total program serv	ice expenses►\$	79,660,77	6					
4d	Other program serv	vices (Describe in Sch inc	nedule O ) Iuding grants o	f\$	) (Revenue \$	)			
	Auxiliary Enterprises inc	lude student grill and Gyms	tore which serve s	students during both summe	er and regular sessions				
4c	(Code	) (Expenses \$	1,367,475	ıncludıng grants of \$	0 ) (Revenue \$	892,617 )			
	SEE SCHEDULE 0								
4b	(Code	) (Expenses \$	4,101,541	ıncludıng grants of \$	1,125,109 ) (Revenue \$	5,741,662)			
	SEE SCHEDULE 0								
4a	•	) (Expenses \$	74,191,760	including grants of \$	17,202,965 ) (Revenue \$	40,831,817)			
4 4a	Section 501(c)(3) a	nd 501(c)(4) organiza	ions and section		largest program services by ex ire required to report the amour service reported 17,202,965) (Revenue \$				
4	ŕ	ese changes on Sched							
3			_	nt changes in how it co		Yes 🔽 No			
	If "Yes," describe th	ese new services on S	chedule O						
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?								

Dart TV	Checklist	of Required	Schedules
	CHECKHAL	oi keuulieu	<b>Juliculies</b>

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors? 🕏	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4	Yes	
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? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 2	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	ļ	ļ	
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	Yes	
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		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the U S ? If "Yes," complete Schedule F, Part III	16		No
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? <i>If</i> "Yes," complete Schedule G, Part I	17		N o
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If</i> "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		N o
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		Νo

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		No
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	Yes	
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	Yes	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		No
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		Νο
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		No
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	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	Yes	
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		No
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
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		No
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	Part I	31		No
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		No
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		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34	Yes	
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	Yes	
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	Yes	
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		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?	38	Yes	

art V	Statements	Regarding	Other	TRS Filing	as and '	Tax Com	pliance
	ota to illoito	ive gar aring	•	<b>-110</b> 1 111111	goana	I GA COIII	Pilailee

			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			
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?	<b>1</b> c	Yes	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax  Statements filed for the calendar year ending with or within the year covered by this 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	
За	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a	Yes	
ь	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	Yes	
4a	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	Yes	
Ь	If "Yes," enter the name of the foreign country ►HK  See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
ā	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Νo
b	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		
a	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		Νo
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		Νo
	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	Yes	
a	If "Yes," 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		Νo
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Νo
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7h		
3	<b>Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.</b> 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		
0	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			
.1	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 )			
l2a	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   12b			

20 MAIN STREET EXETER, NH 038332460

(603) 777-3634

**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.

Se	ection A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body 1a 19			
ь	Enter the number of voting members that are independent . 18			
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		Νο
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		Νο
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		Νο
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		Νo
6	Does the organization have members or stockholders?	6		Νο
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a		No
ь	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		Νο
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
ь		8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the	85	163	
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		Νo
	ection B. Policies (This Section B requests information about policies not required by the Internal			
Re	evenue Code.)			
			Yes	No
	Does the organization have local chapters, branches, or affiliates?	10a		Νο
	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?	10b		
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11	Yes	
11A	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	Yes	
Ь	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c	Yes	
13	Does the organization have a written whistleblower policy?	13	Yes	
14	Does the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Yes	
	Other officers or key employees of the organization	15b	Yes	
	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 similar arrangement with a taxable entity during the year?	16a		Νο
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?			
		16b		
	Let the States with which a copy of this Form 200 is required to be filed. NH			
17	List the States with which a copy of this Form 990 is required to be filed NH  Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c))			
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you make these available. Check all that apply own website. Another's website. Upon request			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public. See Additional Data Table			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the	ne orga	nızatıor	n 🕨
	KATHLEEN M TAYLOR			

# 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 i	not compen	sate any	y curi	rent	or fo	rmer	ffice	r, dırector, trustee	or key employee	
<b>(A)</b> Name and Title	(B) Average hours	<b>(C)</b> Position (check all that apply)						(D) Reportable compensation	<b>(E)</b> Reportable compensation	<b>(F)</b> 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
See add'l data										

2	Total number of individuals (including but not limited to those listed above) who received more than
	\$100,000 in reportable compensation from the organization▶28

			Yes	No
3	Did the organization list any <b>former</b> officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>	3	Yes	
4	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	4	Yes	
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	5	165	No

### **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	(B) Description of services	<b>(C)</b> Compensation
HARVEY CONSTRUCTION CONTRACTORS 10 HARVEY ROAD BEDFORD, NH 03110	CONTRACT SERVICES	1,122,900
Rist-Frost-Shumway Engineering 71 Water Street LACONIA, NH 03246	Engineering Serv	778,566
LINDSAY GOLDBERG 630 5TH AVE 30TH FLOOR NEW YORK, NY 10111	INVESTMENT MGMT	247,272
Hintz Holman Robillard 400 Connell Dr Suite 5100 BERKELEY HEIGHTS, NJ 07922	INVESTMENT MGMT	864,352
ARC 5 Cambridge Center CAMBRIDGE, MA 02142	Architectural Serv	593,453
2 Total number of independent contractors (including but not limited to those listed above) \$100,000 in compensation from the organization ►25	) who received more than	

Page 8

499,934

77,951,080

47,466,096

-3,200,987

	990 (2009)				Page <b>10</b>
Par	t IX Statement of Functional Expenses				
Δ	Section 501(c)(3) and 501(c)(4) organizations m Il other organizations must complete column (A) but are not required to			(D)	
Do n	ot include amounts reported on lines 6b, b, 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	0	0		· ·
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22	18,328,074	18,328,074		
3	Grants and other assistance to governments, organizations, and individuals outside the U S See Part IV, lines 15 and 16	0	0		
4	Benefits paid to or for members	0	0		
5	Compensation of current officers, directors, trustees, and key employees	651,705	230,983	343,728	76,994
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$ ) and persons described in section $4958(c)(3)(B)$	0	0	0	0
7	Other salaries and wages	32,274,803	27,474,158	1,614,772	3,185,873
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	3,999,023	3,476,348	170,004	352,671
9	Other employee benefits	5,796,018	4,934,735	301,718	559,565
10	Payroll taxes	2,289,677	1,954,773	108,930	225,974
11	Fees for services (non-employees)				
а	Management	0	0	0	0
Ь	Legal	294,814	0	294,814	0
С	Accounting	185,607	0	185,607	0
d	Lobbying	0	0	0	0
е	Professional fundraising See Part IV, line 17	0			0
f	Investment management fees	234,135	0	234,135	0
g	Other	1,549,792	1,150,317	208,320	191,155
12	Advertising and promotion	388,815	323,463	5,733	59,619
13	Office expenses	1,649,235	1,364,850	120,992	163,393
14	Information technology	724,535	629,233	47,754	47,548
15	Royalties	0	0	0	0
16	Occupancy	5,521,643	5,348,921	104,673	68,049
17	Travel	744,903	485,320	16,173	243,410
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0	0	0	0
19	Conferences, conventions, and meetings	751,953	417,102	148,659	186,192
20	Interest	1,971,985	1,912,012	36,351	23,622
21	Payments to affiliates	0	0	0	0
22	Depreciation, depletion, and amortization	6,876,570	6,651,982	136,128	88,460
23	Insurance	550,876	269,389	253,068	28,419
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	STUDENT RELATED EXPENSES	2,408,433	2,284,135	105,585	18,713
b		1,498,105	1,498,105	· ·	0
c	PLANT RELATED ACTIVITIES	945,218	914,347	18,712	12,159
d	MISCELLANEOUS EXPENSES	120,464	12,529	97,313	10,622
e					
f	All other expenses				
25	Total functional expenses. Add lines 1 through 24f	89,756,383	79,660,776	4,553,169	5,542,438
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				rm <b>990</b> (2009)

Pa	rt X	Balance Sheet							
					<b>(A)</b> Beginning of year		(B) End of year		
	1	Cash—non-interest-bearing			10,979,741	1	9,339,096		
	2	Savings and temporary cash investments			55,254,410	2	120,293,228		
	3	Pledges and grants receivable, net			69,655,775	3	49,961,606		
	4	Accounts receivable, net			333,714	4	322,923		
	5	Receivables from current and former officers, directors, trusted highest compensated employees Complete Part II of	es, key	y employees, and					
		Schedule L			101,950	5	84,123		
	6	Receivables from other disqualified persons (as defined under persons described in section $4958(c)(3)(B)$ Complete Part II		n 4958(f)(1)) and					
		Schedule L				6			
ssets	7	Notes and loans receivable, net			388,846	7	204,812		
SS	8	Inventories for sale or use			515,294	8	487,684		
⋖	9	Prepaid expenses and deferred charges			3,061,423	9	2,217,685		
	10a	Land, buildings, and equipment cost or other basis <i>Complete Part VI of Schedule D</i>	10a	267,822,812					
	ь	Less accumulated depreciation	10b	91,547,376	170,060,110	<b>10</b> c	176,275,436		
	11	Investments—publicly traded securities			261,222,455	11	116,237,125		
	12	Investments—other securities See Part IV, line 11			602,318,140	12	654,819,261		
	13	Investments—program-related See Part IV, line 11			13				
	14	Intangible assets			14				
	15	Other assets See Part IV, line 11			33,900,818	15	49,196,163		
	16	Total assets. Add lines 1 through 15 (must equal line 34) .			1,207,792,676	16	1,179,439,142		
	17	Accounts payable and accrued expenses .			20,133,917	17	5,054,723		
	18	Grants payable		18					
	19	Deferred revenue	red revenue						
	20	Tax-exempt bond liabilities		50,000,000	20	50,000,000			
jes	21	Escrow or custodial account liability Complete Part IV of Schedu			21				
Liabilities	22	Payables to current and former officers, directors, trustees, ke employees, highest compensated employees, and disqualified							
217		persons Complete Part II of Schedule L				22			
	23	Secured mortgages and notes payable to unrelated third partie	es .			23			
	24	Unsecured notes and loans payable to unrelated third parties				24			
	25	Other liabilities Complete Part X of Schedule D			91,660,361	25	60,225,651		
	26	Total liabilities. Add lines 17 through 25			180,920,244	26	130,250,588		
φ		Organizations that follow SFAS 117, check here ► $\sqrt{}$ and combined through 29, and lines 33 and 34.	nplet e	lines 27					
nc	27	Unrestricted net assets			269,465,464	27	233,605,198		
Fund Balance	28	Temporarily restricted net assets			456,068,548	28	506,881,138		
d E	29	Permanently restricted net assets							
un		Organizations that do not follow SFAS 117, check here ▶ □ a	and cor	mplet e		29			
or F		lines 30 through 34.							
	30	Capital stock or trust principal, or current funds				30			
Assets	31	Paid-in or capital surplus, or land, building or equipment fund				31			
As	32	Retained earnings, endowment, accumulated income, or other	funds			32			
Net	33	Total net assets or fund balances			1,026,872,432	33	1,049,188,554		
_	34	Total liabilities and net assets/fund balances			1,207,792,676	34	1,179,439,142		
. —									

### 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		Νo
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			
3а	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		No
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. 1545-004

OMB No 1545-0047

2009

Open to Public Inspection

### **SCHEDULE A**

(Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service

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

**Public Charity Status and Public Support** 

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

Name of the organization Phillips Exeter Academy

02-0222174

Pa	rt I	Reas	on for Pul	blic Charity Stat	us (All org	anızatıons	must comp	olete this pai	rt.) See inst	ructions				
The	rganı			e foundation because										
1	Γ	A churc	h, conventio	on of churches, or as	sociation of	churches :	section 170(b	)(1)(A)(i).						
2	<u>~</u>	A schoo	ol described	ın <b>section 170(b)(1</b> )	<b>(A)(ii).</b> (Att	tach Sched	ule E )							
3	$\sqcap$	A hospi	tal or a coop	perative hospital serv	vice organiz	atıon descr	ıbed ın <b>sectio</b>	n 170(b)(1)(A	۸)(iii).					
4	Γ			organization operate cy, and state	ed in conjund	ction with a	hospital desc	cribed in <b>secti</b>	on 170(b)(1)	<b>(A)(iii).</b> En	ter the			
5	Γ	-	•	erated for the benefit A)(iv). (Complete Pa	•	or universi	ty owned or o	perated by a g	jovernmental	unıt descri	bed in			
6	$\sqcap$	A feder	al, state, or	local government or	government	al unit desc	rıbed ın <b>secti</b>	on 170(b)(1)(	A)(v).					
7	Γ	describ	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)											
8	Г			described in <b>section</b>		<b>A)(vi)</b> (Cor	mplete Part II	: )						
9	Ė								tions, membe	rship fees,	and gross			
	·	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												
		ıts supp	ort from gro	ss investment incom	ne and unrel	ated busine	ss taxable ın	come (less se	ction 511 tax	x) from bus	inesses			
		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 <b>section 509(a)(2).</b> (Complete Part III )												
10	Γ	An organization organized and operated exclusively to test for public safety Seesection 509(a)(4).												
11	Γ	one or r	nore publicly	anized and operated y supported organiza pes the type of suppo <b>b</b> Type II	tions descri orting organi	bed in sect zation and	ion 509(a)(1)	) or section 50 s 11e through	9(a)(2) See	section 50				
e	Γ	other th		ox, I certify that the con managers and oth										
f g		check t	hıs box	eceived a written de						supporting	organization,			
9		followin	g persons?	ectly or indirectly co				•			Yes No			
				governing body of the		_	ation?			11g(i	<del></del>			
			•	r of a person describ	• • •					11g(i	<del></del>			
_				ed entity of a person						11g(ii	i)			
h 		Provide	the followin	g information about t	the supporte	d organizat	ion(s)							
<b>(i</b> Nam suppo organi		e of rted	(iii) Type of organization (ii) (described on EIN lines 1- 9 above or IRC section		Is th organizat col (i) lis your gove	(iv)  Is the organization in col (i) listed in your governing document?		) otify the ition in of your ort?	(vi) Is the organizati col (i) orga	on in anized	(vii) A mount of support?			
				(see instructions))	Yes	No	Yes	No	Yes	No				
						1								
Tota				I										

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>(b)</b> 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
	ın)	(a) 2005	( <b>b)</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) <b>Dublic Support</b> Subtract line F from						
6	<b>Public Support.</b> Subtract line 5 from line 4						
S	ection B. Total Support	1		-			
	endar year (or fiscal year beginning	(a) 2005	<b>(b)</b> 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
	ın)	(a) 2005	( <b>b</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 <b>stop here</b>						-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
<b></b>	and <b>stop here.</b> The organization qua	-		·	IIIIC 14 13 33 1/3/	o or more, ence	<b>▶</b> □
ь	33 1/3% support test—2008. If the				5a, and line 15 is	33 1/3% or moi	
	box and <b>stop here.</b> The organization				,		▶
17a	10%-facts-and-circumstances test-	<b>-2009.</b> 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						<b>▶</b> ┌
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			<u> </u>	1	T	ı
Cale	ndar year (or fiscal year beginning in)	(a) 2005	<b>(b)</b> 2006	(c) 2007	( <b>d)</b> 2008	(e) 2009	<b>(f)</b> 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>(b)</b> 2006	<b>(c)</b> 2007	( <b>d)</b> 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						
	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 <b>stop here</b>	or the organizat		., 4,	men tax your as t	(c)(c) c.gu.	<b>▶</b> ┌
	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	<b>009</b> (line 10c c	olumn (f) dıvıded	by line 13 columi	n (f))	17	
18	Investment income percentage from	<b>2008</b> 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 <b>stop here.</b> 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

Software ID: Software Version:

**EIN:** 02-0222174

Name: Phillips Exeter Academy

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

Compensated Employees, and	Independ	ent Co	ontr	act	ors					
(A) Name and Title	(B) Average hours per	rage Position (check all urs that apply)						(D) Reportable compensation from the	<b>(E)</b> Reportable compensation from related	<b>(F)</b> Estimated amount of other compensation
	week	individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)	from the organization and related organizations
DAVID O BEIM TRUSTEE	2 0	х						0	0	0
LEIGH A BONNEY TRUSTEE	2 0	Х						0	0	0
JOHN R ETTINGER TRUSTEE	2 0	Х						0	0	0
MARC CHOPIN DE LA BRUYERE TRUSTEE	2 0	Х						0	0	0
J DOUGLAS SMITH TRUSTEE	2 0	Х						0	0	0
ROBERT A HO TRUSTEE	2 0	Х						0	0	0
G THOMPSON HUTTON PRESIDENT / TRUSTEE	2 0	Х						0	0	0
ALAN R JONES TRUSTEE	2 0	Х						0	0	0
NINA D RUSSELL MD TRUSTEE	2 0	Х						0	0	0
EUNICE JOHNSON PANETTA TRUSTEE	2 0	Х						0	0	0
WILLIAM K RAWSON TRUSTEE	2 0	Х						0	0	0
FLOBELLE BURDEN DAVIS TRUSTEE	2 0	Х						0	0	0
JOHN A DOWNER TRUSTEE	2 0	Х						0	0	0
MONICA J SHELTON REUSCH TRUSTEE	2 0	Х						0	0	0
REMY WHITE TRAFELET trustee	2 0	Х						0	0	0
JONATHAN W GALASSI trustee	2 0	Х						0	0	0
SALLY JUTABHA MICHAELS TRUSTEE	2 0	Х						0	0	0
ROBERT S SILBERMAN TRUSTEE	2 0	Х						0	0	0
THOMAS E HASSAN PRINCIPAL	38 0	Х		х				224,371	0	115,868
JO SEPH E FELLO WS cfo	38 0			X				232,124	0	49,547
JAMES M THEISEN DIR ALUMNI AFFAIRS & DEV	38 0					Х		250,124	0	46,018
WILLIAM C DAVISON DIR MAJOR GIFTS AA&D	38 0					Х		193,914	0	39,020
EDWARD W PROBERT CAMPAIGN DIRECTOR AA&D	38 0					х		183,767	0	71,029
JAY H MARTIN DIR OF TECHNOLOGY SERVICES	38 0					х		144,372	0	36,041
ROGER F WAKEMAN DIRECTOR FACILITIES MGMT	38 0					х		142,189	0	77,601

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

<b>(A)</b> Name and Title	( <b>B</b> ) A verage hours	1	<b>(C)</b> Position (check all that apply)				<b>(D)</b> Reportable compensation	<b>(E)</b> Reportable compensation	<b>(F)</b> 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
TYLER C TINGLEY FORMER PRINCIPAL	38 0						х	700,443	0	64,810

DLN: 93493136054511

OMB No 1545-0047

### **SCHEDULE C**

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

For Organizations Exempt From Income Tax Under section 501(c) and section 527 ► Complete if the organization is described below.

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

**Political Campaign and Lobbying Activities** 

Open to Public Inspection

If the organization answered "Yes," to Form 990, Part IV, Line 3, or Form 990-EZ, Part VI, line 46 (Political Campaign Activities),

- ◆ Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C
- ◆ Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B
- Section 527 organizations Complete Part I-A only

If the organization answered "Yes," to Form 990, Part IV, Line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

\* Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A. Do not complete Part II-B.

lf th	ection 501(c)(3) organizations that	t have filed Form 5768 (election this t have NOT filed Form 5768 (election s," to Form 990, Part IV, Line 5 zations Complete Part III	on under section 501	(h)) Complete Part II-B Do n	ot complete Part II-A
Na	me of the organization			Employer iden	tification number
Phi	llips Exeter Academy			02-0222174	
Par	t I-A Complete if the or	ganization is exempt und	er section 501(		organization.
1	-	ganization's direct and indirect po		_	
2	·	gamzation s unect and munect po	ontical campaign ac	LIVILIES III FAIL IV	•
3	Political expenditures  Volunteer hours			•	\$
•	volunteer nours				
Par	t I-B Complete if the or	ganization is exempt und	er section 501(	c)(3).	
1	Enter the amount of any excise	e tax incurred by the organization	under section 495!	5 <b>•</b>	\$
2	Enter the amount of any excise	e tax incurred by organization ma	nagers under sectio	n 4955 🕨	\$
3	If the organization incurred a s	ection 4955 tax, did it file Form	4720 for this year?		┌ Yes ┌ No
4a	Was a correction made?				┌ Yes ┌ No
b	If "Yes," describe in Part IV				
Par	t I-C Complete if the or	ganization is exempt und	er section 501(	c) except section 501	L(c)(3).
1	Enter the amount directly expe	ended by the filing organization fo	r section 527 exem	pt function activities 🕨	\$
2	Enter the amount of the filing of exempt funtion activities	rganization's funds contributed t	o other organization	s for section 527	<b>*</b>
	•				<b>&gt;</b>
3	Total exempt function expendi	tures Add lines 1 and 2 Enter ho	ere and on Form 112	20-POL, line 17b	\$
4	Did the filing organization file <b>I</b>	Form 1120-POL for this year?			┌ Yes ┌ No
5	were made For each organizat contributions received that we	nd employer identification numbe ion listed, enter the amount paid re promptly and directly delivered iittee (PAC) If additional space i	from the filing organ d to a separate polit	ızatıon's funds Also enter t ıcal organızatıon, such as a	he amount of political
	(a) Name	( <b>b)</b> Address	(c) EIN	(d) A mount paid from filing organization's funds If none, enter -0-	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-

e Grassroots ceiling amount (150% of line 2d, column (e))

**f** Grassroots lobbying expenditures

Pa	rt II-A Complete if the organization under section 501(h)).	is exempt under	section 501(c	)(3) and file	d Form 5768	(election
	Check   If the filing organization belongs to a Check   If the filing organization checked box		d" provisions apply	,		
<u> </u>	Limits on Lobbying E  (The term "expenditures" means ar	Expenditures			(a) Filing Organization's Totals	(b) Affiliated Group Totals
1a	Total lobbying expenditures to influence public o	ppinion (grass roots lob	bying)			
b	Total lobbying expenditures to influence a legisla	ative body (direct lobby	yıng)			
c	Total lobbying expenditures (add lines 1a and 18	b)				
d	Other exempt purpose expenditures					
e	Total exempt purpose expenditures (add lines 1	c and 1d)				
f	Lobbying nontaxable amount Enter the amount f	from the following table	ın both			
	If the amount on line 1e, column (a) or (b) is: Not over \$500,000					
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the	e excess over \$500,00	0		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the	e excess over \$1,000,0	000		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the	excess over \$1,500,00	00		
	Over \$17,000,000					
		•				
g	Grassroots nontaxable amount (enter 25% of lin	ne 1 f)				
h	Subtract line 1g from line 1a If zero or less, enter	er -0-				
i	Subtract line 1f from line 1c If zero or less, ente	er - 0 -				
j	If there is an amount other than zero on either line section 4911 tax for this year?	ne 1h or line 1ı, did the	organization file F	orm 4720 repoi	rtıng	┌ Yes ┌ No
	(Some organizations that made a columns below. See the	he instructions fo	ection do not l r lines 2a thro	nave to com ugh 2f on pa		ne five
	Lobbying Exp	enditures During	4-Year Averag	ing Period	I	ı
	Calendar year (or fiscal year beginning in)	(a) 2006	<b>(b)</b> 2007	<b>(c)</b> 2008	( <b>d)</b> 2009	<b>(e)</b> Total
2a	Lobbying non-taxable amount					
b	Lobbying ceiling amount (150% of line 2a, column(e))					
c	Total lobbying expenditures					
d	Grassroots non-taxable amount					

Part II-B	Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768
	(election under section 501(h)).

			a <i>)</i>	(D)
		Yes	No	A mount
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of			
а	Volunteers?		No	
Ь	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?		Νo	
c	Media advertisements?		Νo	
d	Mailings to members, legislators, or the public?		Νo	
e	Publications, or published or broadcast statements?		Νo	
f	Grants to other organizations for lobbying purposes?		Νo	
g	Direct contact with legislators, their staffs, government officials, or a legislative body?		Νo	
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		Νo	
i	Other activities? If "Yes," describe in Part IV	Yes		82,917
j	Total lines 1c through 1:			82,917
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			
b	If "Yes," enter the amount of any tax incurred under section 4912			
c	If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

# Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

			Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?	1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?	2		
3	Did the organization agree to carryover lobbying and political expenditures from the prior year?	3		

# Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, line 3 is answered "Yes". 1 Dues, assessments and similar amounts from members

2	Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
а	Current year	2a	
b	Carryover from last year	2b	
c	Total	2c	
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4	
5	Taxable amount of lobbying and political expenditures (see instructions)	5	

### Part IV Supplemental Information

Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, and Part II-B, line 1, Also, complete this part for any additional information

<b>Ident if ier</b>	Return Reference	Explanation
LOBBYING ACTIVITIES		PHILLIPS EXETER ACADEMY IS A MEMBER OF NAIS, AISNE, NACUFS, ISANNE, NACUBO, CASE, THE NE AND AMERICAN ASSOCIATION OF SCHOOLS & COLLEGES, THE NATIONAL BUSINESS OFFICERS ASSOCIATION, AHISA, APPA, INTERNATIONAL ASSOCIATION OF CHIEFS OF POLICE, SOCIETY FOR COLLEGES & UNIVERSITIES, A BETTER CHANCE, SSATB, NACAC, COLLEGE BOARD, NAFSA, AMERICAN PR ASSOCIATION, COUNCIL FOR SPIRITUAL & ETHICAL EDUCATION, ABOPS, WOMEN IN DEVELOPMENT & NEDRA WHICH MAY USE A PORTION OF MEMBERSHIP DUES TO LOBBY ON BEHALF OF ITS MEMBERS TOTAL DUES PAID TO THESE ORGANIZATIONS FROM 7/1/09 TO 6/30/10 WAS \$82,917 THE PORTION OF MEMBERSHIP DUES ALLOCATED TO LOBBYING ACTIVITIES BY THESE ORGANIZATIONS IS NOT DETERMINABLE

efile GRAPHIC print - DO NOT PROCESS

As Filed Data

DLN: 93493136054511

OMB No 1545-0047

Department of the Treasury

SCHEDULE D (Form 990)

### **Supplemental Financial Statements**

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

Open to Public Inspection

Internal Revenue Service ► Attach to Form 990. ► See separate instructions. Name of the organization **Employer identification number** Phillips Exeter Academy 02-0222174 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 (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

Revenues included in Form 990, Part VIII, line 1

Assets included in Form 990, Part X

1a Land	Par	<b>444</b> Organizations Maintaining Co	<u>llections of Art, </u>	, Hist	torical Tre	asure	s, or Oth	<u>er Simila</u>	r Asse	ets (co	ntınued)
b   F   Scholarly research   e   Other    c   F   Preservation for future generations    4   Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV    5   During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?   F   Yes    1   Part XIV   Secrow and Custodial Arrangements. Complete if the organization's collection?   F   Yes    Part XIV   Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part X, line 21.    1   Is the organization an agent, frustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X, line 21.    1   If Yes, "explain the arrangement in Part XIV and complete the following table     Amount      1	3		r records, check any	ofth	e following th	at are a	sıgnıfıcant	use of its co	ollectio	n	
to P Preservation for future generations 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV 5 During the year, did the organization solicit or receive donations of art, historical treasures or other similar asserts to be solid to race funds a rather than to be maintained as part of the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.  1a Is the organization an agent in Part XIV and complete the following table 1 If "Yes," explain the arrangement in Part XIV and complete the following table 1 If "Yes," explain the arrangement in Part XIV and complete the following table 2 Distributions during the year 3 If Seleginning balance 4 Additions during the year 5 If "Yes," explain the arrangement in Part XIV 2 Did the organization include an amount on Form 990, Part X, line 21? 3 If "Yes," explain the arrangement in Part XIV 4 Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.  1a Beginning of year balance 2 Did the organization include an amount on Form 990, Part X, line 21? 3 Did the organization include an amount on Form 990, Part X, line 21? 4 Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.  1a Beginning of year balance 5 0,50,90,5890 1,101,532,1860 1,000,752,7	а	Public exhibition		d	☐ Loan or	exchan	ige program	ıs			
4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV  During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.  Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?  If "Yes," explain the arrangement in Part XIV and complete the following table  C Beginning balance  4 Additions during the year  Ending balance  2 Distributions during the year  Finding balance  3 If "Yes," explain the arrangement in Part XIV  Fore the forganization include an amount on Form 990, Part X, line 21?  Yes  If "Yes," explain the arrangement in Part XIV  Findowment Funds, Complete if the organization answered "Yes" to Form 990, Part IV, line 10.  1a Beginning of year balance  9 (969-589) 1, 10, 15, 32, 186 (9) (10) (10) (10) (10) (10) (10) (10) (10	ь	Scholarly research		e	┌ Other						
Part XIV  5 During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?	С	Preservation for future generations									
assets to be sold to raise funds rather than to be maintained as part of the organization's collection?	4		ollections and explai	ın how	they further	the orga	anızatıon's e	exempt purp	ose in		
Tal. Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?  If "Yes," explain the arrangement in Part XIV and complete the following table  If "Yes," explain the arrangement in Part XIV and complete the following table  Additions during the year  Additions during the year  Additions during the year  Beginning balance  It  In  In  In  In  In  In  In  In  In	5	- · · · · · · · · · · · · · · · · · · ·			•			mılar	V	Yes	┌ No
Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?    Fives	Par						nswered "	Yes" to Fo	rm 990	),	
Included on Form 990, Part X?   Yes   Tyes, "explain the arrangement in Part XIV and complete the following table		· · · · ·		•	•						
b If "Yes," explain the arrangement in Part XIV and complete the following table    Complete   Comp	la		ian or other interme	diary	for contributi	ons or o	therassets	not	Г	Yes	Г No
Mathematical Part   Math	ь		√ and complete the f	followi	ing table						
Moditions during the year   1			·		-				A mou	ınt	
Distributions during the year    Tending balance   Did the organization include an amount on Form 990, Part X, line 21?   Yes	c	Beginning balance					1c				
If	d	Additions during the year					1d				
Did the organization include an amount on Form 990, Part X, line 21?  Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.  (a) Current Year (b) Prior Year (c) Two Years Back (d) Three Years Back (e) Four Year (b) Prior Year (c) Two Years Back (d) Three Years Back (e) Four Yea	e	Distributions during the year					1e				
Did the organization include an amount on Form 990, Part X, line 21?  Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.  (a) Current Year (b) Prior Year (c) Two Years Back (d) Three Years Back (e) Four Years Back (e)	f	Ending balance					1f				
b If "Yes," explain the arrangement in Part XIV  Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.  (a) (unrent Year (b) Prior Year (c) Two Years Back (d) Three Years Back (e) Four Years (e) Four Years Back Years Back Years And Years An	2a		orm 990, Part X, line	21?					Г	Yes	┌ No
Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.    Calcurrent Year   (b)Prior Year   (c)Two Years Back   (d)Three Years Back   (e)Four Years Back   (d)Three Years Back	ь	-	,						·		
Beginning of year balance				ans	wered "Yes'						
b Contributions				(b	•		Years Back	(d)Three Years	Back (	Four Y	ears Back
c Investment earnings or losses	1a	Beginning of year balance				-					
d Grants or scholarships	b										
the Other expenditures for facilities and programs	С				-164,670,238						
and programs	d	·			42.620.640						
## Administrative expenses	е	·	24,/31,868		42,638,649						
g End of year balance	f		234,135		236,426						
a Board designated or quasi-endowment ▶ 71.000 %  b Permanent endowment ▶ 71.000 %  c Term endowment ▶ 10.000 %  3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by  (i) unrelated organizations	g		936,598,421		916,995,589						
a Board designated or quasi-endowment ▶ 71.000 %  b Permanent endowment ▶ 71.000 %  c Term endowment ▶ 10.000 %  3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by  (i) unrelated organizations	2	Provide the estimated percentage of the yea	r end balance held a	ıs					<u> </u>		
b Permanent endowment 10.000 %  C Term endowment 10.000 %  Are there endowment funds not in the possession of the organization that are held and administered for the organization by  (i) unrelated organizations	а										
Term endowment  10.000 %  Are there endowment funds not in the possession of the organization that are held and administered for the organization by  (i) unrelated organizations	_										
Are there endowment funds not in the possession of the organization that are held and administered for the organization by  (i) unrelated organizations											
organization by (i) unrelated organizations			ssion of the organiza	ation t	hat are held a	and adm	iinistered fo	r the			
(ii) related organizations			•							Yes	No
b If "Yes" to 3a(II), are the related organizations listed as required on Schedule R? 3b  4 Describe in Part XIV the intended uses of the organization's endowment funds  Part VI Investments—Land, Buildings, and Equipment. See Form 990, Part X, line 10.  Description of investment  (a) Cost or other basis (investment)  (b) Cost or other basis (other)  (c) Accumulated depreciation (d) Boo buildings		(i) unrelated organizations								Yes	
Describe in Part XIV the intended uses of the organization's endowment funds  Part VI Investments—Land, Buildings, and Equipment. See Form 990, Part X, line 10.  Description of investment  (a) Cost or other basis (investment)  (b) Cost or other basis (other)  (c) Accumulated depreciation  (d) Boo 2,557,694  2 233,033,414  75,140,977  157  c Leasehold improvements											N o
Part VI Investments—Land, Buildings, and Equipment. See Form 990, Part X, line 10.  Description of investment (a) Cost or other basis (investment) (b) Cost or other basis (other) (c) Accumulated depreciation (d) Boo 2,557,694 2  b Buildings			•						3Б		
Description of investment  (a) Cost or other basis (investment)  (b) Cost or other basis (other)  (c) Accumulated depreciation  2,557,694  233,033,414  75,140,977  157  c Leasehold improvements						Λ Part	X line 10				
<b>b</b> Buildings			y una Equipme.		(a) Cost or oth	her (b)	Cost or other	(c) Accumu		( <b>d</b> ) Boo	k value
<b>b</b> Buildings	1a	Land					2,557.69	4			2,557,694
c Leasehold improvements						-			10,977		7,892,437
		•					, :=,:=	1 - , =			. ,.2.
<b>d</b> Equipment   19,467,005   16,406,399   3		Equipment					19,467,00	5 16,40	06,399		3,060,606
								·			2,764,699

176,275,436

Part VIII Investments—Other Securities. See F	<u>form 990, Part X, line 12.</u>	
<ul><li>(a) Description of security or category</li><li>(including name of security)</li></ul>	( <b>b</b> )Book value	<b>(c)</b> Method of valuation Cost or end-of-year market value
Financial derivatives		
Closely-held equity interests		
Other		
US EQUITIES	13,785,846	F
GLOBAL EX U S EQUITIES	17,872,130	F
ABSOLUTE RETURN & LONG /SHORT	453,113,148	F
A SOCIO LE REFORM A ZONO FONO KI	133,113,110	·
PRIVATE EQUITY & REAL ASSETS	161,292,950	F
OTHER	8,755,187	F
Total. (Column (b) should equal Form 990, Part X, col (B) line 12 )	654,819,261	
Part VIII Investments—Program Related. See	Form 990, Part X, line 13	
(a) Description of investment type	( <b>b)</b> Book value	<b>(c)</b> Method of valuation Cost or end-of-year market value
		Cost of the of year market value
Total. (Column (b) should equal Form 990, Part X, col (B) line 13 )		
Part IX Other Assets. See Form 990, Part X, line (a) Descript		(b) Book value
(a) bescript		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 15		
Part X Other Liabilities. See Form 990, Part X,  (a) Description of Liability	, line 25. (b) A mount	
Federal Income Taxes	(B) A mount	
ANNUITIES & DEFERRED GIVING AR	29,366,954	
ASSET RETIREMENT OBLIGATION	4,269,662	
BOND INTEREST RATE SWAP	9,407,128	
FUNDS FOR STUDENT ORGANIZATION	234,137	
PENSION AND OTHER EMPLOYMENT RELATED	16,947,770	
Total. (Column (b) should equal Form 990, Part X, col (B) line 25 ) ▶	60,225,651	

2	Total evanage (Form 000 Bort IV column (A) line 25)		
~	Total expenses (Form 990, Part IX, column (A), line 25)	2	89,756,383
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	-11,805,303
4	Net unrealized gains (losses) on investments	4	38,750,761
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	-4,629,343
9	Total adjustments (net) Add lines 4 - 8	9	34,121,418
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	22,316,115
Part		er Re	turn
1	Total revenue, gains, and other support per audited financial statements	1	117,969,807
2	A mounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments		
b	Donated services and use of facilities		
c	Recoveries of prior year grants		
d	Other (Describe in Part XIV)		
e	Add lines <b>2a</b> through <b>2d</b>	2e	41,614,503
3	Subtract line <b>2e</b> from line <b>1</b>	3	76,355,304
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 234,135		
b	Other (Describe in Part XIV) 4b 1,361,641		
C	Add lines <b>4a</b> and <b>4b</b>	4c	1,595,776
5	Total Revenue Add lines <b>3</b> and <b>4c.</b> (This should equal Form 990, Part I, line 12)	5	77,951,080
	<b>XIII</b> Reconciliation of Expenses per Audited Financial Statements With Expenses	per	
1	Total expenses and losses per audited financial statements	1 1	95,653,691
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities		
b	Prior year adjustments		
c	Other losses		
d	Other (Describe in Part XIV)	1	
e	Add lines 2a through 2d	2e	7,003,919
3	Subtract line <b>2e</b> from line <b>1</b>	3	88,649,772
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 234,135		
b	Other (Describe in Part XIV) 4b 872,476	]	
c	Add lines <b>4a</b> and <b>4b</b>	4c	1,106,611
5	Total expenses Add lines <b>3</b> and <b>4c.</b> (This should equal Form 990, Part I, line 18)	5	89,756,383

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

Ident if ier	Return Reference	Explanation
Schedule D - Supplemental Information		THE ACADEMY'S COLLECTIONS INCLUDE WORKS OF ART, LITERARY WORKS, HISTORICAL TREASURES, AND ARTIFACTS THESE COLLECTIONS ARE PROTECTED AND PRESERVED FOR PUBLIC EXHIBITION, EDUCATION, RESEARCH, AND FURTHERANCE OF PUBLIC SERVICE THE COLLECTIONS, WHICH WERE ACQUIRED THROUGH PURCHASES AND CONTRIBUTIONS SINCE THE ACADEMY'S INCEPTION, ARE NOT RECOGNIZED AS ASSETS IN THE STATEMENT OF FINANCIAL POSITION FORM 990, SCHEDULE D, PART III, LINE 4 The Academy has books, paintings and other items with historical significance that are held for study and observation by our students and faculty These objects are preserved so that they may provide educational experience to future generations of students and adults in the campus community. FORM 990, SCHEDULE D, PART V, LINE 4 PHILLIPS EXETER ACADEMY'S ENDOWED FUNDS ARE INVESTED INTO PERPETUITY AND THE INCOME IS USED TO FUND ACADEMY PROGRAMS THE FUNDS ARE INVESTED FOR LONG TERM GROWTH SO THAT CURRENT AND FUTURE GENERATIONS OF STUDENTS WILL RECEIVE BENEFIT FROM THE FUNDS FORM 990, SCHEDULE D, PART X - FIN 48 THE ACADEMY IS A TAX-EXEMPT ORGANIZATION ACCORDING TO THE INTERNAL REVENUE CODE SECTION 501(C)(3) THE ACADEMY FOR CONTINENT ORGANIZATION ACCORDING TO THE INTERNAL REVENUE CODE SECTION 501(C)(3) THE ACADEMY FOR INTERNAL REVENUE CODE SECTION 501(C)(3) THE ACADEMY FOR THE ACADEMY HAT PORTION OF AN UNCERTAIN TAX POSITION THAT IS "MORE LIKELY THAN NOT" TO BE SUSTAINED UNDER EXAMINATION BY TAX AUTHORITIES THE ADOPTION OF FIN 48 HAS HAD NO IMPACT ON THE ACADEMY'S FORM 990, SCHEDULE D, Part XII, Line 8 Other changes in Net Assets Change in value in funds held for deferred giving \$ 2,273,340 Pension related charges other than net periodic pension cost \$ (3,266,791) Interest rate swap adjustment \$ (3,737,128) Gain on sale of painting \$ (100,000) MISCELLANEOUS \$ 201,236 TOTAL \$ (4,629,343) FORM 990, SCHEDULE D, Part XII, Line 2D Pension related charges other than net periodic pension cost \$ (3,266,791) Interest rate swap adjustment \$ (3,737,128) Gain on sale of painting \$ 100,000 Total \$ 1,36

208,180 Total \$ 872,476

Employer identification number

### **SCHEDULE E**

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Phillips Exeter Academy

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

	02-0222174			
			YES	NO
1	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?	1	Yes	
2	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	2	Yes	
3	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe If "No,"			
	please explain	3	Yes	
	THE POLICY IS EXPLAINED TO ALL CANDIDATES UPON APPLYING TO THE ACADEMY AND TO GUIDANCE COUNSELORS OF SCHOOLS THROUGHOUT THE COUNTRY BY MEANS OF THE ACADEMY APPLICATION FORM AND WEBSITE			
4	Does the organization maintain the following?			
а	Records indicating the racial composition of the student body, faculty, and administrative staff?	4a	Yes	
Ь	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	4b	Yes	
С	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	4c	Yes	
d	Copies of all material used by the organization or on its behalf to solicit contributions?	4d	Yes	
	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 Students' rights or privileges?	5a		Νo
Ь	Admissions policies?	5b		Νo
С	Employment of faculty or administrative staff?	5с		Νo
d	Scholarships or other financial assistance?	5d		Νo
е	Educational policies?	5e		Νo
f	Use of facilities?	5f		Νo
g	Athletic programs?	5g		Νo
h	Other extracurricular activities?	5h		Νo
6a	If you answered "Yes" to any of the above, please explain If you need more space, use Schedule O (Form 990)  Does the organization receive any financial aid or assistance from a governmental agency?	- - 6a	Yes	
b	Has the organization's right to such aid ever been revoked or suspended?	6b		Νo
7	If you answered "Yes" to either line 6a or line 6b, explain on Schedule O (Form 990) #  Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05  of Pay Proc. 75, 50, 1075, 3 C.R. 587, covering region producer minerten? If "No." explain on Schedule O (Form			
	of Rev Proc 75-50, 1975-2 CB 587, covering racial nondiscrimination? If "No," explain on Schedule O (Form 990)	7	Yes	

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DLN: 93493136054511

OMB No 1545-0047

2009

SCHEDULE F (Form 990)

Department of the Treasury

**Statement of Activities Outside the United States** ► Complete if the organization answered "Yes" to Form 990,

> Part IV, line 14b, 15, or 16. ▶ Attach to Form 990. ▶ See separate instructions.

Open to Public

**Inspection** 

Internal Revenue Service Name of the organization Phillips Exeter Academy

**Employer identification number** 

02-0222174

Part I	General Information on	<b>Activities Outside the United States.</b>	Complete if the organization answered
	"Yes" to Form 990, Part IV	line 14b.	

1	For grantmakers. Does the organization maintain records to substantiate the amount of the grants or				
	assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award				
	the grants or assistance?	_ Y	es	Γ	No

For grant makers. Describe in Part IV the organization's procedures for monitoring the use of grant funds outside the United States

Activites per Region (Use Schedule F-1 (Form 990) if additional space is needed ) 3

Activites per Region (o	se Schedule F-1	(Form 990) if aut	illional space is needed )		
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
Central America and the Caribbean	0	0	Program Services	Study Program	
North America	0	0	Program Services	STUDY PROGRAM	
Europe (Including Iceland and Greenland)	0	0	Program Services	STUDY PROGRAM	
East Asia and the Pacific	0	0	Program Services	STUDY PROGRAM	
North America	0	0	Program Services	STUDENT RECRUITING	
Europe (Including Iceland and Greenland)	0	0	Program Services	STUDENT RECRUITING	
East Asia and the Pacific	0	0	Program Services	STUDENT RECRUITING	
Middle East and North Africa	0	0	Program Services	STUDENT RECRUITING	
South America	0	0	Program Services	STUDENT RECRUITING	
Europe (Including Iceland and Greenland)	0	0	Fundraising		
East Asia and the Pacific	0	0	Fundraising		
North America	0	0	Fundraising		
South Asia	0	0	Fundraising		
Central America and the Caribbean			Investments		
Europe (Including Iceland and Greenland)			Investments		
Totals ▶	0	0			
For Briggey Act and Dangework B		Ale - Tereseure	tions for Form 000	Cat No E0083W Sch	adula E (Form 000) 2000

Part IV	, line 15, for an	sistance to Orgar y recipient who recensional	eived more than \$5	es Outside the Ur ,000. Check this box	nited States. Composite of the composite	plete if the organiza received more that	tion answered "Yes' n \$5,000	'to Form 990, ► 厂
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
2 Enter total n tax-exempt	number of recipions by the IRS, or f	ent organizations lis or which the grante	ted above that are e or counsel has pr	recognized as chari ovided a section 50	ties by the foreign o 1(c)(3) equivalency	country, recognized letter	as . ►	
3 Enter total n	umber of other	organizations or en	tities					: (Earm 990) 2009

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16. Use Schedule F-1 (Form 990) if additional space is needed. (c) Number of (b) Region (d) A mount of (e) Manner of cash (a) Type of grant or (f) A mount of (g) Description (h) Method of assistance cash grant disbursement of non-cash valuation recipients non-cash (book, FMV, assistance assistance appraisal, other)

Schedule F (Form 990) 2009

		red in Part I, line 2, and any additional information.
Identifier	ReturnReference	Explanation
description of accounting method	Schedule F, PART I, LINE 3, COLUMN (F)	The Academy does not currently track foreign expenditures for each program separately Therefore, Pursuant to IRS guidance, disclosure in this column is not required in the current year

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Schedule I

(Form 990)

Department of the Treasury

DLN: 93493136054511

OMB No 1545-0047

### **Grants and Other Assistance to Organizations,** Governments and Individuals in the United States

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

Open to Public

Internal Revenue Service Inspect ion Name of the organization **Employer identification number** Phillips Exeter Academy 02-0222174 Part I General Information on Grants and Assistance Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21 for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use (a) Name and address of **(b)** EIN (c) IRC Code section (d) A mount of cash (e) A mount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable (book, FMV, appraisal, non-cash assistance or assistance grant cash or government assistance other) Enter total number of section 501(c)(3) and government organizations . . . . . . . . . . . . . . . . 

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

(a)Type of grant or assistance	<b>(b)</b> Number of recipients	(c)A mount of cash grant	( <b>d)</b> A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
Regular Session Scholarships	539	0	16,329,044	FMV	TUITION OFFSET
Regular Session Other Aid	539	35,721	838,200	FMV	OTHER FINANCIAL ASST
Summer Program Scholarships	255	o	1,113,174	FMV	TUITION OFFSET
Summer Program O ther Aıd	255	0	11,935	FMV	OTHER FINANCIAL ASST

Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.

Ident if ier	Return Reference	Explanation
Monitoring Grant Funds	Schedule I, Part I, Line 2	SCHOLARSHIPS AND MOST FINANCIAL ASSISTANCE CREDITS ARE NON CASH AND ARE APPLIED DIRECTLY TO STUDENT ACCOUNTS AT THE ACADEMY ON OCCASION FINANCIAL AID STUDENTS ARE REIMBURSED FOR NECESSARY EXPENSES SUCH AS TRANSPORTATION OR THE COST OF COMPUTER EQUIPMENT DOCUMENTATION EVIDENCING PAYMENT BY THE STUDENT IS REQUIRED BEFORE DISBURSEMENT OF CASH AID IS MADE PHILLIPS EXETER ACADEMY MAINTAINS EXTENSIVE RECORDS TO JUSTIFY BOTH AWARDS AND THE FINANCIAL NEED ELIGIBILITY OF THE RECIPIENTS

DLN: 93493136054511

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.

► Attach to Form 990. ► See separate instructions.

Open to Public Inspection

Name of the organization Phillips Exeter Academy  Employer identification							
PIIII	02-0222174	ļ.					
Pa	rt I Questions Regarding Compensation						
			Yes	Νo			
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items						
	First-class or charter travel						
	▼ Travel for companions	:					
	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 follow a written policy regarding payment or reimbursement orprovision of all the expenses described above? If "No," complete Part III to explain	1b	Yes				
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	Yes				
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  Compensation committee  Independent compensation consultant  Compensation survey or study  Form 990 of other organizations  Approval by the board or compensation committee	e e					
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organ or a related organization	nization					
а	Receive a severance payment or change-of-control payment?	4a	Yes				
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b	Yes				
С	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		Νo			
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III						
5	Only 501(c)(3) and 501(c)(4) organizations only must complete lines 5-9.  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		No			
b	Any related organization?	5b		Νo			
	If "Yes," to line 5a or 5b, describe in Part III						
6	For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of						
а	The organization?	6a		Νo			
b	Any related organization?	6b		Νo			
	If "Yes," to line 6a or 6b, describe in Part III						
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III	7		No			
8	Were any amounts reported in Form 990, Part VII, paid or accured 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	8		No			
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulation	ons					

section 53 4958-6(c)?

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

(A) Name		(B) Breakdown of	W-2 and/or 1099-	MISC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	
		(i) Base (ii) Bonus & (iii) Other reportable compensation compensation		other deferred compensation	benefits	(B)(ı)-(D)	reported in prior Form 990 or Form 990-EZ	
JOSEPH E FELLOWS	(ı) (ıı)	230,830 0		1,294	28,702	20,845	281,671 0	
JAMES M THEISEN	(ı) (ıı)	245,894 0		4,230	29,400	16,618	296,142 0	
WILLIAM C DAVISON	(ı) (ıı)	193,056 0		858	23,580	15,440	232,934 0	
EDWARD W PROBERT	(ı) (ıı)	183,077 0		690	21,246	49,783	254,796 0	
THOMAS E HASSAN	(ı) (ıı)	221,554 0		2,817	28,590	87,278	340,239 0	
JAY H MARTIN	(ı) (ıı)	142,982 0		1,390	17,867	18,174	180,413	
ROGER F WAKEMAN	(ı) (ıı)	130,647 0		11,542	12,603	64,998	219,790 0	
TYLER C TINGLEY	(I) (II)	210,152 0		490,291	29,400	35,410	765,253 0	448,844

### Part III Supplemental Information

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

Ident if ier	Ret urn Ref erence	Explanation
	PART I, LINE	THE PRINCIPAL OF THE SCHOOL MAY ON OCCASION TRAVEL FIRST CLASS, BE ACCOMPANIED BY HIS SPOUSE FOR BUSINESS PURPOSES AND RECEIVE GROSS-UP PAYMENTS, ALL ARE APPROVED BY THE TRUSTEES AND ARE PURSUANT TO ACADEMY POLICY THE PRINCIPAL IS
		REQUIRED TO LIVE ON CAMPUS, AS A CONDITION OF EMPLOYMENT AND FOR THE CONVENIENCE OF THE EMPLOYER, TO PARTICIPATE IN ACTIVITIES WITH STUDENTS AND TO CONDUCT BUSINESS OUTSIDE NORMAL BUSINESS HOURS SCHEDULE J, PART I, LINE 4A UPON VACATING THE OFFICE OF PRINCIPAL AS OF JUNE 30, 2009, TYLER TINGLEY RECEIVED A PAYMENT OF \$234,729 THIS AMOUNT WAS
		REPORTED ON PRIOR FORMS 990 SCHEDULE J, PART I, LINE 4B FORMER PRINCIPAL TINGLEY PARTICIPATED IN A SUPPLEMENTAL  NONQUALIFIED RETIREMENT PLAN AS DESCRIBED IN IRC SECTION 457(F) MR TINGLEY'S DEFERRED COMPENSATION PLAN VESTED JULY 1,
		2008 AND THE AMOUNT WAS INCLUDED IN HIS 2008 W-2 AND ON THE 2008 FORM 990 DISTRIBUTION OF THE ASSETS WERE MADE TO MR TINGLEY IN JANUARY 2010 SCHEDULE J, PART II COLUMNS B(III) AND F Reported in both columns B(III) and F for Mr Tingley is the \$234,729 payment noted above and sabbatical compensation of \$214,115 Column B(III) also includes some other miscellaneous payments

Schedule J (Form 990) 2009

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DLN: 93493136054511

OMB No 1545-0047

Open to Public **Inspection** 

### **Supplemental Information on Tax Exempt Bonds**

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Schedule O (Form 990). ► Attach to Form 990. ► See separate instructions.

Department of the Treasury Internal Revenue Service

Schedule K

(Form 990)

Name of the organization Phillips Exeter Academy Employer identification number

02-0222174

										102-02	02-0222174			
Pa	rt I Bond Issues									•				
	(a) Issuer Name	( <b>b)</b> Issuer EIN	(c) CUSIP #	(d) Date	Issued	(e) Issue	Price	(f) Des	(f) Description of Purpose		(g) Defeased		Beh	On alf of uer
											Yes	No	Yes	No
A	NH HEALTH & EDUCATION FACILITIES AUTHORITY (HEFA)	02-0279866	644614SZ3	09-19-2007		50,0			CAPITAL CONSTRUCTION PROJECTS REFU			x		×
Pa	rt III Proceeds													
					4	E	3			D	)		E	
1	Total proceeds of issue			5	0,000,000	ס								
2	Gross proceeds in reserve funds				(	ו								
3	Proceeds in refunding or defeasan	ice escrows			(									
4	Other unspent proceeds				(									
5	5 Issuance costs from proceeds				336,409									
6	6 Working capital expenditures from proceeds				(									
7	Capital expenditures from proceeds			2	4,946,43	5								
8	Year of substantial completion			20	08				I					
-				Yes	No	Yes	No	Yes	No	Yes	No	Ye	s	No
9	Were the bonds issued as part of a	a current refunding is	ssue?	Х										
10	Were the bonds issued as part of a	an advance refundıng	ıssue?		Х									
11	Has the final allocation of proceed	is been made?		Х										
12	Does the organization maintain ad the final allocation of proceeds?	lequate books and re	cords to support	x										
Par	t IIII Private Business Use													
				1	Α	E	3		:	D	)		Е	
				Yes	No	Yes	No	Yes	No	Yes	No	Ye	s	No
1	Was the organization a partner in a which owned property financed by		ember of an LLC,		х									
2					х									
For F	or Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat No 50193E Schedule K (Form 990) 2009													

Schedule K (Form 990) 2009

Part III Private Business Use (Continued)

			A	В		С		D			E
		Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
3a	Are there any management or service contracts with respect to the financed property which may result in private business use?		Х								
3b	Are there any research agreements with respect to the financed property which may result in private business use?		Х								
3с	Does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts or research agreements relating to the financed property?										
4	Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government		0 %				•				
5	Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government	0 582 %									
6	Total of lines 4 and 5		0 582 %								
7	Has the organization adopted management practices and procedures to ensure the post-issuance compliance of its tax-exempt bond liabilities?	Х									
Pai	t IV Arbitrage		•	•	•	•	•	•	•	•	

		A		E	3		С	I	)	I	E
		Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
1	Has a Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate, been filed with respect to the bond issue?		x								
2	Is the bond issue a variable rate issue?	Х									
3a	Has the organization or the governmental issuer identified a hedge with respect to the bond issue on its books and records?										
ь	Name of provider	BNY MELLC	N						•		
С	Term of hedge		34 25								
4a	Were gross proceeds invested in a GIC?		Х								
b	Name of provider										
С	Term of GIC										
d	Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?										
5	Were any gross proceeds invested beyond an available temporary period?		х								
6	Did the bond issue qualify for an exception to rebate?										
									Cabadul	a V /Earm 00/	) 2000

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DLN: 93493136054511

# 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. OMB No 1545-0047

Open to Public Inspection

Name of the organization **Employer identification number** Phillips Exeter Academy 02-0222174 Part I Excess Benefit Transactions (section 501(c)(3) and section 501 (c)(4) organizations only). Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b (c) Corrected? (a) Name of disqualified person 1 (b) Description of transaction 2 Enter the amount of tax imposed on the organization managers or disqualified persons during the year under 3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization . . . . . . . . Loans to and/or From Interested Persons. Complete if the organization answered "Yes" on Form 990, Part IV, line 26, or Form 990-EZ, Part V, line 38a (b) Loan to (g)Written (e) In Approved or from the (a) Name of interested person and (c)Original default? by board or agreement? (d)Balance due organization? principal amount purpose committee? Τо From Yes Nο Yes Yes Nο James Theisen Home Mortgage Loan 250,000 84,123 84,123 Part III Grants or Assistance Benefitting Interested Persons. Complete if the organization answered "Yes" on Form 990, Part IV, line 27. (b) Relationship between interested person (a) Name of interested person (c)A mount of grant or type of assistance and the organization Part IV Business Transactions Involving Interested Persons. Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c. (e) Sharing of (b) Relationship organization's between interested (c) A mount of (d) Description of transaction (a) Name of interested person

person and the

organization

transaction

revenues?

No

Yes

DLN: 93493136054511

## **NonCash Contributions**

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

OMB No 1545-0047

Open to Public Inspection

Internal Revenue Service Name of the organization Phillips Exeter Academy

**SCHEDULE M** 

Department of the Treasury

(Form 990)

**Employer identification number** 

	T				02-0222174			
Pa	rt I Types of Property	(a) Check ıf	(b) Number of Contributions	(c) Revenues reported on Form 990, Part VIII, line	( <b>d</b> Method of de reven	etermı	nıng	
		applicable		1 g				
1	Art—Works of art	Х	1	500,000	APPRAISAL			
2	Art—Historical treasures .							
3	Art—Fractional interests							
4	Books and publications	Х		0	N/A			
5	Clothing and household							
	goods							
6	Cars and other vehicles							
7	Boats and planes							
	Intellectual property							
	Securities—Publicly traded .	X	139	1,227,001	FMV			
	Securities—Closely held stock .							
11	Securities—Partnership, LLC, or trust interests							
12	Securities—Miscellaneous							
13	Qualified conservation contribution—Historic structures							
14	Qualified conservation contribution—Other							
15	Real estate—Residential .							
16	Real estate—Commercial							
17	Real estate—Other							
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies .							
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts							
	HOTEL							
25	Other $\blacktriangleright$ ( RECEPTION )	X	1	0	N/A			
26	CONSOLE Other►(PIANO)	×	1	0	N/A			
	MS 2000							
27	OFFICE Other►(LICENSE )	×	1	_	N/A			
21	2 SERVER				IN/A			
28	Other►( <u>LICENSES</u> )	X	1		N/A			
29	Number of Forms 8283 received for which the organization compl				29			1
			,		•		Yes	No
30a	During the year, did the organiza	ition receiv	e by contribution any prope	rty reported in Part I, lines	1-28 that it			
	must hold for at least three year							
	for exempt purposes for the entire					30a		No
Ь	If "Yes," describe the arrangeme					30a		110
31	Does the organization have a gif			eview of any non-standard	contributions?	31	Yes	
32a	Does the organization hire or us	e third part	ies or related organizations	to solicit, process, or sell i	non-cash			
-24	contributions?	a part	· · · · · · · ·			32a	Yes	
h	If "Yes," describe in Part II					_ s∠a	res	
33	If the organization did not report	revenues i	n column (c) for a type of p	roperty for which column (a	) is checked,			

### 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.

Ident if ier	Return Reference	Explanation
NON-CASH CONTRIBUTIONS	, ,	THE ACADEMY'S CUSTODIAL BANK SELLS DONATED STOCK ON PHILLIPS EXETER ACADEMY'S BEHALF SCHEDULE M, PART I, LINE 33 THE ACADEMY DOES NOT RECOGNIZE REVENUES FOR GIFTS IN KIND OF THE TYPES LISTED IN PART I OF SCHEDULE M

Schedule M (Form 990) 2009

OMB No 1545-0047

Open to Public Inspection

### **SCHEDULE 0**

(Form 990)

Department of the Treasury Internal Revenue Service

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

► Attach to Form 990.

**Supplemental Information to Form 990** 

Name of the organization Phillips Exeter Academy

**Employer identification number** 

02-0222174

	<u> </u>	
ldentifier	Return Reference	<b>Explanation</b>
Mission Statement	Reference Form 990,	PHILLIPS EXETER ACADEMY, AN INDEPENDENT SECONDARY SCHOOL, CONTINUES THE COMMITMENT TO UNIT E GOODNESS AND KNOWLEDGE WITH A TOTAL EMPOLLMENT OF MORE THAN 1,000 STUDENTS APPROXIMATE, Y BO PERCENT OF WHOM ARE BOARDERS AND 20 PERCENT OF WHOM ARE DAY STUDENTS, THE SCHOOL SERY S YOUNG PEOPLE WHO COMEINE PROVEN A CADEMIC SALETY, INTELLECTUAL CURIOSITY, AND TENACITY WITH DECENCY AND GOOD CHARRACTER AT THE ACADEMY, EXACITING INQUERY AND THOUGHTFUL DISCOURSE? FOSTER THE LIFE OF THE MIND, INSTRUCTION AND ACTIVITY PROMOTE FITNESS AND HEALTH, AND THE DAILY INTERACTIONS OF A RESIDENTIAL SCHOOL INSTRUCTION AND ACTIVITY PROMOTE FITNESS AND HEALTH, AND THE DAILY INTERACTIONS OF A RESIDENTIAL SCHOOL INSTRUCTION AND ACTIVITY, PROMOTE FITNESS AND HEALTH, AND THE DAILY INTERACTIONS OF A RESIDENTIAL SCHOOL INSTRUCTION AND ACTIVITY, PROMOTE FITNESS AND HEALTH, AND THE DAILY INTERACTIONS OF A RESIDENTIAL SCHOOL INSTRUCTION THAN YEAR AND THE SUPPORT THEY PRING TO THE COMMUNITY THEY SHARE THE CHALLENGES THAT STIDENTS MEET AT DEFTER AND THE SUPPORT THEY RECEIVE HAVE A COMMON PURPOSE TO STIMULATE THER DEVICE OPEN BYTH AS INDIVIDUALS AND AS MEMBERS OF SOCIETY EXETER SERVES TO GRADULATE YOUNG PEOPLE WHOSE CREATIVITY AND INDEPRICENCE OF THOUGHT SUSTAIN THEIR CONTINUING INQUIRY AND REFLECTION. WHO SE INTEREST NO THERS AND THE WORLD AROUND THEM SURPASSES THERE SELF-CONCERN AND WHOSE P ASSION FOR LEARNING MIPELS THEM BEYOND WHAT THEY ALREADY KNOW PROGRAM SERVICE IS THE EDUCATION OF STUDENTS IN GRADES 9 THROUGH 12, IN A FULLY RESIDENTIAL BOARDING SCHOOL BAY IRON MINISTER FOR 2009-2010 WAS 1, 1022 THE FOUNDATION OF EXETER'S REGULAR SESSION.  THE EDUCATION OF STUDENTS IN GRADES 9 THROUGH 12, IN A FULLY RESIDENTIAL BOARDING SCHOOL BAY IRON MINISTER FOR 2009-2010 WAS 1, 1022 THE FOUNDATION OF EXETER'S REGULAR SESSION.  THE EDUCATION OF STUDENTS IN GRADES 9 THROUGH 12, IN A FULLY RESIDENTIAL BOARDING SCHOOL BAY IRON MINISTER AND THE CONTENT OF THE CURRICULUM HAS UNDERGONE SEVERAL REVISIONS AS EXECUTED TO SELF THE ACADEMY SEVERAL SCHOOL BAY IN THE SEL
		SECONDARY SCHOOL MATHEMATICS TEACHERS RUN BY PHILLIPS EXETER ACADEMY'S MATHEMATICS DEPARTMENT, EMI CONSISTS OF LOC AL ONE-WEEK WORKSHOPS OFFERED DURING THE SUMMER IN FIVE TO SIX DIFFERENT AMERICAN SCHOOL D ISTRICTS GOVERNANCE, MANAGEMENT, AND DISCLOSURE FORM 990, PART
or Paperwork F	 Reduction Act Notic	VI, SECTION B, LINE 11 ONC E PHILLIPS EXETER'S FORM 990 IS COMPLETED, IT IS F  2, see the Instructions for Form 990 Cat No 51056K Schedule O (Form 990) 2009

ldentifier	Return Reference	Explanation
Mission Statement	Form 990, Part I, Line 1 and Part III, Line 1	IRST REVIEWED BY PHILLIPS EXETER'S INTERNAL MANAGEMENT FOLLOWING THAT REVIEW, PEA'S INTER NAL MANAGEMENT AND OUTSIDE ADVISORS PRESENT THE FORM 990 TO THE AUDIT COMMITTEE FOR REVIEW AND COMMENT THE COMPLETED FORM 990 IS PROVIDED TO ALL MEMBERS OF THE BOARD OF TRUSTEES P RIOR TO THE FORM BEING FILED WITH THE IRS POLICIES FORM 990, PART VI, SECTION B, LINE 12 PHILLIPS EXETER ACADEMY MAINTAINS A WRITTEN CONFLICT OF INTEREST POLICY REQUIRING DISCLOSU RE OF RELEVANT FACTS THAT GIVE RISE TO A POTENTIAL CONFLICT OF INTEREST ANNUALLY, TRUSTEE S, MEMBERS OF THE INVESTMENT COMMITTEE, ADMINISTRATORS, AND STAFF WITH PURCHASING RESPONSI BILITIES ARE REQUIRED TO ACKNOWLEDGE IN WRITING THAT THEY HAVE READ, UNDERSTAND AND SIGN A CONFLICT OF INTEREST ADDITIONALLY, AT THE END OF THE FISCAL YEAR AND BEFORE SUBMISSION OF FORM 990, EACH TRUSTEE, OFFICER AND/OR KEY EMPLOYEE IS PROVIDED WITH A QUESTIONNAIRE REQ UIRING DISCLOSURE OF ANY CONFLICTS OF INTEREST THAT MAY HAVE EXISTED DURING THE PRIOR FISC ALYEAR POLICIES FORM 990, PART VI, SECTION B, LINE 15 PHILLIPS EXETER ACADEMY MAINTAINS AN EXECUTIVE COMPENSATION PHILOSOPHY INTENDED TO COMPLY WITH IRC 4958 INTERMEDIATE SANCTIONS THAT REQUIRES PERIODIC REVIEW OF PEER INSTITUTIONS FOR COMPENSATION COMPARISONS AMONG EXECUTIVES DEEMED "DISQUALIFIED PERSONS" THE BOARD OF TRUSTEES APPROVES THEIR SALARIES ANN UALLY AND DOCUMENTS THEIR DETERMINATIONS IN MEETING MINUTES OTHER EXECUTIVE COMPENSATION IS BASED ON A REVIEW OF PEER SCHOOLS USING ABOPS AND OTHER SALARY SURVEY DATA AND IS APPROVED BY THE ADMINISTRATION DISCLOSURE FORM 990, PART VI, SECTION C, LINE 19 PHILLIPS EXETER ACADEMY'S GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS ARE AVAILABLE TO THE PUBLIC UPON REQUEST

DLN: 93493136054511

OMB No 1545-0047

Open to Public Inspection

# SCHEDULE R (Form 990)

### **Related Organizations and Unrelated Partnerships**

► Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.

► Attach to Form 990. ► See separate instructions.

Department of the Treasury Internal Revenue Service

Name of the organization
Phillips Exeter Academy

02-0222174

				02-0222174		
Part I Identification of Disregarded Entities (Complet	e if the organization a	nswered "Yes" on	Form 990, Part IV	, line 33.)		
(a) Name, address, and EIN of disregarded entity	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income End	(e) d-of-year assets	<b>(f)</b> Direct controlling entity	
Part II  Identification of Related Tax-Exempt Organizations during the	tions (Complete if the tax year.)	ne organization ans	swered "Yes" on F	orm 990, Part IV,	line 34 because it had one	
(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	<b>(f)</b> Direct controlling entity	
PEA Retiree Health Care Plan						
20 Main Street	VEBA	NH	501(C)(9)		PHILLIPS EXE	
EXETER, NH 03833 02-0489993			(-)(-)			
Phillips Exeter Hong Kong Foundation Ltd						
Prince Bldg 10 Chater Rd Central Hong Kong HK	Fundraising	нк			N/A	
Heinz Exeter Scholarship Fund						
PO Box 185	FUNDRAISING	PA	501(C)(3)	11	NA	
PITTSBURG, PA 15201 25-1482044						
MSSC Trust fbo Phillips Exeter Academy						
PO Box 748 Sullivans Island, SC 29482	FUNDRAISING	SC	501(c)(3)	11	NA	
57-6114852						

(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512- 514)	uring the tax year.  (f)  Share of total income	(g) Share of end asset			ortionate tions?	te Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)		Gener mana	eral or naging	
								Yes	No			Yes	No	
												+		
				s a Corporation of treated as a corpo				nswer	ed "Y	es" on F	orm 990, P	art IV,		
	cause it had one t		ciacca organización.				(f)	)	Ī	(a)	(h)			
(a) Name, address, and EIN o	f related organization	<b>(b)</b> Primary ad	ctivity	(c) Legal domicile (state or foreign country)	( <b>d)</b> Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	Share of incor	f total	Sh end-	(g) nare of -of-year issets	Percentag	—UBI General or managing partner?  Yes No		
									1					
									1					

chedule R (Form 990) 2009			Pa	age 3
Part V Transactions With Related Organizations (Complete If	the organization answered "Yes" on Form 990, Part IV, line 34, 35, or 3	36.)		
Note. Complete line 1 if any entity is listed in Parts II, III or IV			Yes	Ne
1 During the tax year, did the organization engage in any of the following transac	tions with one or more related organizations listed in Parts II-IV?			
a Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled	entity	1a		N
<b>b</b> Gift, grant, or capital contribution to other organization(s)		1b		N
<b>c</b> Gift, grant, or capital contribution from other organization(s)		1c	Yes	
<b>d</b> Loans or loan guarantees to or for other organization(s)		1d		N
e Loans or loan guarantees by other organization(s)		1e		No
<b>f</b> Sale of assets to other organization(s)		1f		No
g Purchase of assets from other organization(s)		<b>1</b> g		N
h Exchange of assets		1h		N
i Lease of facilities, equipment, or other assets to other organization(s)		1i		N
j Lease of facilities, equipment, or other assets from other organization(s)		1j		N
<b>k</b> Performance of services or membership or fundraising solicitations for other	organization(s)	1k		N
I Performance of services or membership or fundraising solicitations by other	organization(s)	11		N
m Sharing of facilities, equipment, mailing lists, or other assets		1m	1	N
n Sharing of paid employees		<b>1</b> n		N
• Reimbursement paid to other organization for expenses		10		N
<b>p</b> Reimbursement paid by other organization for expenses		1р	Yes	_
<b>q</b> Other transfer of cash or property to other organization(s)		<b>1</b> q	-	N
Other transfer of cash or property from other organization(s)		1r		N

2	If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds

(a) Name of other organization	<b>(b)</b> Transaction type(a-r)	(c) Amount involved
(1) Heinz Exeter Scholarship Fund	С	40,000
(2) MSSC Trust fbo Phillips Exeter Academy	С	88,000
(3) PEA Retiree Health Plan	Р	937,565
(4)		
(5)		
(5)		

Part VI Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" on Form 990, Part IV, line 37.)

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships

<b>(a)</b> Name, address, and EIN of entity	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Are all partners section 501(c)(3) organizations?		partners section 501(c)(3) organizations?		partners section 501(c)(3) organizations?		partners section 501(c)(3) organizations?		partners section 501(c)(3) organizations?		partners section 501(c)(3) organizations		partners section 501(c)(3) organizations		partners section 501(c)(3) organizations?		<b>(e)</b> Share of end-of-year assets		rtionate cions?	(g) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	Gene man part	ag ing tner?
			Yes	No		Yes	No		Yes	No														
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