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Form **990**

Department of the Treasury

Return of Organization Exempt From Income Tax

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

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

2009

OMB No 1545-0047

Open to Public

					04 2000 L L' 05 20 204	_		Inspection
			r yea	r, or tax year beginning 07- C Name of organization	01-2009 and ending 06-30-201	.0	D Employer ide	entification number
B Chec Addr		pplicable Pleas		THE WALDORF SCHOOL OF GA	ARDEN CITY		11-185565	: 4
_		label	or	Doing Business As			E Telephone nu	
Nam		type.					(516) 742-	3131
Initia	al retu	rn Spec Instr			ox if mail is not delivered to street addre	ess) Room/suite	G Gross receipts	
Tem	nınate			225 CAMBRIDGE AVENUE			G Gloss receipts	
— Ame	nded	return		City or town, state or country	, and ZIP + 4		1	
— Appl	ıcatıon	n pending		GARDEN CITY, NY 11530				
		F	Nar	ne and address of principal	officer	H(a) Ta th	.	- f
				e Giordano			ıs a group returı ates?	⊤Yes ▼ No
				AMBRIDGE AVENUE EN CITY, NY 11530				
		"	- ND	IN CITT, NT 11550		1	ll affiliates includ	
r Tax	-exem	npt status 🔽	501(c) (3) ◀ (insert no)	a)(1) or		o," attach a list up exemption nu	(see instructions)
				RFGARDEN ORG		H(c) Grou	ap exemption nu	illibel F
				tion Trust Association O	thor It.		ermation 1047	A State of legal democie. NV
Par		Summary		tion Trust Association O	ther F	L Year of it	ormation 1947	State of legal domicile NY
				ie organization's mission or	most significant activities			
		CONDUCT, C	PER	ATE & MAINTAIN a presc	hool,ELEMENTARY & SECONDA	RY SCHOOL		
Governance								
<u> </u>								
<u>.</u>	_	Charletter h					250/ -5-5-	
ှ ်			,		tinued its operations or disposed			
			_		ody (Part VI, line 1a)			1
တို့ မြ	4				e governing body (Part VI, line 1	b)		1
Activities &	5	Total number	ofer	nployees (Part V , line 2a)			5	18
를	6	Total number	ofvo	olunteers (estimate if neces	sary)		6	
٠	7a	Total gross u	nrela	ted business revenue from	Part VIII, column (C), line 12		7a	a
	b	Net unrelated	bus	iness taxable income from l		71	b	
						Pric	or Year	Current Year
_	8 Contributions and grants (Part VIII, line 1h)						367,131	515,227
를	9	Program ser	vice	revenue (Part VIII, line 2g		6,444,299	6,498,017	
Reveni	10	Investment	ıncoı	me (Part VIII, column (A),	ines 3, 4, and 7d)		-430,522	22,409
<u> </u>	11	Other reven	ue (P	art VIII, column (A), lines	5, 6d, 8c, 9c, 10c, and 11e)		127,353	100,377
	12	Total revenu	ıe—a	dd lines 8 through 11 (mus	t equal Part VIII, column (A), lın	е		
							6,508,261	7,136,030
	13				olumn (A), lines 1-3)		528,999	671,425
	14	•			umn (A), line 4)			0
g l	15		nerco	ompensation, employee ber	efits (Part IX, column (A), lines	5 –	5,116,706	4,536,214
PSe	16a	10) Professiona	Lfund	draising fees (Part IX colun	nn (A), line 11e)		3,110,700	0
Expenses	ь			penses (Part IX, column (D), line i				
_	17			(Part IX, column (A), lines		1,787,977	1,941,962	
	18				al Part IX, column (A), line 25)		7,433,682	7,149,601
	19				m line 12		-925,421	-13,571
			^	- 1 Dabarace mile 10 me		Beginnin	g of Current	·
Net Assets or Fund Balances						_	/ear	End of Year
888 888 1	20	Total assets	(Pa	rt X, line 16)			7,556,000	7,707,230
뜋다	21	Total liabilit	ies (l	Part X, line 26)			1,756,518	1,604,574
žĒ	22	Net assets	or fur	nd balances Subtract line 2	1 from line 20		5,799,482	6,102,656
Par	t II	Signatur	e Bl	ock			•	
					ined this return, including accompanying			
		and belief, it is	true,	correct, and complete Declaratio	n of preparer (other than officer) is base	ed on all informat	ion of which prepar	er has any knowledge
Sian		*****				12011	02.22	
Sign Here		Signature o	f office	er		2011- Date	-03-23	
		[
		Type or prii		director of finance ne and title				
		 			Data	Charle of	Dronore de deserviciones	fung number
		Preparer's signature	FREDE	ERICK H ROTHMAN		Check If self-	Preparer's identi (see instructions	
Paid		Signature P				empolyed 🕨 🦵		
Prepa		Firm's name (o	,	s LOEB & TROPER LLP	•		EIN Þ	
Use O	nly	address, and Z		655 THIRD AVENUE 12TH FI	OOR			
				NEW YORK, NY 10017			Phone no 🕨 (2	212) 867-4000
Mav th	ne IR	S discuss this	retu		above? (see instructions)			✓ Yes
/	\							,

Part III Statement of Program Service Accomplishments

Briefly describe the organization's mission

To nurture towards compassion, to balance towards wholeness, to challenge towards excellence and achievement-these are the goals to which the waldorf school of garden city aspires based on the insights of rudolf steiner, and enriched by the diversity of our community, our methods of teaching reflect an understanding of the growing child and acknowledge the spiritual origins of humanity

4e	Total program service expenses►	5,951,78	2		
	(Expenses \$	ıncludıng grants of	\$) (Revenue \$)
4d	Other program services (Describ	e ın Schedule O)			
	Summer camp at the waldorf school, a da to thirteen, the camp includes both half a campers from preschool to teen				
4c	(Code) (Expense		ıncludıng grants of \$) (Revenue \$	180,039)
	Activities at camp glen brook (the waldor a visiting schools program. Almost 160 ca brook 2009 summer program. the two thi and music, nature study, camping, swimn school of garden city and 400 children fro developed new skills through practical wo	mpers, representing 20 wald ee-week sessions emphasiz ning, canoeing and caring fo m other private and public s	forf schools and numerous per the harmony of mind, body a or animals the visiting school schools students participated	public schools from across the united spirit through traditional activols program supported approximation activols programs enhance	ited states, participated in the glen ities such as games and sports, art ately 200 students from the waldor
4b	(Code) (Expense	s \$ 818,846	ıncludıng grants of \$) (Revenue \$	538,921)
	In keeping with the schools core mission, twelfth grade an additional 90 families pappropriate sensory, social and emotional afternoon playgroup, extended day progra 7 30 AM and often extended beyond 6 Pl of their development, balancing intellectual	articipated in the parent child development and offers rela m and homework club,alon 1 the waldorf curriculum,whi	d program, which immerses exing activity and conversat g with a wide variety of afti ich is interdisciplinary and e	the young child in an environme on for the adults Additional proc er-school sports and activities res	ent that supports healthy,age- grams such as the preschool sult in a school day beginning at
4a	(Code) (Expense	s \$ 5,029,641	including grants of \$	671,425) (Revenue \$	5,779,057)
4	Describe the exempt purpose achie Section 501(c)(3) and 501(c)(4) o allocations to others, the total expe	rganızatıons and sectio	on 4947(a)(1) trusts a	re required to report the am	
	If "Yes," describe these changes or	n Schedule O			
3	Did the organization cease conduct services?	ing, or make significan	t changes in how it cor	nducts, any program	┌ Yes ┌ No
	If "Yes," describe these new servic	es on Schedule O			
2	Did the organization undertake any the prior Form 990 or 990-EZ? .		rvices during the year	which were not listed on	┌ Yes ┌ No

			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		Νο
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4		No
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any 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 1	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	Yes	
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		No
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 12A No	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		No
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		No
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the U S? <i>If "Yes," complete Schedule F, Part II</i>	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? If "Yes," complete Schedule G, Part I	17		Νο
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	Yes	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		No

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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		No
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		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		Νo
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		No
28	Was the organization a party to a business transaction with one of the following parties? (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		No.
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes,"	28b		No
_	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family	200		<u> </u>
	member) was an officer, director, trustee, or owner? If "Yes," complete Schedule L, Part IV	28c	Yes	
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		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Νo
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		No
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35		No
36	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		Νο
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		Νο
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	

	/
Part V	Statements Regarding Other IRS Filings and Tax Compliance

			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?	1 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	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a		N o
ь	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
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		Νο
Ь	If "Yes," enter the name of the foreign country ▶			
5a	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
с	If "Yes" to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?	5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?	6a		Νo
	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7 _	Organizations that may receive deductible contributions under section 170(c).	7-	V	
	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	Yes	
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Yes	
	file Form 8282?	7c		Νο
	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		No
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g		
п	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7h	Yes	
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
9	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		
10	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			
11	Section 501(c)(12) organizations. Enter			
	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)			
12a	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			

225 CAMBRIDGE AVENUE garden city, NY 11530 (516) 742-3434

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	ction A. Governing Body and Management			
			Yes	No
_				
1a	Enter the number of voting members of the governing body 1a 15			
ь	Enter the number of voting members that are independent 14			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2	Yes	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		No
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		Νο
6	Does the organization have members or stockholders?	6		No
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the			
	governing body?	7a	Yes	
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b	Yes	
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	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the	9		N
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O ection B. Policies (This Section B requests information about policies not required by the Internal	9		Νo
	evenue Code.)			
			Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a		Νο
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?	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	
	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	
ь	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	16a		N o
b	taxable entity during the year?	10a		N O
	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		
Se	ection C. Disclosure			
17	List the States with which a copy of this Form 990 is required to be filed▶NY			
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.			
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	e orga	nızatıor	ı ►
	DENESE Giordano			

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	r, dırector, trustee	or key employee								
(A) Name and Title	(B) Average hours	(C) Position (check all that apply)						(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of other
	per week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	from the organization (W- 2/1099-MISC)	from related organizations (W- 2/1099- MISC)	compensation from the organization and related organizations
See add'l data										

Forr	n 990 (2009)			Page 8
1b	Total	0		22,671
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 1			-
			Yes	No
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>	3		No
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		No
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? <i>If</i> " <i>Yes,"</i> complete Schedule J for such person	5		No
S	ection 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		(C Comper	
2	Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization >0			\(\frac{12.000}{2}\)
		F	orm 99 0	(2

Form 9								Page 9
Part	/1111	Statement of	of Revenue		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512,513, or 514
क क	1a	Federated cam	paigns 1a					
至是	ь	Membership du	es 1b					
∂೯	c	Fundraising eve	ents 1c	198,434				
# #	d	Related organiz	ations 1d					
%. <u>E</u>	e	Government grants		61,756				
돌류	l f	All other contribution	ons, gifts, grants, and 1f	255,037				
至至	_	sımılar amounts no	t included above butions included in					
# 	g	lines 1a-1f \$						
Contributions, gifts, grants and other similar amounts	h	Total. Add lines	s 1a-1f	▶	515,227			
				Business Code				
Program Service Revenue	2a	TUITION		611,710	5,265,183	5,265,183		
	ь	Glen Brook Camp		611,710	538,921	538,921		
ъ. П	c	student fees		611,710	203,299	203,299		
ž	d	OTHER PROGRAMS		611,710	199,323	199,323		
Ÿ,	e	SUMMER SCHOOL		611,710	180,039	180,039		
<u> </u>	f	All other progra	ım service revenue	522,123	111,252	111,252		
ွ					·	111,232		
	g		s 2a-2f	+	6,498,017			
	3		ome (including dividend ar amounts)	. t	40,797			40,797
	4		tment of tax-exempt bond p	· · · .	,			1 1 1 1 1 1 1
	5			▶				
		•	(ı) Real	(II) Personal				
	6a	Gross Rents						
	ь	Less rental expenses						
	c	Rental income						
	d	or (loss) Net rental incoi	ll me or (loss)					
			(ı) Securities	(II) O ther				
	7a	Gross amount from sales of assets other than inventory	4,163,326					
	ь	Less cost or	4,181,714					
		other basis and sales expenses						
	C	Gain or (loss)	-18,388					
	d		s)	•	-18,388			-18,388
Other Revenue	8a	Gross income f events (not inc \$ 198 of contributions See Part IV, lin	luding ,434 reported on line 1c)					
Ē.		·	a	29,417				
Ť۴	ь		penses b [56,019				
0	С		loss) from fundraising e	events 🟲	-26,602			-26,602
	9a	Gross income f See Part IV, lin	rom gaming activities e 19 a					
	b c		penses b loss) from gaming activ	/ities►				
	10a	Gross sales of returns and allo	• •					
	ь	Less cost of q	oods sold b					
	С		ı loss) from sales of ınve	entory 🛏				
		Miscellaneous	s Revenue	Business Code				
	11a	Cafeteria Revei	nue	900,099	114,860			114,860
	ь	Bookstore Reve	enue	900,099	12,119			12,119
	С							
	d	All other reven	ue					
	e	Total. Add lines	s 11a-11d		126,979			
	12	Total revenue.	See Instructions	•	7,136,030	6,498,017	0	122,786

	990 (2009)				Page 10
Par	t IX Statement of Functional Expenses				
_	Section 501(c)(3) and 501(c)(4) organizations m			(D)	
_	ll other organizations must complete column (A) but are not required to	complete columi	ns (B), (C), and (B)	(D).	(D)
	ot include amounts reported on lines 6b, b, 9b, and 10b of Part VIII.	(A) Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to governments and organizations in the U S $$ See Part IV , line 21 $$				
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22	671,425	671,425		
3	Grants and other assistance to governments, organizations, and individuals outside the U S See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	274,950	90,000	184,950	
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$				
7	Other salaries and wages	3,358,855	2,917,276	282,116	159,463
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				· · ·
9	Other employee benefits	639,699	565,388	63,804	10,507
10	Payroll taxes	262,710	216,718	34,451	11,541
11	Fees for services (non-employees)				·
а	Management				
b	Legal	1,445		1,445	
c	Accounting	33,850		33,850	
d	Lobbying	33,533		33,333	
e	Professional fundraising See Part IV, line 17				
f	Investment management fees	26,165		26,165	
	Other	50,924	50.702	108	112
g 12			50,703	108	113
13	Advertising and promotion	127,783	105,195	12.200	22,588
	Office expenses	831,891	789,379	12,289	30,223
14	Information technology	43,028	43,028		
15	Royalties				
16	Occupancy	111,140	·		
17	Travel	7,247	7,247		
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	7,375	5,568	140	1,667
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	222,792	202,540	10,126	10,126
23	Insurance	151,755	139,132	9,818	2,805
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	bad debt expense	201,142		182,810	18,332
b	miscellaneous	122,332	35,431	57,399	29,502
c	fees	3,093	1,612	1,481	
d					
е					
f	All other expenses				
25	Total functional expenses. Add lines 1 through 24f	7,149,601	5,951,782	900,952	296,867
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	.,213,551	2,231,132	133,332	
	campaign and fundraising solicitation				

Pa	rt X	Balance Sheet					<u> </u>
					(A)		(B)
	_				Beginning of year		End of year
	1	Cash—non-interest-bearing			77.4.040	1	400,450
	2	Savings and temporary cash investments	•		774,049	2	436,453
	3	Pledges and grants receivable, net	•		384,126	3	92,687
	4	Accounts receivable, net			311,770	4	247,125
	5	Receivables from current and former officers, directors, trustees highest compensated employees Complete Part II of	, key	employees, and			
		Schedule L				5	
	6	Receivables from other disqualified persons (as defined under sepersons described in section $4958(c)(3)(B)$ Complete Part II of		4958(f)(1)) and			
		Schedule L				6	
÷	7	Notes and loans receivable, net				7	
Assets	8	Inventories for sale or use			7,875	8	6,300
⋖	9	Prepaid expenses and deferred charges			131,215	9	60,227
	10a	Land, buildings, and equipment cost or other basis <i>Complete</i> Part VI of Schedule D	10a	6,187,66	3		
	ь	Less accumulated depreciation	10b	2,749,85	2 3,523,104	10c	3,437,811
	11	Investments—publicly traded securities			1,646,558	11	2,387,536
	12	Investments—other securities See Part IV, line 11		12	218,433		
	13	Investments—program-related See Part IV, line 11		13			
	14	Intangible assets				14	
	15	Other assets See Part IV, line 11	777,303	15	820,658		
	16	Total assets. Add lines 1 through 15 (must equal line 34)	7,556,000	16	7,707,230		
	17	Accounts payable and accrued expenses .			752,214	17	651,871
	18	Grants payable		18			
	19	Deferred revenue	1,004,304	19	952,703		
_	20	Tax-exempt bond liabilities		20			
- Š	21	Escrow or custodial account liability Complete Part IV of Schedul		21			
Liabilities	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified					
- 23		persons Complete Part II of Schedule L		•		22	
	23	Secured mortgages and notes payable to unrelated third parties				23	
	24	Unsecured notes and loans payable to unrelated third parties				24	
	25	Other liabilities Complete Part X of Schedule D				25	
	26	Total liabilities. Add lines 17 through 25			1,756,518	26	1,604,574
-S		Organizations that follow SFAS 117, check here ▶ 🔽 and comp	let e li	ines 27			
<u>9</u>		through 29, and lines 33 and 34.					
9	27	Unrestricted net assets			3,676,023	27	4,338,392
8	28	Temporarily restricted net assets			1,713,690	28	1,360,015
Fund Balance	29	Permanently restricted net assets			409,769	29	404,249
		Organizations that do not follow SFAS 117, check here ► ☐ an	d com	plete			
ō		lines 30 through 34.				_	
33	30	Capital stock or trust principal, or current funds				30	
Assets	31	Paid-in or capital surplus, or land, building or equipment fund				31	
	32	Retained earnings, endowment, accumulated income, or other fu	nds			32	
Net	33	Total net assets or fund balances			5,799,482	33	6,102,656
l	34	Total liabilities and net assets/fund balances			7,556,000	34	7,707,230

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	Were the organization's financial statements compiled or reviewed by an independent accountant?	3b		

Form **990** (2009)

OMB No 1545-0047

Inspection

SCHEDULE A (Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service

Name of the organization THE WALDORF SCHOOL OF GARDEN CITY

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.

Employer identification number

11-1855654

_							-					
Par				olic Charity Stat						tructions		
he or	rganız —			foundation because)			
1	<u>_</u>	A churc	h, conventio	on of churches, or as	sociation of o	churches s e	ection 170(b)	(1)(A)(i).				
2	✓	A schoo	ol described	ın section 170(b)(1))(A)(ii). (Atta	ach Schedu	le E)					
3	Г	A hospi	tal or a coop	erative hospital serv	vice organiza	ıtıon descrıb	oed in section	170(b)(1)(<i>t</i>	A)(iii).			
4	Γ		cal research l's name, cit	organization operate y, and state	ed in conjunc	tion with a h	nospital desci	ribed in secti	on 170(b)(1)(A)(iii). Ente	er the	
5	Г	An orga	nızatıon ope	rated for the benefit	of a college	or university	y owned or op	erated by a g	jovernmenta	l unit describ	_ ed ın	
		section	170(b)(1)(#	\)(iv). (Complete Pa	rt II)							
6	Γ	A federa	al, state, or l	ocal government or	governmenta	ıl unıt descr	ibed in sectio	n 170(b)(1)((A)(v).			
7	Γ	describ	organization that normally receives a substantial part of its support from a governmental unit or from the general public cribed in . Cribed in									
8	Γ			described in section)(vi) (Com	plete Part II)				
9									tions, memb	ership fees, a	ınd gro	SS
	•	An organization that normally receives (1) more than 331/3% of its support from contributions, membership fees, and gros receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 331/3% of										
		•		ss investment incom	-	_		•				
			_	anızatıon after June 3				· ·		•		
LO	Г	•		anized and operated	•			•	•			
An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purpose one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). On the box that describes the type of supporting organization and complete lines 11e through 11h a Type I b Type II c Type III - Functionally integrated d Type III - Other By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified person other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1 section 509(a)(2) f If the organization received a written determination from the IRS that it is a Type I, Type II or Type III supporting organizations the check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the										. Check her ons 1) or		
			g persons? rson who dir	ectly or indirectly co	ntrols eithei	ralone orto	aether with n	ersons desci	ribed in (ii)		Yes	No
				joverning body of the	•		-		,	11g(i)	1.00	
		, ,	· -	r of a person describ		_				11g(ii)	1	
			•	ed entity of a person	• • •		nove?			11g(iii)		_
h				g information about t							<u>′1 </u>	
s	(i) Name uppor ganiza	of rted	(ii) EIN	(iii) Type of organization (described on lines 1- 9 above or IRC section	(iv) Is the organizati col (i) list your gove docume	on in ed in rning	(v) Did you no organizat col (i) of suppo	tify the ion in your	(vi) Is th organiza col (1) org in the U	ie tion in janized	Am	(vii) ount of oport?
				(see instructions))	Yes	No	Yes	No	Yes	No	1	
							1	+	+			
							1		+	1		
					1		1	1	†	1		
							1		1	1		
otal							+		+	+	+	

ınstructions

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

▶□

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

	(Complete only if you	cnecked the	box on line 9 o	r Part I.)			
	ction A. Public Support				1	T	ı
Cale	ndar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not						
_	include any "unusual grants ")						
2	Gross receipts from admissions, merchandise sold or services						
	performed, or facilities furnished in						
	any activity that is related to the						
	organization's tax-exempt						
3	purpose Gross receipts from activities that				+		
3	are not an unrelated trade or						
	business under section 513						
4	Tax revenues levied for the						
	organization's benefit and either						
	paid to or expended on its behalf						
5	The value of services or facilities						
_	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5				-		
7a	A mounts included on lines 1, 2, and 3 received from disqualified						
	persons				1		
ь	Amounts included on lines 2 and 3						
	received from other than						
	disqualified persons that exceed						
	the greater of \$5,000 or 1% of the amount on line 13 for the year						
с	Add lines 7a and 7b						
8	Public Support (Subtract line 7c						
	from line 6)						
	ction B. Total Support		1			1	Γ
Cale	ndar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9	A mounts from line 6						
10a	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources						
ь	Unrelated business taxable						
	ıncome (less section 511 taxes)						
	from businesses acquired after						
_	June 30, 1975 Add lines 10a and 10b						
c 11	Net income from unrelated						
11	business activities not included						
	ın lıne 10b, whether or not the						
	business is regularly carried on						
12	Other income Do not include gain or loss from the sale of						
	capital assets (Explain in Part						
	IV)						
13	Total support (Add lines 9, 10c,						
14	11 and 12) First Five Years If the Form 990 is for	or the organizat	lon's first, second	L third fourth or	l fifth tax vear as a	1 a 501(c)(3) organ	l uzation
	check this box and stop here	or the organizat		., 4,	men tax your as t	(c)(c) c.gu.	▶ ┌
	ction C. Computation of Publ						
15	Public Support Percentage for 2009	(line 8 column	(f) divided by line	13 column (f))		15	
16	Public support percentage from 200	8 Schedule A , F	art III, line 15			16	
Se	ction D. Computation of Inve	stment Inco	ome Percenta	ge			
17	Investment income percentage for 2	009 (line 10c c	olumn (f) dıvıded	by line 13 columi	n (f))	17	
18	Investment income percentage from	2008 Schedule	A, Part III, line 1	L 7		18	
19a	33 1/3% support tests—2009. If the	organization di	d not check the b	ox on line 14, and	d line 15 is more	than 33 1/3% and	d line 17 is not
	more than 33 1/3%, check this box a	ind stop here. T					
L	organization 33 1/3% support tests—2008. If the	► C	d not chastes here	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

DLN: 93493083004141

OMB No 1545-0047

SCHEDULE D (Form 990)

Department of the Treasury

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

ernal Revenue Service	► Attach to Fo	orm 990. ► See separate instructions.			Inspec	tion
Name of the organ			Emp	loyer ident if icat	ion numb	er
THE WALDUKE SCHOO	LOI GARDEN CITT		11-	1855654		
		dvised Funds or Other Similar			. Comple	te if the
organı	zation answered "Yes" to Form 99	l		LV Formula and as		
. Total number a	at and af year	(a) Donor advised funds	+ '	b) Funds and ot	neraccou	ints
	ntributions to (during year)					
	nts from (during year)					
	ue at end of year					
Did the organi	·	sors in writing that the assets held in do organization's exclusive legal control?	onor advi	sed	┌ Yes	┌ No
used only for o	- , , , , , , , , , , , , , , , , , , ,	donor advisors in writing that grant func efit of the donor or donor advisor, or for			☐ Yes	┌ No
Part III Conse	ervation Easements. Complete	ıf the organızatıon answered "Yes"	to Forn	n 990, Part IV	, lıne 7.	
Preservat Protection Preservat Complete line	conservation easements held by the or tion of land for public use (e g , recreati n of natural habitat tion of open space s 2a–2d if the organization held a quali the last day of the tax year	,	a certifie	d historic struct	•	a
				Held at the	End of the	Year
_	of conservation easements		2a			1
_	restricted by conservation easements		2b			40 00
_	nservation easements on a certified his	` ,	2c			1
d Number of cor	nservation easements included in (c) a	cquired after 8/17/06	2d			
the taxable ye	ear ▶	rred, released, extinguished, or termina	ted by th	e organization o	during	
	tes where property subject to conserva					
	inization have a written policy regarding of the conservation easements it holds?	g the periodic monitoring, inspection, ha	ndling of	violations, and	┌ Yes	✓ No
	,	pecting and enforcing conservation ease		, , , , , , , , , , , , , , , , , , , ,		0
		ng, and enforcing conservation easemer		the year 🟲 \$_		
170(h)(4)(B)(ı) and 170(h)(4)(B)(ıı)?	(d) above satisfy the requirements of s			√ Yes	☐ No
balance sheet	<u>-</u>	onservation easements in its revenue ai the footnote to the organization's financi nents	•	•		
art IIII Orgar Compl	nizations Maintaining Collectio lete	ns of Art, Historical Treasures 'Yes" to Form 990, Part IV, line 8.	, or Otl	her Similar A	Assets.	
art, historical	treasures, or other similar assets held	116, not to report in its revenue staten for public exhibition, education or resea ancial statements that describes these	rch in fu			е,
historical trea		116, to report in its revenue statement public exhibition, education, or research ;				
(i) Revenues	included in Form 990, Part VIII, line 1			► \$		
(ii) Assets inc	cluded in Form 990, Part X			F \$		
If the organiza	•	orical treasures, or other similar assets S 116 relating to these items	for finan			
	uded in Form 990, Part VIII, line 1			▶ \$		

b Assets included in Form 990, Part X

3	Using the organization's accession and othe											niciniaea j
	items (check all that apply)			_	_		-					
а	Public exhibition		d	ı	Loan oi	rexcl	nange prog	rams				
b	Scholarly research		e	Γ	Other							
c	Preservation for future generations											
4	Provide a description of the organization's control Part XIV	ollections and explai	ın how	they	y further	the o	rganızatıor	ı's ex	cempt purpos	e ın		
5	During the year, did the organization solicit	or receive donations	ofart	, hıs	torical ti	easu	res or othe	rsın	nılar			_
	assets to be sold to raise funds rather than										Yes	┌ No
Par	Part IV, line 9, or reported an ar						n answere	d "Y	es" to Forn	990	,	
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?					ons c	or other ass	ets	not	Γ,	Yes	┌ No
b	If "Yes," explain the arrangement in Part XI	√ and complete the f	followi	ng ta	able		Γ			A mou	nt	
c	Beginning balance							1c				
d	Additions during the year						F	1d				
e	Distributions during the year							1e				
f	Ending balance						ľ	1f				
2a	Did the organization include an amount on Fe	orm 990. Part X. line	e 21?				L				Yes	
	If "Yes," explain the arrangement in Part XI\									•		,
	rt V Endowment Funds. Complete		n ansv	were	ed "Yes	" to I	Form 990.	Pai	t IV, line 1).		
		(a)Current Year) Prior					Three Years Ba		Four Y	ears Back
1a	Beginning of year balance	1,391,446			811,673							
ь	Contributions	14,548			889,432							
c	Investment earnings or losses	104,104			-294,724							
d	Grants or scholarships											
e	Other expenditures for facilities and programs	63,805			14,935							
f	Administrative expenses											
g	End of year balance	1,446,293		1	1,391,446							
2	Provide the estimated percentage of the yea	r end balance held a	as									
а	Board designated or quasi-endowment	72 000 % %										
ь	Permanent endowment ► 28 000 % %	1										
с	Term endowment ► %											
3a	Are there endowment funds not in the posse	ssion of the organiza	ation t	hat a	re held	and a	dmınıstere	d for	the			
	organization by	J									Yes	No
	(i) unrelated organizations			•					_	a(i)		Νο
	(ii) related organizations								🍱	a(ii)		No
			d an C	chad	ule R?			•		3b		
	If "Yes" to 3a(II), are the related organization											
4	Describe in Part XIV the intended uses of th	ie organization's end	dowme	nt fu	nds			10				
4		ie organization's end	dowme	nt fu ee F	^{nds} orm 99	0, Pa	art X, line			T		
4	Describe in Part XIV the intended uses of th	ie organization's end	dowme	nt fu ee F	nds	0, Pa		other	(c) Accumula depreciatio		(d) Bo	ok value
4 Par	Describe in Part XIV the intended uses of the tVI Investments—Land, Building	ie organization's end	dowme	nt fu ee F	nds orm 99) Cost or o	0, Pa	(b)Cost or o	other			(d) Bo	ok value 540,000
Par	Describe in Part XIV the intended uses of the tVI Investments—Land, Building: Description of investment Land	ie organization's end	dowme	nt fu ee F	nds orm 99) Cost or o	0, Pa	(b)Cost or c basis (other	other er)	depreciatio	n		
Par	Describe in Part XIV the intended uses of the tVI Investments—Land, Building Description of investment Land	ie organization's end	dowme	nt fu ee F	nds orm 99) Cost or o	0, Pa	(b)Cost or c basis (other	other er) 0,000	depreciatio	n		540,000
Par 1a b	Describe in Part XIV the intended uses of the tVI Investments—Land, Building: Description of investment Land	ie organization's end	dowme	nt fu ee F	nds orm 99) Cost or o	0, Pa	(b)Cost or c basis (other 3,11:	other er) 0,000	depreciatio	n		540,000
Par 1a b c	Describe in Part XIV the intended uses of the VI Investments—Land, Building: Description of investment Land	ie organization's end	nt. Se	nt fu ee F	nds orm 99) Cost or o	0, Pa	(b)Cost or c basis (other 3,11:	other er) 0,000 1,905 7,082	1,565	,335 ,532		540,000 1,546,570

Part VII Investments—Other Securities. Se	e Form 990, Part X, line 12		
(a) Description of security or category (including name of security)	(b)Book value	(c) Method of valu Cost or end-of-year ma	
Financial derivatives		,	
Closely-held equity interests			
Other			
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)	F		
Part VIII Investments—Program Related. S	ee Form 990, Part X, line 1	13.	
(a) Description of investment type	(b) Book value	(c) Method of valu	
- (a) Description of investment type	(b) Book value	Cost or end-of-year ma	arket value
Table (Caluma (b) should agual Farm 000, Part V, cal (D) line 12.)	+		
Total. (Column (b) should equal Form 990, Part X, col (B) line 13) Part IX Other Assets. See Form 990, Part X,			
(a) Desc		(b)	Book value
OTHER ASSETS		(2)	138,335
BENEFICIAL INTEREST IN ASSETS HELD BY OTHERS			682,323
DENCITORAL INTEREST IN ASSETS HELD BY OTHERS			002,323
Total. (Column (b) should equal Form 990, Part X, col.(B) line	e 15.)		820,658
Part X Other Liabilities. See Form 990, Part) = -
1 (a) Description of Liability	(b) A mount		
-	(b) Amount		
Federal Income Taxes	+		
See Additional Data Table			
Total. (Column (b) should equal Form 990, Part X, col (B) line 25)	<u> </u>		

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	7,136,030
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	7,149,601
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	-13,571
4	Net unrealized gains (losses) on investments	4	241,216
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	75,529
9	Total adjustments (net) Add lines 4 - 8	9	316,745
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	303,174
Par	t XII Reconciliation of Revenue per Audited Financial Statements With Revenue p	er R	eturn
1	Total revenue, gains, and other support per audited financial statements	1	6,679,656
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) 2d		
e	Add lines 2a through 2d	2e	241,216
3	Subtract line 2e from line 1	3	6,438,440
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 26,165		
b	Other (Describe in Part XIV) 4b 671,425		
c	Add lines 4a and 4b	4c	697,590
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	7,136,030
Part	Reconciliation of Expenses per Audited Financial Statements With Expenses	per	
1	Total expenses and losses per audited financial statements	1	6,452,011
2	A mounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities		
ь	Prior year adjustments		
c	Other losses		
d	Other (Describe in Part XIV) 2d		
e	Add lines 2a through 2d	2e	0
3	Subtract line 2e from line 1	3	6,452,011
4	Amounts 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 26,165		
b	Other (Describe in Part XIV) 4b 671,425		
c	Add lines 4a and 4b	4c	697,590
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5	7,149,601
Par	t XIV Supplemental Information		

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

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

Ident if ier	Return Reference	Explanation
Part II, Line 9	Description of How Organization Reports Conservation Easements	In 1999, the School received donated land for their Camp Glenbrook in Marlborough, New Hampshire Included as part of the donated land was 40 acres of land with conservation easement The donated land easement is valued at \$1 and is included in the School's fixed assets
Part V, Line 4	Description of Intended Use of Endowment Funds	The waldorf school maintains a number of permanently restricted scholarship and endowment funds designated to support specific educational programs or defined student scholarships Additionally, board-designated quasi-endowment funds are used to provide support to general school costs of operations
Part XI, Line 8 - Other Adjustments		CHANGE IN VALUE OF ASSETS HELD BY OTHERS
Part XII, Line 4b - Other Adjustments		financial aid 671425
Part XIII, Line 4b - Other Adjustments		FINANCIAL AID 671425

Employer identification number

SCHEDULE E

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

THE WALDORF SCHOOL OF GARDEN CITY

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

	11-1855654			
			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			
	PROMOTIONAL LITERATURE as well as newspaper advertisments INCLUDES STATEMENT OF the school's NONDISCRIMINATION POLICIES	3	Yes	
4	Does the organization maintain the following?			
а	Records indicating the racial composition of the student body, faculty, and administrative staff?	4a	Yes	<u> </u>
b	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		No
b	Admissions policies?	5b		No
c	Employment of faculty or administrative staff?	5c		Νo
d	Scholarships or other financial assistance?	5d		No
e	Educational policies?	5e		No
	Use of facilities?	5f		No
g	Athletic programs?	5g		No
h	o Other extracurricular activities? If you answered "Yes" to any of the above, please explain If you need more space, use Schedule O (Form 990)	<u>5h</u>		No
6a	Does the organization receive any financial aid or assistance from a governmental agency?			No
	Has the organization's right to such aid ever been revoked or suspended?	6b		No
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 Rev Proc 75-50, 1975-2 C B 587, covering racial nondiscrimination? If "No," explain on Schedule O (Form	7	Yes	
	990)	1	,	1

DLN: 93493083004141

OMB No. 1545-0047

SCHEDULE G (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a. ► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

Name of the organization Employer identification number THE WALDORF SCHOOL OF GARDEN CITY Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part. Indicate whether the organization raised funds through any of the following activities. Check all that apply Mail solicitations Internet and e-mail solicitations Solicitation of government grants Special fundraising events Phone solicitations In-person solicitations Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising activities? If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization Form 990-EZ filers are not required to complete this table (iii) Dıd fundraiser have (v) A mount paid to (vi) A mount paid to (i) Name of individual (iv) Gross receipts (or retained by) custody or (ii) Activity (or retained by) or entity (fundraiser) fundraiser listed in control of from activity organization contributions? col (i) No Yes

List all states in which the organization is registered or licensed to solicit funds or has been notified it is exempt from registration or licensing

			(a) Event #1	(b) Event #2	(c) O ther Events		tal Eve	
			Gala			(Add col	(a) the (c)	rough
			(event type)	(event type)	(total number)			
<u> </u>	1 Gross receipts .		227,85	1			227	7,85
Reveilue	2 Less Charitable contributions .		198,434	4			198	8,434
	Gross income (line 1 minus line 2)		29,417	7			29	9,417
	4 Cash prizes							
မွ	5 Non-cash prizes .							
Expenses	6 Rent/facility costs							
ទ័	7 Food and beverages		35,552	2			3 !	5,55
를 Dega Dega	8 Entertainment .		950					950
ੂ ∣	9 Other direct expenses		19,517	7			19	9,517
	10 Direct expense summ	ary Add lın	es 4 through 9 ın column	ı(d)	🛌		56	6,019
:	11 Net income summary	Combine lii	nes 3, column d, and line	10		-	-26	6,602
Part	Gaming. Comple \$15,000 on Form			"Yes" to Form 990, Pa	irt IV, line 19, or repo	orted mor		
φ.	+ 20,000 o o		(a) Bingo	(b) Pull tabs/Instant	(c) O ther gaming		tal gam	
Reveilue				bingo/progressive bingo		(Add col	(a) thi	rougl
	1 Gross revenue .							
ရွ	2 Cash prizes							
Spenses	3 Non-cash prizes .							
_	4 Rent/facility costs .							
다 스 트	5 Other direct expenses	[
\exists	6 Volunteerlabor .		Г Yes	Г Yes	Г Yes			
			Гио	Γ No	ΓNο			
	7 Direct expense summa	ry Add line:	s 2 through 5 ın column ((d)				
	8 Net gaming income sun	nmarv Com	bine lines 1. column d. a	nd line 7				
	3 3	,	,				Yes	No
	Enter the state(s) in which is the organization licensed							
	If "No," Explain	i to operate	gaining activities in eac	ii oi tilese states		· 9a		
.0a	Were any of the organizatio	n's gaming l	icenses revoked, susper	nded or terminated during	the tax vear?	10a		
	If "Yes," Explain	g	reenses reveneu, susper	raca or terminated daring	the tax year	104		
. 1	Does the organization opera	ate daming :	activities with nonmambe	ers?		11		
		941111114					1 1	

		Yes	No
13	Indicate the percentage of gaming activity operated in		
а	The organization's facility		
b	An outside facility		
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records		
	Name 🟲		
	Address -		
15a	Does the organization have a contract with a third party from whom the organization receives gaming		
	revenue?	,	
b	If "Yes," enter the amount of gaming revenue received by the organization 🕨 \$ and the	+	
	amount of gaming revenue retained by the third party 🟲 \$		
c	If "Yes," enter name and address		
	Name 🟲		
	Address •		
16			
16	Gaming manager information		
	Name 🟲		
	Name F		
	Gaming manager compensation 🕨 \$		
	Description of services provided -		
	Director/officer Employee Independent contractor		
	I Director/officer I Employee I Independent contractor		
.7	Mandatory distributions		
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to		
	retain the state gaming license?	<u> </u>	
b	Enter the amount of distributions required under state law distributed to other exempt organizations or spent		
	in the organization's own exempt activities during the tax year ▶ \$	1	

DLN: 93493083004141 OMB No 1545-0047

Department of the Treasury Internal Revenue Service

Schedule I

(Form 990)

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 **Inspection**

Name of the organization						Employer identifica	ation number
THE WALDORF SCHOOL OF	GARDEN CITY					11-1855654	
Part I General Info	rmation on Gra	nts and Assistance				•	
2 Describe in Part IV the	ed to award the gra organization's proc	nts or assistance? . . . edures for monitoring the us	e of grant funds in the				✓ Yes I
Form 990, Part	t IV, line 21 for ai	e to Governments and ny recipient that receive 990) if additional space	d more than \$5,000	. Check this box if n	o one recipient receiv	ed more than \$5,00	0. Use
(a) Name and address of organization or government	(Þ) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
2 Enter total number of se	ection 501(c)(3) and	d government organizations					ı

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

(a)Type of grant or assistance	(b) Number of recipients	(c)A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
scholarships and tuition assistance	145	671,425			
See Addıtıonal Data Table					

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
Procedure for Monitoring Grants in the U S		Schedule I, Part I, Line 2 scholarships are awarded based on eligibility and greatest need by the financial aid committee, comprised of the faculty chair, school administrator, finance director, and admissions director the finance director presents the applications to the committee, and scholarships are given each year within a board-approved budget they are tracked within the registrar's database and also through the student billing database which is then verified by the director of finance and facilities and also fully-audited by an independent accounting firm during the annual audit

DLN: 93493083004141

OMB No 1545-0047

Open to Public Inspection

Schedule L

(Form 990 or 990-EZ)

Department of the Treasury

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.

Internal Revenue Service Name of the organization

	the organization						E	mployer	ident if ica	tion numb	er	
Part I	Excess Benefit Trai						4) organ		only).			
	Complete if the organizat	ion ans	wered "	'Yes" on Form 990 I), Part IV, line 25a	or 25	b, or Form	990-EZ,	, Part V , lı			
1	(a) Name of disq	ualıfıed	person		(b) Des	criptio	on of trans	action		Yes	orrected No	
										Tes Tes	140	
										_		
	er the amount of tax impos								er •			
	tion 4958								- \$ —			
3 Ente	er the amount of tax, if any	, on line	e ∠, abo	ve, reimbursed by	the organization.	•			- \$			
Part II	Loans to and/or	From	Intere	sted Persons.	•							
	Complete if the organiz	zation a	nswere	d "Yes" on Form 9	90, Part IV, line 20	5, or F	orm 990-	EZ, Part \	V , line 38;	<u>a</u>		
		(b) L	oan to			١,		(f)				
(a) Name	e of interested person and	or fro	m the	(c)O riginal	. (d)Balance due	I	≘) In fault?	Approved by board or		(g)Written agreement?		
	purpose	organı	zation?	principal amoun	t (d)Balance due	"	committe			agreeme		
		То	From			Yes	No	Yes	No	Yes	No	
						_					<u> </u>	
				<u> </u>				1		+		
otal . Part III												
all III	Complete if the orga					V lın	e 27					
					ween interested pe							
(a	a) Name of interested pers	on			organization .		(c) A r	nount of o	grant or ty	pe of assi	stance	
	 											
Part IV						ميا /	. 20 ₂ 20)h or 70	20			
	Complete if the orga	ıııızatı			TOTAL 330, Part I	v, IIII 	c 20a, 20	ט, טו 28)C.	(0)	Sharing o	
) Relationship ween interested	(c) A mount of				_	orga	naring o nization':	
(a)	Name of interested perso	n		erson and the	transaction		(d) Desc	ription of	ftransactı	ion I	enues?	
			<u></u>	organızatıon						Yes	No	
l Bruco M	urnhu		Board	Mambar	25	5 E 2 T	rontal of n	roporty			N.o.	

DLN: 93493083004141

OMB No 1545-0047

Open to Public Inspection

SCHEDULE M (Form 990)

Department of the Treasury

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

NonCash Contributions

Internal Revenue Service Name of the organization THE WALDORF SCHOOL OF GARDEN CITY

Employer identification number

Pa	rt I Types of Property				11-1855654			
		(a) Check ıf applıcable	(b) Number of Contributions	(c) Revenues reported on Form 990, Part VIII, line 1g	(d) Method of de reven	etermi	nıng	
1	Art—Works of art	аррисавіс		<u> </u>				
	Art—Historical treasures .							
	Art—Fractional interests							
4	Books and publications	Х		7,858	cost			
	Clothing and household			,				
6	goods	X		10,160	rost			
_	Boats and planes			10,100				
	Intellectual property							
	Securities—Publicly traded .							
	Securities—Closely held stock .							
	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	X	3	803	cost			
20	Drugs and medical supplies .							
	Taxıdermy							
	Historical artifacts							
	Scientific specimens							
24	Archeological artifacts Educational							
25	Other ► (supplies)	X	44	8,558	cost			
26	O ther ▶()							
27	O ther ▶()							
28	O ther ▶ ()							
29	Number of Forms 8283 received for which the organization compl				29			
							Yes	No
30a	During the year, did the organiza			. ,				
	must hold for at least three year			·	d to be used			
	for exempt purposes for the enti					30a		No
	If "Yes," describe the arrangeme			_				
31	Does the organization have a gif	t acceptano	ce policy that requires the r	eview of any non-standard	contributions?	31	Yes	
32a	Does the organization hire or use contributions?	e third parti	es or related organizations	to solicit, process, or sell r	non-cash	32a		Νο
b	If "Yes," describe in Part II							
33	If the organization did not report	revenuesı	n column (c) for a type of p	roperty for which column (a) is checked,			
	describe in Part II				•			

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
Method for Determining Number of	Part I, Column (b)	There were 49 contributors in total whom all contributed
Contributors		different items to waldorf school of garden city

Schedule M (Form 990) 2009

OMB No 1545-0047

Supplemental Information to Form 990

Department of the Treasury
Internal Revenue Service

(Form 990)

SCHEDULE 0

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

Attach to Form 990.

2009

Open to Public Inspection

Name of the organization
THE WALDORF SCHOOL OF GARDEN CITY

Employer identification number

11-1855654

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section A, Inne 2		Scott Williams and Susan Braun have a family relationship
Form 990, Part VI, Section A, Iine 7a		faculty are deemed members of the school corporation and elect 2 voting members of the board
Form 990, Part VI, Section A, line 7b		members meet annually to elect two faculty representatives to the board of trustees
Form 990, Part VI, Section B, Iine 11		the 990 is presented to the audit committee by the auditors. After the 990 is presented to the audit committee, it is then distributed to the board, the audit committee chair and the school administrator review, the document with the board at a scheduled board meeting.
Form 990, Part VI, Section B, Inne 12c		At the initial meeting of the board of trustees each year, members are asked to complete a conflict of interest disclosure statement, providing information regarding employment or service relationships, along with other areas of financial interest which may create a conflict completed forms are returned to the school administrator who informs the board chair of potential conflicts which may arise during the course of the year's board work this process is updated annually if a conflict exists, the member is required to recuse himself or herself from any vote involving his or her conflict
Form 990, Part VI, Section B, Iine 15		Annual salary increases for senior administrative employees are consistent with the percentage increase applied to all other administration and staff employees, the annual increase is reviewed and approved by the full board, based upon the recommendation of the board finance committee, this process was done in 2010, when senior administrative employees are hired, initial compensation is established by the board executive committee comprised of the board chair and several other long standing board members who are independent of the individual being hired in determining this compensation, the committee reviews the individuals professional experience and prior salary history and refers to current NYAIS, or similar salary information, as a benchmark for compensation for similar positions.
Form 990, Part VI, Section C, Iine 19		individuals who wish to review the school's articles of incorporation, conflict of interest policy, or financial statements may request this information in writing from the school's business office
form 990, part xı, line 2c		The process has not changed from the prior year

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

	Business Code	(A) Total Revenue	(B) Related or Exempt Function Revenue	(C) Unrelated Business Revenue	(D) Revenue Excluded from Tax under IRC 512, 513, or 514
TUITION	611,710	5,265,183	5,265,183		
Glen Brook Camp	611,710	538,921	538,921		
student fees	611,710	203,299	203,299		
OTHER PROGRAMS	611,710	199,323	199,323		
SUMMER SCHOOL	611,710	180,039	180,039		

Software ID: Software Version:

EIN: 11-1855654

Name: THE WALDORF SCHOOL OF GARDEN CITY

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

(A) Name and Title	(B) A verage hours	(C) Position (ch that app			(check all apply)			(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of other
	per week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	from the organization (W- 2/1099-MISC)	from related organizations (W- 2/1099- MISC)	compensation from the organization and related organizations
edward magee Treasurer	1 00	х		х				0	0	0
jay dorman board chair	1 00	Х		Х				0	0	0
rob haedrich jr Secretary	1 00	Х		х				0	0	0
barbara schiola trustee	1 00	Х						0	0	0
j bruce murphy trustee	1 00	Х						0	0	0
jeffrey kane trustee	1 00	Х						0	0	0
jon d karnofsky trustee	1 00	Х						0	0	0
keelah helwig trustee	1 00	Х						0	0	0
kristin miller trustee	1 00	Х						0	0	0
Lance Cheney trustee	1 00	Х						0	0	0
marılyn cranın trustee	1 00	Х						0	0	0
Michael Proctor trustee	1 00	Х						0	0	0
Nicole LaBarbera trustee	1 00	Х						0	0	0
reina white trustee	1 00	Х						0	0	0
scott williams trustee	1 00	Х						0	0	0
DenESE GIORDANO Dır of fINANCE & FACILIT	40 00			х				81,862	0	12,112
sabine kully faculty chair	40 00			х				87,532	0	9,901
SUSAN BRAUN school ADMINISTRATOR	40 00			x				105,138	0	658