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Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

benefit trust or private foundation) ▶ The organization may have to use a copy of this return to satisfy state reporting requirements Open to Public

Inspection

OMB No 1545-0047

A F	or the	2009 calendar year, or tax year beginning JUL 1, 2009 and ending	<u>J</u> UN 30, 2010	
В	Check If applicable	Please use IRS	D Employer identific	cation number
	Addres _change _Name	american school in London Foundation in		050400
F	change			258480
E	return Termin- ated	See Specific Instruct 15 ROSZEL ROAD Room/st)452-0990
	Amend	city or town, state or country, and ZIP + 4	G Gross receipts \$	16,076,836.
	Application		H(a) Is this a group re	
	pendin	F Name and address of principal officer WILLIAM A OBENSHAIN	for affiliates?	☐ Yes X No
		1 EAST JACKSON BLVD, CHICAGO, IL 60604	H(b) Are all affiliates inc	
<u> </u>	Tax-exe	empt status: X 501(c) (3) ◀ (insert no) 4947(a)(1) or 527		list. (see instructions)
_		e: NONE	H(c) Group exemption	•
			ear of formation: 1968 N	
	art I	Summary	001 01 101 11 101 11 101 11 1 1 1 1 1 1	Citato or logar dollinone. 24 2
		Briefly describe the organization's mission or most significant activities SEE SCHE	DULE O - AMER	TCAN SCHOOL
Activities & Governance		IN LONDON FOUNATION, INC. WAS ORGANIZED FOR		
nai		Check this box I if the organization discontinued its operations or disposed of n		
ě	1	Number of voting members of the governing body (Part VI, line 1a)	3	19
တ္		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)	4	18
త		· · · · · · · · · · · · · · · · · · ·		143
ţį		Total number of employees (Part V, line 2a)	5	142
ŧί		Total number of volunteers (estimate if necessary)	6	0.
Ac	ŀ	Total gross unrelated business revenue from Part VIII, column (C), line 12	7a	0.
	b	Net unrelated business taxable income from Form 990-T, Ine 34	7b	·
	١	0	Prior Year	Current Year 3,280,556.
ne	1	Contributions and grants (Part VIII, line 1h)	3,315,799.	
Revenue	1	Program service revenue (Part VIII, line 2g)	13,341,311.	12,783,230.
ě		Investment income (Part VIII, column (A), lines 3, 4, and 7d)	7,157.	13,050.
		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	643,656.	16 076 026
	T	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	17,307,923.	16,076,836.
		Grants and similar amounts paid (Part IX, column (A), lines 1-3)	6,887,326.	5,823,649.
		Benefits paid to or for members (Part IX, column (A), line 4)	0.	10 (51 750
es	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	13,211,093.	12,651,758.
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)	0.	
ă	b b	Total fundraising expenses (Part IX, column (D), line 25)		
ш	177	Other expenses (Part IX, column (A), lines 11a-11d, REALEIVED	3,776,382.	1,105,165.
		Total expenses. Add lines 13-17 (must equal Part-IX,-column·(A),-line·25)	23,874,801.	19,580,572.
	19	Revenue less expenses Subtract line 18 from line 12 1 1 2 11 1 2 11 1 2 1 1 2 1 1 2 1 1 2 1 1 2 1	<6,566,878.	<3,503,736.
200		8 LEB 1 4 5011	Beginning of Current Year	End of Year
Set	20	Total assets (Part X, line 16)	11,228,255.	7,769,795.
A A	21	Total liabilities (Part X, line 26) OGDEN, UT	191,270.	256,492.
Net Assets or	22	Net assets or fund balances. Subtract line 21 from line 20	11,036,985.	7,513,303.
<u>P</u>	art II	Signature Block		
=		Under penalities of penury, I declare that I have examined this return, including accompanying schedules and stateme and complete declaration of preparer (other than officer) is based on an information of which preparer has any knowledge.	ents, and to the best of my knowled edge	ge and belief, it is true, correct,
∩ 7				•
Sig	jn '	1 / Mem Chemian.	2/0	1/2011
-He	re	Signature of officer	Date 7	
¥		WILLIAM A OBENSHAIN, PRESIDENT		
MAK IMAK		Type or print name and title		
Pai	d	Preparer's Date	Check If Prepar	er's identifying number structions)
		signature / ////	employed >	
2) 2)	parer's Only	Firm's name (or KELLY, LEE & COMPANY LLC	EIN ►	
ع آ	UNIY	self-employed). 104 INTERCHANGE PLAZA		
7		address, and ZIP + 4 MONROE TWP., NJ 08831	Phone no. ► 6	09-395-8100
Ma	y the If	RS discuss this return with the preparer shown above? (see instructions)		X Yes No

Form	990 (2009) AMERICAN SCHOOL IN LONDON FOUNDATION INC 13-6258480 Page 2
Pai	t III Statement of Program Service Accomplishments
1	Briefly describe the organization's mission.
·	AMERICAN SCHOOL IN LONDON FOUNDATION WAS ORGANIZED FOR CHARITABLE AND
	EDUCATIONAL PURPOSES AND PRIMARILY FURNISHES FINANCIAL AND
	ADMINISTRATIVE SUPPORT BY EMPLOYING AND ADMINISTERING THE TEACHING AND
	SUPPORT STAFF AT THE AMERICAN SCHOOL IN LONDON.
2	Did the organization undertake any significant program services during the year which were not listed on
	the prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?
	If "Yes," describe these changes on Schedule O.
4	Describe the exempt purpose achievements for each of the organization's three largest program services by expenses
	Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and
	allocations to others, the total expenses, and revenue, if any, for each program service reported
	allocations to others, the total expenses, and revenue, if any, for each program service reported
4-	(Code.) (Expenses \$ 18518983 • including grants of \$) (Revenue \$)
4a	
	AMERICAN SCHOOL IN LONDON FOUNDATION, INC. HAS FUNDED SPECIFIC
	INITIATIVES AIMED AT HIRING, DEVELOPING AND KEEPING AN EXCEPTIONAL
	FACULTY AND STAFF. THESE INITIATIVES INCLUDED ADDITIONAL SUPPORT FOR
	PROFESSIONAL DEVELOPMENT, PROPERTY PURCHASES AS WELL AS A DISCRETIONARY
	SERVICE AWARD TO THOSE WHO SERVED ASL FOR MANY YEARS. APPROXIMATELY
	1,350 STUDENTS SERVED.
41-	(O-d
4b	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
4c	(Code) (Expenses \$ including grants of \$) (Revenue \$)
	· · · · · · · · · · · · · · · · · · ·
4d	Other program services. (Describe in Schedule O)
	(Expenses \$ including grants of \$) (Revenue \$)
4e	10 510 003
	Form 990 (2009)

		-		
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for	_		٠,,
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4		X
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and	ا ۔ ا		
_	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	_		v
-	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	,		X
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		Х
9		•		
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		Х
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments?			
10	If "Yes," complete Schedule D, Part V	10		Х
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	-10_		
• •	as applicable	11	x	
•	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? 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.			1
•	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	X	
12A	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional 12A X			ļ
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	X	
þ	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	X	ļ
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization			
	or entity located outside the United States? If "Yes," complete Schedule F, Part II	15	X	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals			
	located outside the United States? If "Yes," complete Schedule F, Part III	16		X
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		X
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	 	X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	۱		
	complete Schedule G, Part III	19		X
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20 Form	990	3000)
			700	~ ひひりり

Form	990	(2009)
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Form 990 (2009) AMERICAN SCHOOL IN LONDON FOUNDATION INC 13-6258480 Part IV | Checklist of Required Schedules (continued)

Page	4

				· · · · ·
	Did the average transition was at the decided of the state of the stat		Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the	١		١,,
00	United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX,			
00	column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 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			
240	Schedule J	23	X	
24 a	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 lines 24b through 24d and complete			
	Schedule K. If "No", go to line 25	04-		v
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24a		X
-	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	24b	-	
С	any tax-exempt bonds?	24c		
а	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d	 	
	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a	24U		
200	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		х
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and	250	-	1
_	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		x
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified	200		1
	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		x
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, 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		x
28	Was the organization a party to a business transaction with one of the following parties, (see Schedule L, Part IV	<u> </u>		
	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		х
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		Х
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 direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	ļ	X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			1
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33	X	
34	Was the organization related to any tax-exempt or taxable entity?	1		
	If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		X
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?			
	If "Yes," complete Schedule R, Part V, line 2	35		X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			ł
	If "Yes," complete Schedule R, Part V, line 2	36	L	X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	1		1
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
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	X	<u> </u>
		Form	990	2009)

009) AMERICAN SCHOOL IN LONDON FOUNDATION INC 13-6258480
Statements Regarding Other IRS Filings and Tax Compliance Part V

				Yes	No								
1a	Enter the number reported in Box 3 of Form 1096, Amual Summary and Transmittal of												
	U.S. Information Returns. Enter -0- if not applicable	_1a2											
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b 0											
С	Did the organization comply with backup withholding rules for reportable payments to vendors and re	eportable gaming											
	(gambling) winnings to prize winners?	1	1c	_X_									
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,	4.40											
	filed for the calendar year ending with or within the year covered by this return	2a 143											
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns		<u>2b</u>	X									
_	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions)												
	a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?												
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O		<u>3b</u>										
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other a	•											
	financial account in a foreign country (such as a bank account, securities account, or other financial a	account)?	4a	X									
b	If "Yes," enter the name of the foreign country ► <u>UNITED KINGDOM</u>												
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign I	Bank and											
_	Financial Accounts.												
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5a		X								
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transa		5b		X								
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Rega	raing Pronibitea			1								
e.	Tax Shelter Transaction?	o organization collect	<u>5c</u>										
ъа	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the pay contributions that were not tay deductible?	le organization solicit	6-		x								
L	any contributions that were not tax deductible? If "Yes," did the organization include with every solicitation an express statement that such contribut	ione or afte	<u>6a</u>										
b	were not tax deductible?	ions or gitts	e h										
7	Organizations that may receive deductible contributions under section 170(c).		6b										
		noods and senuces											
а	a 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?												
h	b If "Yes," did the organization notify the donor of the value of the goods or services provided?												
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it w	as required	7b										
	to file Form 8282?	ao 104000	7c		X								
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d											
	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a p												
-	benefit contract?		7e		X								
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contri	act?	7f		Х								
q	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?		7g		X								
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-0		7h		х								
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting or	ganizations. Did the											
	supporting organization, or a donor advised fund maintained by a sponsoring organization, have exc	ess business holdings											
	at any time during the year?		8		X								
9	Sponsoring organizations maintaining donor advised funds.												
а	Did the organization make any taxable distributions under section 4966?		9a		X								
b	Did the organization make a distribution to a donor, donor advisor, or related person?		9b		X								
10	Section 501(c)(7) organizations. Enter.												
а	Initiation fees and capital contributions included on Part VIII, line 12	10a	ļ										
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	Į										
11	Section 501(c)(12) organizations. Enter	1 1		1									
а	Gross income from members or shareholders	11a											
b	Gross income from other sources (Do not net amounts due or paid to other sources against												
	amounts due or received from them)	11b	1										
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	12b		L	<u> </u>								

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

Sec	tion A. Governing Body and Management											
			Yes	No								
1a	Enter the number of voting members of the governing body 1a 19											
b	Enter the number of voting members that are independent 1b 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?											
3												
	of officers, directors or trustees, or key employees to a management company or other person?											
4												
5	Did the organization become aware during the year of a material diversion of the organization's assets?											
6	Does the organization have members or stockholders?	6		X								
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the											
	governing body?	7a		<u>X</u>								
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		<u>X</u>								
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year											
	by the following.	0-	v									
	The governing body?	8a_	X									
	, , , , , , , , , , , , , , , , , , , ,	8b	Λ_									
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the	9		x								
800	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9										
<u> </u>	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)		Yes	No								
40-	Does the organization have local chapters, branches, or affiliates?	10a	163	X								
	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates,	104										
b	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	X									
11A	The state of the s											
12a	The state of the s	12a	Х									
	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise											
-	to conflicts?	12b	X									
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	Х									
13	Does the organization have a written whistleblower policy?	13		X								
14	Does the organization have a written document retention and destruction policy?	14	X	<u> </u>								
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	X									
b	Other officers or key employees of the organization	15b	X	<u></u>								
	If "Yes" to line 15a or 15b, 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		1	,.								
	taxable entity during the year?	<u>16a</u>		X								
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		1									
	exempt status with respect to such arrangements?	16b		<u></u>								
	ction 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 Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available	iof										
	public inspection. Indicate how you make these available. Check all that apply.											
	Own website Another's website X Upon request	nd fin	noial									
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, a	iiu iina	u iciai									
	statements available to the public.	tion:										
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organiza INTERNATIONAL SCHOOLS SERVICES, INC 609-452-0990	aion.	_									
			-									
	15 ROSZEL ROAD, PRINCETON, NJ 08540		000	(0000)								

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

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

1a Complete this table for all persons required to be listed 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. 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, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

(A) Name and Title	(B) Average				(C) osition			(D) Reportable	(E) Reportable	(F) Estimated
	hours	(cl	neck	eck all that app		арр	ly)	compensation	compensation	amount of
	per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
WILLIAM A OBENSHAIN										
PRESIDENT	5.00	X	<u> </u>	X	L			0.	0.	0.
BARBARA G. COLONEY										
VICE PRESIDENT	5.00	X		X			ļ	0.	0.	0.
JULIE ALEXANDRE								_	_	_
DIRECTOR	5.00	X		<u> </u>			ļ	0.	0.	
ALBERT D. ANGEL									_	_
DIRECTOR	5.00	X	ļ	<u> </u>	<u> </u>		ļ	0.	0.	<u> </u>
DANIEL F. COUGHLIN										•
DIRECTOR	5.00	X	-				_	0.	0.	0.
TIMOTHY CRAIGHEAD	5 00								•	•
DIRECTOR	5.00	X						0.	0.	0.
BRAD F. ENGLAND	F 00	١,,			ŀ				ا م	0
DIRECTOR	5.00	X	_				<u> </u>	0.	0.	0.
JOHN FARMER	F 00	.							•	0
DIRECTOR LORI FIELDS	5.00	<u> </u>		_	_			0.	0.	0.
DIRECTOR	5.00	v						0.	0.	0.
DAVID FIFE	3.00	^	-		-			0.		
DIRECTOR	5.00	v						0.	0.	0.
DIANA H. GREENE	3.00	^			-	-			<u></u>	<u></u>
DIRECTOR	5.00	v						0.	0.	0.
COREEN R. HESTER	3.00	122	-					•	0.	
DIRECTOR	40.00	x				x		358,747.	0.	21,250.
JANET NEWKIRK								330// 1/(
DIRECTOR	5.00	x						0.	0.	0.
WILLIAM C. MULES					_	<u> </u>				<u> </u>
DIRECTOR	5.00	X		{				0.	0.	0.
BARRY M. SABLOFF										
DIRECTOR	5.00	X			1			0.	0.	0.
WILLIAM L. SCHEFFLER										
DIRECTOR	5.00	X			L			0.	0.	_0.
ELLEN R. STOFAN										
DIRECTOR	5.00	X						0.	0.	_0.

Part VII | Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued) (B) (C) (D) (F) (E) Average Name and title Position Reportable Reportable Estimated (check all that apply) compensation hours compensation amount of per from from related other indavidual trustee or director week the organizations compensation Highest compensated employee organization (W-2/1099-MISC) from the Institutional trustee (W-2/1099-MISC) organization Key employee and related)fficer organizations SUSAN J. WILEN DIRECTOR 5.00 X 0. 0. 0. R. PHILLIP WHEELER DIRECTOR 0. 5.00 X 0. 0. RALPH H. JAHR X EX-OFFICO SEC'Y/ TREASUR 5.00 X 0. 0. CATHLEEN WOLFE EX-OFFICO DIRECTOR 5.00 X 0. 0. 0. JOHN G CLARK 24,500. DIRECTOR OF ADVANCEMENT 40.00 X 263,372. 0. MICHAEL EHRHARDT PRINCIPAL 40.00 X 0. 12,332. 289,305. FREDERICK KOVAL X ATHLETICS DIRECTOR 40.00 210,371 0. 23,475. JULIE RYAN 40.00 Х 308,016. 13,621. PRINCIPAL 0. 1,429,811. 0. 95,178. 1b Total Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization Yes No 3 Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on X line 1a? If "Yes," complete Schedule J for such individual 3 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 Х 4 Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to Х the organization? If "Yes," complete Schedule J for such person Section B. Independent Contractors Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from NONE the organization (A) (B) (C) Name and business address Description of services Compensation

Total number of independent contractors (including but not limited to those listed above) who received more than

\$100,000 in compensation from the organization

	rt VI	II Statement of Rever		OT IN TO	NDON FOUND	ATION INC	13-6236	460 Fage 9
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts	k c c e	Related organizations Government grants (contribut All other contributions, gifts, gran similar amounts not included abo	ts, and ve 1f	1,335.				
and		Noncash contributions included in lines Total. Add lines 1a-1f	1a-1f \$		3280556.			
Program Service Revenue	2 a	MANAGEMENT FEE-		Business Code 611710	12,783,230,	12,783,230,		
	c e f							
		Total. Add lines 2a-2f			12,783,230.			
	3 4 5	Investment income (including other similar amounts) Income from investment of ta Royalties		▶ .	13,050.			13,050.
	6 a	a Gross Rents b Less rental expenses	(i) Real	(II) Personal				
		Rental income or (loss) Net rental income or (loss) Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other				
	(Less: cost or other basis and sales expenses Gain or (loss) Net gain or (loss) 						
Other Revenue		Gross income from fundraisin including \$ 1,3 contributions reported on line Part IV, line 18	335. of	0.				
Othe	(Less: direct expenses Net income or (loss) from fund	t draising events		0.			
		 Gross income from gaming at Part IV, line 19 Less direct expenses 	ctivities See a b					
		 Net income or (loss) from gan Gross sales of inventory, less and allowances 	_	>	 .		 .	
		Less. cost of goods sold Net income or (loss) from sale	tes of inventory	>				
	11 :	Miscellaneous Revenu		Business Code				
	(d All other revenue Total. Add lines 11a-11d		•				
93200 02-04	12	Total revenue. See instructions.		>	16,076,836,	12,783,230.	0.	13,050. Form 990 (2009)

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

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D). (A) Total expenses (D) Fundraising (C) Do not include amounts reported on lines 6b, Management and general expenses Program service 7b, 8b, 9b, and 10b of Part VIII. expenses' expenses 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 3 Grants and other assistance to governments, organizations, and individuals outside the U.S. 5,823,649. 5,823,649 See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, 379,997. 379,997. trustees, and key employees 6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 10,914,978. Other salaries and wages 10,914,978. Pension plan contributions (include section 401(k) 1,045,376. 1,045,376. and section 403(b) employer contributions) Other employee benefits 9 311,407. 311,407. 10 Payroll taxes Fees for services (non-employees). 11 a Management 25,450. 25,450. **b** Legal 40,840. 40,840 Accounting C d Lobbying Professional fundraising services. See Part IV, line 17 f Investment management fees Other g Advertising and promotion 12 13 Office expenses Information technology 14 Royalties 15 Occupancy 16 11,608. 11,608 17 Travel Payments of travel or entertainment expenses 18 for any federal, state, or local public officials Conferences, conventions, and meetings 19 20 Interest 21 Payments to affiliates Depreciation, depletion, and amortization 22 23 Insurance Other expenses. Itemize expenses not covered above. (Expenses grouped together and labeled 24 miscellaneous may not exceed 5% of total expenses shown on line 25 below.) 961,495. 961,495. LOSS ON CURRENCY EXCHAN 18,126. b COMMUNICATIONS, SUBSCRI 18,468. 36,594. 19,186. 19,186. c PROFESSIONAL FEES 9,992. 9,992 d GENERAL INSURANCE e PROVISION FOR DOUBTFUL 0. 0. f All other expenses 19,580,572. 18,518,983: 1,061,589 0. Total functional expenses Add lines 1 through 24f 25 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

Page 10

Part X Balance Sheet (A) (B) End of year Beginning of year 37,426. Cash - non-interest-bearing 1 180,612. 237,448. 2 Savings and temporary cash investments 2 Pledges and grants receivable, net 10,784,163. 7,321,922. 3 4 Accounts receivable, net 4 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 5 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L 6 Notes and loans receivable, net 7 Inventories for sale or use A 8 Prepaid expenses and deferred charges 9 10a Land, buildings, and equipment cost or other basis. Complete Part VI of Schedule D 10a b Less accumulated depreciation 10b 10c 11 Investments - publicly traded securities 11 12 Investments - other securities See Part IV, line 11 12 13 Investments - program-related. See Part IV, line 11 13 14 Intangible assets 14 263,480. 172,999. 15 Other assets See Part IV, line 11 15 11,228,255. 7,769,795. 16 Total assets. Add lines 1 through 15 (must equal line 34) 16 Accounts payable and accrued expenses 191,270. 256,492. 17 18 Grants payable 18 19 Deferred revenue 19 20 Tax-exempt bond liabilities 20 Escrow or custodial account liability. Complete Part IV of Schedule D 21 iabilities Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 22 Secured mortgages and notes payable to unrelated third parties 23 Unsecured notes and loans payable to unrelated third parties 24 Other liabilities. Complete Part X of Schedule D 25 191,270. 26 256,492. 26 Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117, check here

X and complete lines 27 through 29, and lines 33 and 34. Net Assets or Fund Balances 73,916. 27 Unrestricted net assets 27 92,402. 10,888,543. 28 Temporarily restricted net assets 7,402,049. Permanently restricted net assets 74,526. 18,852. 29 Organizations that do not follow SFAS 117, check here
and complete lines 30 through 34. Capital stock or trust principal, or current funds 30 31 Paid-in or capital surplus, or land, building, or equipment fund 31 32 Retained earnings, endowment, accumulated income, or other funds 32 11,036,985. 33 Total net assets or fund balances 33 7,513,303.

> 7,769,795. Form 990 (2009)

11,228,255.

Total liabilities and net assets/fund balances

Form	990 (2	(2009) AMERICAN SCHOOL IN LONDON FOUNDATION INC 13-625	8480	Pag	ge 12					
Part XI Financial Statements and Reporting										
			-	Yes	No					
1	Acco	ounting method used to prepare the Form 990: Cash X Accrual Other								
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.									
2a	2a Were the organization's financial statements compiled or reviewed by an independent accountant?									
b	b Were the organization's financial statements audited by an independent accountant?									
С	If "Ye	es" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit,								
	reviev	ew, or compilation of its financial statements and selection of an independent accountant?	2c	X						
	If the	e organization changed either its oversight process or selection process during the tax year, explain in Schedule O.								
d	If "Ye	es" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a								
	consc	solidated basis, separate basis, or both:								
		Separate basis X Consolidated basis Both consolidated and separate basis								
За	Asaı	result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit								
	Act a	and OMB Circular A-133?	_3a		X					
b	If "Ye	es," did the organization undergo the required audit or audits? If the organization did not undergo the required audit								
	or au	udits, explain why in Schedule O and describe any steps taken to undergo such audits	3b							

Form **990** (2009)

SCHEDULE A

Department of the Treasury Internal Revenue Service

(Form 990 or 990-EZ)

Public Charity Status and Public Support

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

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

OMB No 1545-0047

Open to Public Inspection

lame of	uie oi yanizati	OH						=		denuncauc		•		
		AMERICA	N SCHOOL IN	LONDO	N FOU	NDATI	<u>ON IN</u>	<u> </u>	<u> 13</u>	<u>-6258</u>	<u>480</u>	_		
Part I	Reason 1	or Public Chari	ty Status (All organiz	ations mus	st complet	e this part) See inst	ructions				_		
he organ	ization is not a	private foundation t	pecause it is: (For lines 1	1 through 1	l 1, check d	only one b	ox.)							
1 🖳	A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).													
2 🖳	A school desc	escribed in section 170(b)(1)(A)(ii). (Attach Schedule E.)												
з 🖳	A hospital or	a cooperative hospit	tal service organization o	described i	n ection	170(b)(1)(A)(iii).							
4	A medical res	earch organization o	perated in conjunction	with a hos	pital descr	ibed in se	ction 170	(b)(1)(A)(iii	i). Enter th	ne hospital's	s name,			
	city, and state	e·												
5 🔲	-		benefit of a college or ur	niversity ov	vned or op	erated by	a governr	nental unit	describe	d ın				
. \Box		(b)(1)(A)(iv). (Comple	•											
6			ent or governmental uni											
7 X	-		eives a substantial part	of its supp	ort from a	governme	ntal unit o	r from the	general p	ublic descr	ibed in			
	•	b)(1)(A)(vi). (Complet	•											
8			ection 170(b)(1)(A)(vi).											
9 📖	-	•	eives: (1) more than 33					•		-	•			
			nctions - subject to certa							-		t		
	income and u	inrelated business ta	axable income (less sect	tion 511 ta	x) from bu	sinesses a	cquired b	y the orga	nization a	fter June 30	0, 1975			
	See section :	509(a)(2). (Complete	Part III.)											
10 📙	An organizati	on organized and op	perated exclusively to te	st for publi	c safety. S	ee sectio	n 509(a)(4	ł).						
11 📖	_	• .	perated exclusively for the		· ·					· •				
	more publicly	supported organiza	itions described in secti	on 509(a)(1	l) or sectio	n 509(a)(2). See sec	tion 509(a	a)(3). Che	ck the box	that			
	describes the	type of supporting	organization and compl						_					
	a L Type I	b	_ Type ۱۱ و	Typ	e III - Func	tionally int	egrated		d 📖	Type III · O	other			
е 📖	By checking	this box, I certify tha	t the organization is not	controlled	directly or	r indirectly	by one or	more disc	qualified p	ersons oth	er than			
	foundation m	anagers and other t	han one or more publicly	y supporte	d organiza	tions desc	cribed in s	ection 509	(a)(1) or s	ection 509((a)(2)			
f	If the organiz	ation received a writ	ten determination from t	the IRS tha	at it is a Ty	pe I, Type	II, or Type	e III				_		
	supporting or	rganization, check th	nis box									_		
g	Since August	17, 2006, has the o	organization accepted ar	ny gift or co	ontribution	from any	of the folk	owing pers	sons?	_		_		
	(i) A persor	n who directly or ind	irectly controls, either al	lone or tog	ether with	persons d	escribed	n (ii) and (i	ii) below,		Yes No	,		
	the gove	erning body of the su	upported organization?							11g(i)				
	(ii) A family	member of a persor	n described in (i) above?	•						11g(ii)				
	(iii) A 35% d	controlled entity of a	person described in (i)	or (ii) above	≘ ?					11g(iii)				
h	Provide the fo	ollowing information	about the supported or	ganization	(s)									
		•	• •											
(i) Name	e of supported	(ii) EIN	(iii) Type of	(iv) Is the o	rganization	(v) Did you	notify the	(vi) Is	the	(vii) Am	nunt of			
• •	anization	(11) 2.11	organization (described on lines 1-9	in col. (i) lis	sted in your	organizat	ion in col.	organizátic (i) organiz	on in col. ed in the l	supp				
			above or IRC section	governing	document?	(i) of your	support?	\``,	.7					
			(see instructions))	Yes	No	Yes	No	Yes	No					
	-													
				}					<u> </u>					
										_				
				1										
					1			<u>.</u>						
					-				 -	•		-		
Total														

Schedule A (Form 990 or 990-EZ) 2009 A	MEDICAN C	CHOOT, TNI 1	LONDON FOI	י זאר דייי אר רוזאו	TNC12 6250	2490
Part II Support Schedule for	Organizations	Described in	Sections 170(b	o)(1)(A)(iv) and	I 170(b)(1)(A)(v	i) Page 2
(Complete only if you checked	d the box on line 5	, 7, or 8 of Part I.)				
Section A. Public Support						
Calendar 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						
ınclude any "unusual grants ")	2,664,051,	22,535,675.	11,837,228,	3,959,455,	3,280,556.	44,276,965
2 Tax revenues levied for the organ-						
ization'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	2,664,051.	22,535,675.	11,837,228.	3,959,455.	3,280,556.	44,276,965.
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,			1			
column (f)						
6 Public support. Subtract line 5 from line 4 Section B. Total Support			<u> </u>	-,		44,276,965.
	4-> 000r	# \ 000C	() 0007	(n 0000	4 3 0000	
Calendar year (or fiscal year beginning in) 7 Amounts from line 4	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
8 Gross income from interest.	2,664,051,	22,535,675.	11,837,228.	3,959,455,	3,280,556.	44,276,965.
dividends, payments received on						
securities loans, rents, royalties			İ			
and income from similar sources	309.	15,686.	1,896.	7,157.	13,050.	38,098.
9 Net income from unrelated business	307.	13,000.	1,000.	1,1510	13,030.	30,030.
activities, whether or not the						
business is regularly carried on			1		i	
10 Other income. Do not include gain						
or loss from the sale of capital						
assets (Explain in Part IV.)						
11 Total support. Add lines 7 through 10				-		44,315,063,
12 Gross receipts from related activities,	etc. (see instruction	ons)			12	
13 First five years If the Form 990 is for		•	d fourth or fifth tax	L Vear as a saction		

13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3)
organization, check this box and stop here
Section C. Computation of Public Support Percentage

14 Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f))	14	99.	91	%
15 Public support percentage from 2008 Schedule A, Part II, line 14	15	99.	93	%
16a 33 1/3% support test - 2009. If the organization did not check the box on line 13, and line 14 is 33 1/3% or r	nore,	check this box and		
stop here. The organization qualifies as a publicly supported organization				X
b 33 1/3% support test - 2008. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3%	orn	nore, check this box		
and stop here. The organization qualifies as a publicly supported organization				
17a 10% -facts-and-circumstances test - 2009. If the organization did not check a box on line 13, 16a, or 16b,	and li	ne 14 is 10% or more	,	
and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Pa	ırt IV	how the organization		
meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization				
b 10% -facts-and-circumstances test - 2008. If the organization did not check a box on line 13, 16a, 16b, or	17a, a	and line 15 is 10% or		
more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain	n ın F	Part IV how the		
organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization	anıza	ition		
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box	and s	ee instructions		

	_			
Schedule	A (Form	990 or	990·FZ	2009

ection A. Public Support	(.) 0005	# \ 0000	4) 0007	(1) 0000	4 1 0000	1
alendar year (or fiscal year beginning in) 1 Gifts, grants, contributions, and	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
membership fees received (Do not						
include any "unusual grants.")						
2 Gross receipts from admissions,						
merchandise sold or services per-						
formed, or facilities furnished in						
any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that						
are not an unrelated trade or bus-						
iness under section 513						
4 Tax revenues levied for the organ-						
ization's benefit and either paid to						
or expended on its behalf						
5 The value of services or facilities						
furnished by a governmental unit to						
the organization without charge		-			ļ	
Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and						
3 received from disqualified persons					<u>.</u>	-
b 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						-
c Add lines 7a and 7b						ļ <u></u>
B Public support (Subtract line 7c from line 6) ection B. Total Support		<u> </u>	· · · · · · · · · · · · · · · · ·	<u> </u>		I
alendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9 Amounts from line 6						
Oa Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income						
(less section 511 taxes) from businesses						
acquired after June 30, 1975						
c Add lines 10a and 10b						
Net income from unrelated business						
activities not included in line 10b, whether or not the business is						
regularly carried on						
Other income. Do not include gain or loss from the sale of capital				1		
assets (Explain in Part IV.)					<u> </u>	
Total support (Add lines 9, 10c, 11, and 12)				l		
4 First five years. If the Form 990 is for	the organization'	s first, second, thir	d, fourth, or fifth t	ax year as a secti	on 501(c)(3) organi	zation,
check this box and stop here	Support Do	roontogo				
ection C. Computation of Public Public support percentage for 2009 (III			polumo (fi)		15	
6 Public support percentage for 2009 (iii	75.5	•	column (i))		16	
ection D. Computation of Inves					110 1	
			ne 13 column (fl)		17	
7 Investment income percentage for 200	•	•	.5 15, 60idilli (i))		18	
· · · · · · · · · · · · · · · · · · ·		. a.c.ii, iii 0 17				17 is not
8 Investment income percentage from 2			on line 14, and line	e 15 is more than	33 1/3% ארוו וווום	
8 Investment income percentage from 2 9a 33 1/3% support tests - 2009. If the	organization did i	not check the box				17 15 1101
 Investment income percentage for 2008. Investment income percentage from 2. 33 1/3% support tests - 2009. If the order than 33 1/3%, check this box and b. 33 1/3% support tests - 2008. If the order tests in the order tests in the order tests. 	organization did i distop here. The	not check the box organization quali	fies as a publicly s	supported organiz	zation	>

Schedule DS (Form 990)

Department of the Treasury Internal Revenue Service

upplemental Financial Statements
► Complete if the organization answered "Yes," to Form 990,

Part IV, line 6, 7, 8, 9, 10, 11, or 12. ➤ Attach to Form 990. ➤ See separate instructions. OMB No 1545-0047 Open to Public Inspection

Name of the organization

Employer identification number

	AMERICAN SCHOOL IN					<u>3-62584</u>	
Par	t I Organizations Maintaining Donor Advise	ed Funds or	Other Similar	Funds or A	ccounts.	Complete if t	he
	organization answered "Yes" to Form 990, Part IV, lin			 .			
		(a) Do	nor advised funds		b) Funds and	d other accou	ints
1	Total number at end of year						
2	Aggregate contributions to (during year)						
3	Aggregate grants from (during year)						
4	Aggregate value at end of year	<u></u>		l			
5	Did the organization inform all donors and donor advisors in	writing that the	assets held in don	or advised fun	ıds	_	
	are the organization's property, subject to the organization's	exclusive lega	control?			Yes	L∐ No
6	Did the organization inform all grantees, donors, and donor a	advisors in writi	ng that grant funds	can be used	only		
	for charitable purposes and not for the benefit of the donor	or donor adviso	r, or for any other p	ourpose confei	ring	_	
D	impermissible private benefit?				· · · · · · · · · · · · · · · · · · ·	Yes	No_
Par				m 990, Part IV,	line 7.		
1	Purpose(s) of conservation easements held by the organizat						
	Preservation of land for public use (e.g., recreation or	oleasure)		of an historical	-		
	Protection of natural habitat		Preservation	of a certified h	istoric structi	ıre	
_	Preservation of open space						
2	Complete lines 2a through 2d if the organization held a quali	fied conservati	on contribution in t	he form of a co	onservation e	asement on t	ine last
	day of the tax year				Uold (at the End of th	a Tay Vans
_	Total number of conservation easements				2a	t the End of th	e lax real
a b	Total acreage restricted by conservation easements				2b		
c	Number of conservation easements on a certified historic st	ructure include	d in (a)		2c		
d	Number of conservation easements included in (c) acquired		α 111 (α)		2d		
3	Number of conservation easements modified, transferred, re		ushed or terminate	ed by the organ		a the tax	
•	year >	icasca, exting	aloned, or terrimate	od by the organ	iization dami	g the tax	
4	Number of states where property subject to conservation ea	sement is loca	ted >				
5	Does the organization have a written policy regarding the pe			dling of			
-	violations, and enforcement of the conservation easements		J, -, -,			Yes	☐ No
6	Staff and volunteer hours devoted to monitoring, inspecting	, and enforcing	conservation ease	ments during t	he year		
7	Amount of expenses incurred in monitoring, inspecting, and	_					
8	Does each conservation easement reported on line 2(d) abo	ve satisfy the r	equirements of sec	tion 170(h)(4)(l	3)(i)		
	and section 170(h)(4)(B)(ii)?					Yes	No No
9	In Part XIV, describe how the organization reports conservation	ion easements	in its revenue and	expense state	ment, and ba	lance sheet,	and
	include, if applicable, the text of the footnote to the organization	ition's financial	statements that de	escribes the or	ganızatıon's a	accounting fo	or
	conservation easements						
Pa	rt III Organizations Maintaining Collections of	•		s, or Other	Similar As	ssets.	
	Complete if the organization answered "Yes" to Form	1990, Part IV, I	ne 8.				
1a	If the organization elected, as permitted under SFAS 116, n	•					
	treasures, or other similar assets held for public exhibition, e		search in furtheran	ce of public se	ervice, provide	e, in Part Aiv,	, the text of
	the footnote to its financial statements that describes these			nd balance eb	and supplied of	art biotomool	tropouros
D	If the organization elected, as permitted under SFAS 116, to						
	or other similar assets held for public exhibition, education,	or research in i	urtherance of publi	c service, prov	ide the follow	ving amounts	Telating to
	these items:				• •		
	(i) Revenues included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X				~ •	_	
2	If the organization received or held works of art, historical tri	pastires or oth	er similar assets for	 financial dain	provide		
2	the following amounts required to be reported under SFAS	•		mancial yalli,	PIOVIGE		
а		, .o roating to	anoso noms.		▶ \$		
	Assets included in Form 990, Part X				S S	-	
~					· · —		

		N SCHOOL I) Page 2	
Par											
3	Using the organization's acquisition, accessi	on, and other record	ds, chec	k any of the	following tha	at are a s	ignificant	use of its	collection	n items	
	(check all that apply):										
а	Public exhibition	c	╸┞	Loan or exc	hange progr	ams					
b	Scholarly research	e	• 🗀	Other							
С	Preservation for future generations										
4	Provide a description of the organization's co	ollections and explai	n how t	hey further t	he organizati	ion's exe	mpt purpo	ose in Par	t XIV.		
5	During the year, did the organization solicit o					er sımıla	r assets		_		
	to be sold to raise funds rather than to be ma								Yes	No_	
Par	t IV Escrow and Custodial Arran		ete if or	ganization ar	nswered "Ye	s" to For	m 990, Pa	art IV, line	9, or		
	reported an amount on Form 990, Pa	t X, line 21.									
1a	Is the organization an agent, trustee, custode	an or other intermed	diary foi	contribution	s or other as	ssets not	included		_		
	on Form 990, Part X?							L	」 Yes	∟ No	
b	If "Yes," explain the arrangement in Part XIV	and complete the fo	ollowing	table:							
									Amount	<u> </u>	
C	Beginning balance						1c				
d	Additions during the year						1d				
е	Distributions during the year						1e				
f	Ending balance						_1f				
2a	Did the organization include an amount on Fe	orm 990, Part X, line	21?						Yes	☐ No	
	If "Yes," explain the arrangement in Part XIV			·		_ 		 			
Par	t V Endowment Funds. Complete	f the organization ar	nswered	"Yes" to Fo	rm 990, Part	IV, line	10.		,		
		(a) Current year	(b)	Prior year	(c) Two yea	rs back	(d) Three y	ears back	(e) Four	years back	
1a	Beginning of year balance										
b											
С	c Net investment earnings, gains, and losses										
d	Grants or scholarships										
е	Other expenditures for facilities		1								
	and programs										
f	Administrative expenses										
g	End of year balance										
2	Provide the estimated percentage of the year	r end balance held	as:								
а	Board designated or quasi-endowment		%								
b	Permanent endowment >	%									
С	Term endowment ▶	%									
За	Are there endowment funds not in the posse	ession of the organiz	ation th	nat are held a	ind administe	ered for t	the organiz	zation	_		
	by									Yes No	
	(i) unrelated organizations								3a(ı)		
	(ii) related organizations								3a(ii)		
b	If "Yes" to 3a(ii), are the related organizations	s listed as required o	on Sche	edule R?					3b		
4	Describe in Part XIV the intended uses of the										
Pai	rt VI Investments - Land, Building	gs, and Equipm	ent. s	ee Form 990	, Part X, line	10					
	Description of investment	(a) Cost or o		, , ,	or other (other)		ccumulate	I .	(d) Boo	k value	
	Land	2233 (111031		54010	\	- 30	F. 55/40/01				
_	Buildings	-		+						- ***	
	_					 					
	Leasehold improvements					 					
	Equipment					1					
	Other		. V!	man (D) train	10(a))	1		_		0.	
<u>ı ota</u>	I. Add lines 1a through 1e. (Column (d) must e	iquai Form 990, Pan	$x, \infty n$	ırın (B), IIne	IU(C).)					<u> </u>	

Schedule D (Form 990) 2009

Schedule D (Form 990) 2009 AMERICAN SC	CHOOL IN LONDON	FOUNDATIO	N INC	13-6258480 Page 3
Part VII Investments - Other Securities. S	ee Form 990, Part X, line 12			-
(a) Description of security or category (including name of security)	(b) Book value		c) Method of or end-of-ye	of valuation. ear market value
Financial derivatives				
Closely-held equity interests				·
Other				
		·		
Total. (Col (b) must equal Form 990, Part X, col (B) line 12.)				
Part VIII Investments - Program Related.	See Form 990, Part X, line 13			
(a) Description of investment type	(b) Book value		c) Method of	of valuation ear market value
		COST	Or end-or-ye	- Inarket value
		•		
	 			
Total. (Col (b) must equal Form 990, Part X, col (B) line 13.)				
Part IX Other Assets. See Form 990, Part X, line	e 15.			
(a) Description			(b) Book value
			·	
	.			
Total. (Column (b) must equal Form 990, Part X, col (B) lir Part X Other Liabilities. See Form 990, Part X	18 15)			
1. (a) Description of liability		(b) Amount		
Federal income taxes		(b) / unoun		
r ederal income taxes				
Total. (Column (b) must equal Form 990, Part X, col (B) III	ne 25.)			
2. FIN 48 Footnote In Part XIV, provide the text of the fo		financial statements t	that reports	the organization's liability for

uncertain tax positions under FIN 48. 932053 02-01-10

Schee Par	AMERICAN SCHOOL IN LONDON IN AMERICAN SCHOOL IN LONDON IN TAXABLE AND AMERICAN SCHOOL IN TAXABLE AND AMERICA					Page 4
1	Total revenue (Form 990, Part VIII, column (A), line 12)		1		16,076,	836.
2	Total expenses (Form 990, Part IX, column (A), line 25)		2		19,580	572.
3	Excess or (deficit) for the year. Subtract line 2 from line 1		3		<3,503	
4	Net unrealized gains (losses) on investments		4			
5	Donated services and use of facilities		5			
6	Investment expenses		6			
7	Prior period adjustments		7			
8	Other (Describe in Part XIV.)		8		<19	946.
9	Total adjustments (net). Add lines 4 through 8		9		<19	946.
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and	d 9	10		<3,523	682.
Par	t XII Reconciliation of Revenue per Audited Financial Stateme	nts With Reve	nue per R	eturn		
1	Total revenue, gains, and other support per audited financial statements			1	16,076	<u>.836.</u>
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12.	1 1				
а	Net unrealized gains on investments	2a				
b	Donated services and use of facilities	2b				
С	Recoveries of prior year grants	2c]		
d	Other (Describe in Part XIV)	2d]		
е	Add lines 2a through 2d			2e		<u>0.</u>
3	Subtract line 2e from line 1			3	16,076	<u>,836.</u>
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1.			1		
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a]		
b	Other (Describe in Part XIV)	4b]		
С	Add lines 4a and 4b			4c		<u> </u>
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)			5	16,076	<u>,836.</u>
Pai	t XIII Reconciliation of Expenses per Audited Financial Stateme	ents With Expe	enses per	Retu		
1	Total expenses and losses per audited financial statements			1	19,580	<u>,572.</u>
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	1 1				
а	Donated services and use of facilities	2a		-		
b	Prior year adjustments	2b		4 1		
С	Other losses	2c		- 1		
d	Other (Describe in Part XIV)	2d		-		_
е	Add lines 2a through 2d			2e	10 500	0.
3	Subtract line 2e from line 1			3	19,580	<u>,572.</u>
4	Amounts included on Form 990, Part IX, line 25, but not on line 1	1 1				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		4		
b	Other (Describe in Part XIV.)	4b		4		•
С	Add lines 4a and 4b			4c	10 500	0.
Par	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18) † XIV Supplemental Information			5	19,580	,5/4.
Com	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part II e 2, Part XI, line 8; Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b Also comp					4, Part
PAI	RT XI, LINE 8 - OTHER ADJUSTMENTS:					
CUI	MULATIVE TRANSLATION ADJUSTMENT: -19946.				- ··	
						

Schedule F (Form 990)

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.

OMB No 1545-0047 Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

AMERICAN SCHOOL	רוא די דא	ON FOID	ATTON INC		13-62584	180
			tside the United States. Comp	lete if the organ		
to Form 990, Par		<u> </u>		·····		
_			ds to substantiate the amount of the gradection criteria used to award the gradection		_	X Yes No
2 For grantmakers. Desc	ribe in Part IV th	e organization's	procedures for monitoring the use of	grant funds outs	side the United S	States.
3 Activities per Region (U	se Schedule F-1	(Form 990) if ad	ditional 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)	is a prog describe	rity listed in (d) gram service, specific type e(s) in region	(f) Total expenditures for region
EUROPE (INCLUDING ICELAND & GREENLAND)	0	143	PROGRAM SERVICES AND GRANTS	EDUCATIONAL	SERVICES	18475407.
	0	0			·	0,
	, c	0		<u> </u>		
Totals >	· (143		<u> </u>		<u> 18,475,407.</u>

Page 2

AMERICAN SCHOOL IN LONDON FOUNDATION INC

13-6258480

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Scheduk	Schedule F (Form 990) 2009	AMERICAN	SCHOOL	Z	LOUDON	SCHOOL IN LONDON FOUNDATION INC	INC	13-6258480
Part II	∫ Grants and Other Assis:	tance to Organiza	tions or Entitie	s Out	side the Uni	ted States. Complete	f the organi	Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for at
	recipient who received more than \$5,000. Check this box if no one recipient received more than \$5,000	ore than \$5,000. C	heck this box if	5 6	e recipient re	sceived more than \$5,0	8	
	Proposed in proceedings of additional processing	موامينياتي يو 1000	popoda si oce					

(i) Method of valuation (book, FMV, appraisal, other)							2	0	Schedule F (Form 990) 2009
(h) Description of non-cash assistance									Schedu
(g) Amount of non-cash assistance	0	0	0	.0			xempt by	•	
(f) Manner of cash disbursement	WIRE	WIRE	WIRE	WIRE			recognized as tax-e		
(e) Amount of cash grant	12,651,758.	377.	874381,	573891.			foreign country,		
(d) Purpose of grant	PROGRAM SERVICES - EDUCATION SUPPORT	GRANTS - CAPITAL PROJECTS	GRANTS - OPERATIONAL COSTS TO FURTHER EDUCATIONAL MISSION	GRANTS - OTHER	l		Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter		
(c) Region	EUROPE (INCLUDING ICELAND & GREENLAND)	CLUDING	CLUDING	EUROPE (INCLUDING ICELAND & GREENLAND)			ns listed above that are in has provided a section	or entities	
(b) IRS code section and EIN (if applicable)							recipient organization	other organizations o	
1 (a) Name of organization							2 Enter total number of rithe IBS, or for which the	3 Enter total number of other organizations or entities	1

Page 3

13-6258480

AMERICAN SCHOOL IN LONDON FOUNDATION INC

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.

Schedule F (Form 990) 2009

Use Schedule F-1 (Form 990) if additional space is needed.

(h) Method of valuation (book, FMV,	ai, otne <i>r)</i>					:				990) 2009
(h) Me valu (book	apprais							:		Schedule F (Form 990) 2009
(g) Description of non-cash assistance										Sched
(g) Desc non-cash										
(f) Amount of non-cash assistance										
(e) Manner of cash disbursement										
(d) Amount of cash grant										
umber of ipients										
pe of grant or assistance (b) Region rec										-
(b) R										
sistance										
(a) Type of grant or assistance										
(a) Type of										
		l	[1	1	I	l	1	l	

Schedule F (Form 990) 2009 AMERICAN SCHOOL IN LONDON FOUNDATION INC 13-6258480 Page 4
Part IV Supplemental Information
Complete this part to provide the information required in Part I, line 2, and any additional information
SCHEDULE F, PART I, LINE 2: THE BOARD RECEIVES REPORTS (3) TIMES PER YEAR
REGARDING THE USE OF FUNDS BY THE AMERICAN SCHOOL IN LONDON EDUCATIONAL
TRUST LIMITED.

932074 02-01-10

Schedule F (Form 990) 2009

SCHEDULE J (Form 990)

Department of the Treasury

Compensation Information

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

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

AMERICAN SCHOOL IN LONDON FOUNDATION INC

► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047

Open to Public Inspection

Internal Revenue Service Name of the organization

Employer identification number

13-6258480

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	Yes	No
Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items. First-class or charter travel		
First-class or charter travel Travel for companions Tax indemnification and gross-up payments Housing allowance or residence for personal use Payments for business use of personal residence Health or social club dues or initiation fees		
Travel for companions Payments for business use of personal residence Tax indemnification and gross-up payments Health or social club dues or initiation fees		
Tax indemnification 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 on line 1a are checked, did the organization follow a written policy regarding payment or		
reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain		
2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors,		
trustees, and the CEO/Executive Director, regarding the items checked in line 1a?		
3 Indicate which, if any, of the following the organization uses to establish the compensation of the organization's		
CEO/Executive Director. Check all that apply.	ł	
X Compensation committee X Written employment contract		
Independent compensation consultant		
Form 990 of other organizations X Approval by the board or compensation committee		
4 During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing		
organization or a related organization.		
a Receive a severance payment or change-of-control payment?		<u> X</u>
b Participate in, or receive payment from, a supplemental nonqualified retirement plan?	_	X
c Participate in, or receive payment from, an equity-based compensation arrangement?		<u>X</u>
If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III		
Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.		
5 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation		
contingent on the revenues of: a. The organization?		X
a mo organization.		X
b / wy rolated eigenheater.		
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: a. The organization?		Х
Ch.		Х
If "Yes" to line 6a or 6b, describe in Part III.		_ -
		1
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		x
The state of the s		_
were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regs. section 53.4958-4(a)(3)? If "Yes," describe in Part III		Х
9 If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in		
Regulations section 53 4958-6(c)?		

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

Schedule J (Form 990) 2009

Schedule J (Form 990) 2009

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

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

Note. The sum of columns (B)(i)-{(iii) must equal the applicable column (D) or column (E) amounts on Form 990, Part VIII, line 1a.

		(B) Breakdown of	(B) Breakdown of W-2 and/or 1099-MISC compensation	SC compensation	(c)	(Q)	(E)	(F)
(A) Name		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	Hetirement and other deferred compensation	Nontaxable benefits	lotal of columns (B)(i)-(D)	Compensation reported in prior Form 990 or Form 990-EZ
	(9)	358.747.	0	0	21.250.	0	379,997.	403,802.
COREEN R. HESTER	3		0	0	٠.	0	4	0
1	ε	263,37		0	24,500.	0	287,872.	0.
JOHN G CLARK) (E)			0		0.	1 I	0
	ε	289,		0	12,332.	0.	301,637.	350,339.
MICHAEL EHRHARDT	Œ			• 0	0	0.	0	0
	(3)	210,		0	23,475.	0	233,846.	0
FREDERICK KOVAL	: <u>(ii</u>		0	• 0	0.	0.	0	0
	(i)	308,01	0.	• 0	13,621.	0.	321,637.	379,688.
JULIE RYAN	(ii)		0.	0	0	0	0.	0
	(j)							
	(ii)							
	(i)							
	(ii)							
	Ξ							
	(ii)							
	Ξ							
	(ii)							
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	(ii)							
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	(ii)							
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	(ii)							
	Θ							
	(ii)							
	Ξ				i			
	(ii)							
	Θ							
	∄							

Schedule J (Form 990) 2009

SCHEDULE O

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990

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

OMB No. 1545-0047 Open to Public Inspection

Name of the organization

Employer identification number AMERICAN SCHOOL IN LONDON FOUNDATION INC 13-6258480 FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION: EDUCATIONAL PURPOSES AND PRIMARILY FURNISHES FINANCIAL AND ADMINISTRATIVE SUPPORT BY EMPLOYING AND ADMINISTERING THE TEACHING AND SUPPORT STAFF AT THE AMERICAN SCHOOL IN LONDON. FORM 990, PART VI, SECTION B, LINE 11: COPIES OF THE COMPLETED 990 ARE FORWARDED TO BOARD MEMBERS FOR THEIR REVIEW PRIOR TO SUBMISSION TO THE INTERNAL REVENUE SERVICE. FORM 990, PART VI, SECTION B, LINE 12C: OFFICERS/MEMBERS OF BOARD ARE REQUIRED TO REVIEW ANNUALLY AND ALERT BOARD OF ANY CHANGES OR CONFLICTS OF INTEREST. FORM 990, PART VI, SECTION B, LINE 15: OFFICERS DO NOT RECEIVE COMPENSATION. FOUNDATION DOES PROVIDE COMPENSATION TO BOARD MEMBER COREEN HESTER AND OTHERS IN THEIR CAPACITY AS FACULTY AND ADMISTRATORS OF AMERICAN SCHOOL IN LONDON, THE BOARD HAS A REMUMERATION COMMITTEE AND THEY REVIEW INDEPENDENT COMPARABLE SALARY DATA WHEN SETTING THE COMPENSATION OF HIGH LEVEL ASL FACULTY AND STAFF. FORM 990, PART VI, SECTION C, LINE 19: UPON REQUEST, COPIES OF THE FORMS AND POLICIES ARE MADE AND FORWARDED IN A REASONABLE TIME. FORM 990 PART XI LINE 2C FINANCIAL STATEMENTS ARE APPROVED BY THE BOARD OF TRUSTEES AT THE

ANNUAL MEETING.

SCHEDULE O

(Form 990)

Supplemental Information to Form 990

Department of the Treasury

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 Employer identification number AMERICAN SCHOOL IN LONDON FOUNDATION INC 13-6258480 AUDITORS ARE APPOINTED BY THE BOARD OF TRUSTEES.

SCHEDULE R

(Form 990)

Department of the Treasury Internal Revenue Service

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

OMB No 1545-0047 2009 Open to Public

▼ See separate instructions. ► Attach to Form 990.

Inspection

Schedule R (Form 990) 2009 Employer identification number 13-6258480 390, 477 - LONDON FOUNDATION, INC. Direct controlling Direct controlling AMERICAN SCHOOL IN entity entity Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year) End-of-year assets Public charity status (if section 501(c)(3)) <u>e</u> 5175461. Exempt Code Total income section Ð Identification of Disregarded Entities (Complete if the organization answered "Yes" to Form 990, Part IV, line 33.) Legal domicile (state or Legal domicile (state or foreign country) foreign country) UNITED KINGDOM AMERICAN SCHOOL IN LONDON FOUNDATION INC -HA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. Primary activity Primary activity EDUCATION THE AMERICAN SCHOOL IN LONDON FOUNDATION (UK) LIMITED, ONE WAVERLY PLACE, LONDON, Name, address, and EIN Name, address, and EIN of related organization of disregarded entity Name of the organization UNITED KINGDOM Part Part

13-6258480

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AMERICAN SCHOOL IN LONDON FOUNDATION INC Schedule R (Form 990) 2009

Part III

Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.)

General or managing partner? Percentage ownership Yes Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065) Share of end-of-year assets 9 Disproportionate allocations? Yes No Ξ Share of total income Share of end-of-year assets <u>6</u> Type of entity (C corp, S corp, or trust) **e** Share of total income (d)
Direct controlling
entity Predominant income (related, unrelated, excluded from tax under sections 512-514) <u>e</u> Legal domicite (state or foreign country) ত Direct controlling entity Primary activity ਉ Legal domicile (state or foreign country) <u>ق</u> Primary activity 9 Name, address, and EIN of related organization Name, address, and EIN of related organization <u>a</u> Part IV

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Schedule R (Form 990) 2009 AMERICAN SCHOOL IN LONDON FOUNDATION INC

Part V Transactions With Related Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34, 35, or 36.)

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule		Yes	S No
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
a Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity		1a	
b Gift, grant, or capital contribution to other organization(s)		1b	
c Gift, grant, or capital contribution from other organization(s)		10	
d Loans or loan guarantees to or for other organization(s)		1d	
e Loans or loan quarantees by other organization(s)		1e	
			_
f Sale of assets to other organization(s)		14	
g Purchase of assets from other organization(s)		19	
		1h	
i Lease of facilities, equipment, or other assets to other organization(s)		1į	
j Lease of facilities, equipment, or other assets from other organization(s)		1,	
k Performance of services or membership or fundraising solicitations for other organization(s)		¥	-
1 Performance of services or membership or fundraising solicitations by other organization(s)		=	_
m Sharing of facilities, equipment, mailing lists, or other assets		Ę	
n Sharing of paid employees .		1	_
o Reimbursement paid to other organization for expenses		9	
		1p	
q Other transfer of cash or property to other organization(s)		19	
r Other transfer of cash or property from other organization(s)		1.	
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.	resholds.		
(a) (a) Transaction (s) Transaction (s) type (a-t) type (a-t)		(c) Amount involved	ved
(1)			
(3)			
(4)			
(5)			
(6) 932183 02-04-10	Schedule R (Form 990) 2009	(Form 99	90) 2009

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AMERICAN SCHOOL IN LONDON FOUNDATION INC Schedule R (Form 990) 2009 Part VI Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to 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