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Return of Organization Exempt From Income Tax

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury

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 Internal Revenue Service 7/1/2009 6/30/2010 For the 2009 calendar year, or tax year beginning and ending D Employer identification number Check if applicable Name of organization FAR BROOK SCHOOL use IRS Address change Doing Business As 22-1487185 label or Name change print or Number and street (or P O box if mail is not delivered to street address) E Telephone number Room/suite type. Initial return 52 GREAT HILLS ROAD (973) 379-3442 Specific Terminated City or town, state or country, and ZIP + 4 Instruc-SHORT HILLS 07078 G Gross receipts \$ 6.805.340 Amended return tions NJ Application pending Name and address of principal officer Yes X H(a) Is this a group return for affiliates? Mary Sue Fisher 52 Great Hills Road, Short Hills, NJ 07078 H(b) Are all affiliates included? No If "No," attach a list (see instructions) X 501(c) (Tax-exempt status 3) **◄** (insert no) 4947(a)(1) or 527 J Website: ▶ www farbrook org H(c) Group exemption number X Corporation K Form of organization Trust Other Association L Year of formation M State of legal domicil NJ 1948 Part I Co-ed independent day school providing education to Briefly describe the organization's mission or most significant activities. students in Grades Nursery through Grade 8. Our purpose is to create a supportive and caring community that cherishes love Activities & Governance of learning, creativity, and individuality. Check this box | If the organization discontinued its operations or disposed of more than 25% of its net assets 2 3 Number of voting members of the governing body (Part VI, line 1a) 3 18 4 Number of independent voting members of the governing body (Part VI, line 1b). 17 Total number of employees (Part V. line 2a) 5 69 Total number of volunteers (estimate if necessary) 300 6 Total gross unrelated business revenue from Part VIII. revelumn (C), line 12 7a 0 Net unrelated business taxable income from Form 990-T, line-84-Prior Year **Current Year** S-0S Contributions and grants (Part VIII, line 1h). 522,232 584,148 2011 9 Program service revenue (Part VIII, line 2g) 5,654,950 5,892,300 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 182,170 112,878 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)
Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line-1 11 219,500 216,014 12 6,578,852 6,805,340 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 501,542 583,251 14 Benefits paid to or for members (Part IX, column (A), line 4) 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 4,710,848 4,971,562 16a Professional fundraising fees (Part IX, column (A), line 11e) 413,798 ではあるは、 - # 57 4 8 Total fundraising expenses (Part IX, column (D), line 25)▶ b 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f) 1.545,161 1.591.567 7,146,380 18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) 6,757,551 19 Revenue less expenses Subtract line 18 from line 12 -178.699-341,040 Beginning of Current Year End of Year Total assets (Part X, line 16) 20 11,851,211 12,284,386 21 Total liabilities (Part X, line 26) 706,786 742,701 Net assets or fund balances Subtract line 21 from line 20 11,144,425 11,541,685 Part II Signature Block Under penalties of penjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge Signature of office Jeffrey W. Kronthal Treasurer Type or print name and title Preparer's Check if Preparer's identifying number signature (see instructions) self-Paid ▶ X Robert J Butvilla employed Preparer's Firm's name (or yours Suplee Clooney and Company EIN ▶ Use Only

Phone no

▶ (908) 789-9300

X Yes

No

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

308 East Broad St, Westfield, NJ 07090

if self-employed).

Pa	Int III Statement of Program Service Accomplishments
1	Briefly describe the organization's mission
	Co-educational independent day school providing education to students in Grades Nursery through Grade 8 Our purpose is to
	create a supportive and caring community that cherishes love of learning, creativity, and individuality
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? Yes X No
4	If "Yes," describe these changes on Schedule O. Describe the exempt purpose achievements for each of the organization's three largest program services by expenses.
4	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
4a	(Code:) (Expenses \$ 5,294,060 including grants of \$ 583,251) (Revenue \$ 6,108,314)
	Education - bringing students to their highest level of academic and personal competency, both
	for their present and in preparation for their future education. We see Far Brook's mission as a desire
	to use and to adapt the principles of progressive education and its philosophy of pragmatism
	for a changing world, and while valuing academic excellence and respect for nature,
	to instill a creative response to learning with great art, drama, music, and literature as models
	A Far Brook education takes place in an environment of natural beauty and
	intimacy, where character and citizenship are valued as much as achievement
4b	(Code.) (Expenses \$ 0 including grants of \$ 0) (Revenue \$ 0)
4c	(Code:) (Expenses \$ 0 including grants of \$ 0) (Revenue \$ 0)
4d	Other program services (Describe in Schedule O)
	(Expenses \$ 0 including grants of \$ 0) (Revenue \$ 0)
4-	Total program convice expenses > 5.204.060

Par	IV Checklist of Required Schedules			-9
			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		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 public office? If "Yes," complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4		Х
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		×
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		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i> .	9		X
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	Х	
11	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable	11	Х	
•	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			
•	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			
124	Schedule D, Parts XI, XII, and XIII. Was the organization included in consolidated, independent audited financial statements for the tax Yes No	12	X	
124	year? If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional			
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	X	
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
	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? <i>If "Yes," complete Schedule F, Part I</i>	14b		х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any			
16	organization or entity located outside the United States? <i>If "Yes," complete Schedule F, Part II</i> Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance	15		X
17	to individuals located outside the United States? <i>If "Yes," complete Schedule F, Part III</i>	16		X
	on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		Х
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?			<u> </u>
20	If "Yes," complete Schedule G, Part III	19		X
20	Did the diganization operate one of more hospitals? II Tes, complete scredule H	20		Χ

21	Did the organization report more than \$5,000 of grants and other assistance to governments and organization

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 17 if "Yes," complete Schedule I, Parts I and III . 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 27 if "Yes," complete Schedule I, Parts I and III . 23 Did the organization of the state of the organization's current and former officers, directors, fusitees, key employees, and highest compensated employees? If "Yes," complete Schedule Is an interest of 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, Italia was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No." go to line 25 Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24b Did the organization are an "on behalf of" issuer for bonds outstanding at any time during the year? 25c 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 II 25b Let organization are an "on behalf of" issuer for bonds outstanding at any time during the year? 26c X Yes, "complete Schedule I Part I Yes," complete Sched		,	T	T	T
In the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II 2D Idt the organization report more than \$5.00.00 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 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, insistes, key employees, and highest compensated employees? If "Yes," complete Schedule J 23 X 24a Did the organization nate at at-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 24th through 24d and complete Schedule K. If "No," go to time 25 b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? c Did the organization and as an "on behalf of" issuer for bonds outstanding at any time during the year to defease any tax-exempt bonds? 25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization and as an "on behalf of" issuer for bonds outstanding at any time during the year? 25b Is the organization water that it engaged in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I I. 25c Is a standard the transaction has not been reported on any of the organization's prior Forms 990 or 990-E72 If "Yes," complete Schedule L, Part I I. 27c Is Was 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 IV. 27c An entity of which a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV. 28d A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule R. Part V.	21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations		Yes	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 27 if "Yes," complete Schedule I, Parts I and III. 23 Did the organization answer "Yes" to Part VII, Section A, line 3. 4, or 5 about compensation of the organization answer "Yes" to Part VII, Section A, line 3. 4, or 5 about compensation of the organization have a tax-exempt bond size 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 24d bid the organization have a tax-exempt bond size 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 25d bid the organization and that was in the was into the compensation of the organization of the org	21		21		l _v
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32 Did the organization answer "Yes" to Part VII, Section A, Ine 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 and 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 but the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? d bid the organization maintain an escrow account other than a refunding escrow at any time during the year? 25a Section 501(e)(3) and 501(e)(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 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-E27 If "Yes," complete Schedule L, Part I is 1.2 but the organization provide a grant or other assistance to an officer, director, trustee, key employee, understanding as of the end of the organization is the organization provide a grant or other assistance to an officer, director, trustee, key employee? If "Yes," complete Schedule L, Part I IV b A lamily member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part I IV b A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV c An entity of which a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule I, Part IV c An entity of which a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule I, Part IV c An entity of which a current or			22	x	
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sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I 33	22	Did the organization own 100% of an entity discognished as congrete from the organization under Regulations	32		^
Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1. 34 X 35 Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2. 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 X 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. 38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and	JJ		22		v
III, IV, and V, line 1 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 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 X 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 38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and	34	\cdot	33		 ^
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	0 +		34		_Y
Schedule R, Part V, line 2	35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes " complete	104	-	 ^-
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 X 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 38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and	•	Schedule R. Part V. line 2	35		×
organization? If "Yes," complete Schedule R, Part V, line 2 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 38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and	36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related	33	<u> </u>	 ^
 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 38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 			36		×
and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		30		 ^
VI	-		1		
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and			37		x
	38			1	
	_		38	×	

Par	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		~1	
	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			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable	1		i
_	gaming (gambling) winnings to prize winners?	1c	X	_
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return . 2a 69			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see			
	instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by			
	this return?	3a	-	X
b	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		X
b	If "Yes," enter the name of the foreign country			
-	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank			1
	and Financial Accounts	1		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	1	x
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding		İ	
•	Prohibited Tax Shelter Transaction?	5c		
6a	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	<u> </u>	X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b		L
7	Organizations that may receive deductible contributions under section 170(c).]	
а	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	ļ	X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal			 -
	benefit contract?	7e	ļ	<u> </u>
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f	ļ	X
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required? .	7 <u>g</u>	ļ	X
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as			
	required?.	7h		X
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			l
	organization, have excess 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	 	-
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b	 	
10	Section 501(c)(7) organizations. Enter.			
a	Initiation fees and capital contributions included on Part VIII, line 12	-		1
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	┨		
11	Section 501(c)(12) organizations. Enter			
a	Gross income from members or shareholders	-		
ь	Gross income from other sources (Do not net amounts due or paid to other sources			1
40-	against amounts due or received from them)	425	-	
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		1	

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

Sect	ion A. Governing Body and Management				Yes	No
1a	Enter the number of voting members of the governing body	1a	18		162	NO
b	Enter the number of voting members that are independent	1b	17	4		
2	Did any officer, director, trustee, or key employee have a family relationship or a business re		1	1		1
-	any other officer, director, trustee, or key employee?			2		x
3	Did the organization delegate control over management duties customarily performed by or	under f	he direct			
•	supervision of officers, directors or trustees, or key employees to a management company o			3		x
4	Did the organization make any significant changes to its organizational documents since the prior Form			4		Х
5	Did the organization become aware during the year of a material diversion of the organizatio			5		X
6	Does the organization have members or stockholders?			6	Х	
7a	Does the organization have members, stockholders, or other persons who may elect one or	more r	nembers			
	of the governing body?			7a	Х	
b	Are any decisions of the governing body subject to approval by members, stockholders, or o	ther pe	ersons?	7b		Х
8	Did the organization contemporaneously document the meetings held or written actions under					
	the year by the following					
а	The governing body?			8a	X	
b	Each committee with authority to act on behalf of the governing body?			8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be seen to be seen and the section and the section and the section are set of the section are set of the section are set of the section and the section are set of the section and the section are set of the section are		eached		ļ	
	at the organization's mailing address? If "Yes," provide the names and addresses in Schedu			9 <u>a</u>		<u> </u>
	ion B. Policies (This Section B requests information about policies not required by the	ie Inte	ernal			
Reve	enue Code.)				T	r
				40-	Yes	No
10a	Does the organization have local chapters, branches, or affiliates?			10a	ļ	X
b	If "Yes," does the organization have written policies and procedures governing the activities		n cnapters,	406		
	affiliates, and branches to ensure their operations are consistent with those of the organization.		films the	10b	 	
11	Has the organization provided a copy of this Form 990 to all members of its governing body	belole	illing the	11	X	
	form?	`	•		 ^-	
11A		,	•	12a	X	
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13 Are officers, directors or trustees, and key employees required to disclose annually interests	that c	ould give	120	 ^	
b	rise to conflicts?	lilal C	odia give	12b	x	
_	Does the organization regularly and consistently monitor and enforce compliance with the po	dicv2 i	f "Vos "	120	 ^	
С	describe in Schedule O how this is done	Jiloy · J	, ,,,	12c	x	Ì
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
15	Did the process for determining compensation of the following persons include a review and	annro	val hv	<u> </u>	 	
13	independent persons, comparability data, and contemporaneous substantiation of the deliberation of the del					`
а	The organization's CEO, Executive Director, or top management official			15a	X	
b	Other officers or key employees of the organization .		·	15b	X	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (See instructions)			1.33		
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar	arrand	ement			
	with a taxable entity during the year?		,	16a		X
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization	n to ev	aluate			
	its participation in joint venture arrangements under applicable federal tax law, and taken ste					
	the organization's exempt status with respect to such arrangements?		=	16b		
Sec	tion C. Disclosure					
17	List the states with which a copy of this Form 990 is required to be filed					
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, a	and 99	0-T (501(c)(3)s	only)		
	available for public inspection. Indicate how you make these available. Check all that apply					
	Own website X Another's website X Upon request					
19	Describe in Schedule O whether (and if so, how), the organization makes its governing docu	ıments	, conflict of inte	est		
	policy, and financial statements available to the public					
20	State the name, physical address, and telephone number of the person who possesses the	books	and records of	the		
	organization. ► Donna Chahalis		(973) 379-3	442		
	ES Canal Lilla Danii Charl Lilla XII 07070					

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

Check this box if the organization did not compensate any current officer, director, or trustee.

(A)	(B)	(C)				(D)	(E)	(F)		
Name and Title	Average	Position (check all that apply)				Reportable	Estimated			
	hours per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
Mary Sue Fisher Chair	10	X		X				0	0	0
Carol Chartouni Vice Chair	5	х		X				. 0	0	0
Tony Stovall Secretary	5	х		х				0	0	0
Jeff Kronthal Treasurer	5	х	_	x				0	0	0
Joseph Baker Trustee	5	х	_					0	0	0
Alice Davison Trustee	5	X	_					0	0	0
Lisa Dworkin Trustee	5	x					_	0	0	0
Suzanne Glatt Trustee	5	х		_				0	0	0
Kathy Hatfield Trustee	5	х	<u> </u>					0	0	0
Janine Kane Trustee	5	X_						0	0	0
Tom Kligerman Trustee	5	х		_				0	0	0
Kate Lee Trustee	5.	<u>x</u>			_		_	0	0	0
Barbara Pagos Trustee	5.	x			_			0	0	0
Marnie Stetson Trustee	5	x		<u>_</u>			L	48,650	0	4,475
Gına Strain Trustee	5	х						0	0	0
Chris Susko Trustee	5	x						0	0	0 Enr. 990 (2000)

Pa	t VII Section A. Officers, Directors, Tru	ıstees, Key Em	ploy	ees,	and	Hig	hes	t Co	mpensated Em	ployees (cont		<u> </u>
					(E)	(F)	_					
	Name and title	Average		Position (check all that app				ply)	Reportable	Reportable	Estimated	
		hours per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest co	Former	compensation from the organization	compensation from related organizations (W-2/1099-MISC	amount of other compensation) from the	
			trustee	al trustee		oyee	Highest compensated employee		(W-2/1099-MISC)		organization and related organizations	•
	Zweig	_										_
Trus	tee ay Lopdell Lawrence	5	<u>X</u>				ļ Ī	_	0		0	_0
Hea	d of School	50	x		ļ	x			228,516		0 37,8	68
	es Benz	50	1						447 404		05.0	
	Upper School na Chahalis	50.	 		-		X		117,121		0 25,2	.88
	ness Manager	50					Х		123,537		0 13,9	10
	Wearn Wiener ner Head of School	2						х	135,000		0	0
											:	
<u>1b</u>	Total	·						•	652,824	·	0 81,5	<u>341</u>
2	Total number of individuals (including but no reportable compensation from the organization)		se lis	ted a	above 4	e) w	ho re	ceiv	ed more than \$1	00,000 in		
3	Did the organization list any former officer,			•		yee	, or h	ighe	st compensated	· [Yes N	lo ÿ
	employee on line 1a? If "Yes," complete Sci										3 X	# \$ J
4	For any individual listed on line 1a, is the su the organization and related organizations gundividual										4 X	
5	Did any person listed on line 1a receive or a services rendered to the organization? If "Y								rganization for		5	—— 矮 X
Sec	tion B. Independent Contractors	00, 00					<u>. p.c.</u>				<u></u>	<u></u> -
1	Complete this table for your five highest cor compensation from the organization	npensated inde	penc	lent (contr	acto	ors th	at re	ceived more tha	in \$100,000 of		
	(A) Name and business a	address							(B) Description of ser	vices	(C) Compensation	
											•	0
		-						\vdash				_0
					_			┼				<u>0</u> 0
		 										0
2	Total number of independent contractors (in more than \$100,000 in compensation from	_		ed to	tho	se lis	sted		e) who received			No.

Part	VIII	Statement of Revenue						
, t	i dig				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
yy	1a	Federated campaigns .	. 1a	0				
불		. •		1				
.g ⊡		Membership dues .	. <u>1b</u>	+				
s, ma	С	Fundraising events	. <u> 1c</u>	0				
# =	d	Related organizations	1d	ı o				
% ≅		Government grants (contributions)		 	1			,
Si Si		- · · · · · · · · · · · · · · · · · · ·		<u> </u>]			
iğ e	ı	All other contributions, gifts, grants,		504440				
흔된		similar amounts not included above						
를 할	g	Noncash contributions included in li	nes 1a-1f [.] \$	36,880				
Contributions, gifts, grants and other similar amounts	h	Total. Add lines 1a-1f .	-		584,148			·
				Business Code				
Program Service Revenue	2a	Tuition and Fees			5,859,300	5,859,300	0	_ · · · · · ·
S								0
œ	b	Transportation Fees			33,000	33,000	0	<u> </u>
ş	С				0			
e e	d				O			
Ε	е				0			
īg	_	All other program service revenue			0			
Ž,		· -			<u> </u>			
	g	Total. Add lines 2a-2f	·	. ▶	5,892,300			
	3	Investment income (including divide	ends, interest, a	nd				
		other similar amounts) .		•	112,878	0	0	112,878
	4	Income from investment of tax-exer	ant hand proced	ehe ehe	0			
			iipt boild proces		0			
	5	Royalties	•					
			(ı) Real	(II) Personal				
	6a	Gross Rents					ļ	
	b	Less: rental expenses]			
	c	Rental income or (loss)		0 0				
				<u> </u>	0			
	d	Net rental income or (loss)	•					
	7a	Gross amount from sales of	(i) Securities	(II) Other				
		assets other than inventory.		0 0)			
	ь	Less, cost or other basis						
	1	and sales expenses		ol o				,
				0 0	-			, '
	C	Gain or (loss)	L	<u> </u>				
	d	Net gain or (loss) .	•		0			
	8a	Gross income from fundraising						
ğ		events (not including \$	0					
ē		of contributions reported on line 1c						
Other Revenue		See Part IV, line 18						
œ	١.		a				ļ	ļ
ē		Less direct expenses	. b	L	<u> </u>			
2		Net income or (loss) from fundraisi		. •	0			
_	9a	Gross income from gaming activities	es					'
		See Part IV, line 19 .	a)			
	h	Less: direct expenses	b		3			
	1	Net income or (loss) from gaming a	_		0			-
			ictivities .		 			
	10a	Gross sales of inventory, less		_				
		returns and allowances	а		<u> 1</u>			
	b	Less cost of goods sold	b	·)			
	1	Net income or (loss) from sales of	inventory		1 0			
	<u> </u>	Miscellaneous Revenue		Business Code	† 			
	14-				216.014	216,014		
	11a	Other Income		 	216,014		<u>'</u>	
	b				0		1	
	С				0		ļ	ļ
	d	All other revenue			0			
	e	Total. Add lines 11a-11d .			216,014			
	12	Total revenue. See instructions.			6,805,340		(112,878

Part IX Statement of Functional Expenses

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).

	All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).							
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses			
1	Grants and other assistance to governments and				ĺ			
	organizations in the U.S. See Part IV, line 21.	O			1			
2	Grants and other assistance to individuals in							
	the U.S See Part IV, line 22 .	583,251	583,251					
3	Grants and other assistance to governments,							
	organizations, and individuals outside the				,			
	U.S See Part IV, lines 15 and 16	ol						
4	Benefits paid to or for members	0						
5	Compensation of current officers, directors,							
•	trustees, and key employees	327,343	58,475	268,868	0			
6	Compensation not included above, to disqualified		90,					
•	persons (as defined under section 4958(f)(1)) and							
	persons described in section 4958(c)(3)(B)	اه						
7	Other salaries and wages	3,676,527	2,741,227	663,300	272,000			
8	Pension plan contributions (include section 401(k)	3,010,021	ent a there t	000,000	2,2,000			
J	and section 403(b) employer contributions) .	260,707	188,724	46,783	25,200			
9	Other employee benefits	407,084	294,084	83,771	29,229			
10	Payroll taxes	299,901	219,929	59,053	20,919			
11	Fees for services (non-employees)	200,001	210,020	- 00,000	20,010			
ıı a	Management	0						
	Legal	15,187	0	15,187	0			
b	Accounting	12,000	0	12,000	0			
C	<u> </u>	12,000		12,000				
d	Lobbying Professional fundraising services See Part IV, line 17	0						
e f	, , , <u> </u>	0						
	OAL	76,808	71,877	4,931	0			
g		64,863	59,365	7,001	5,498			
12	Advertising and promotion	68,931	0	49,629	19,302			
13	Office expenses	96,441	71,974	14,645	9,822			
14	Information technology	90,441	71,574	14,040	5,022			
15 46	Royalties	319,637	271,691	31,963	15,983			
16	Occupancy	319,037	271,091	31,303	10,300			
17	Travel	- 0						
18	Payments of travel or entertainment expenses	o						
40	for any federal, state, or local public officials	0						
19	Conferences, conventions, and meetings	0						
20	Interest	0						
21	Payments to affiliates	298,686	246 170	38,035	14,481			
22	Depreciation, depletion, and amortization	47,678	246,170 0	47,678	0			
23	Insurance	47,070		41,070				
24	Other expenses Itemize expenses not covered above. (Expenses grouped together	· , ,			- 1			
	and labeled miscellaneous may not exceed				: }			
	5% of total expenses shown on line 25 below)		.					
_		254 655	254,655	0	'			
a	School Activities Food	254,655 77,896	77,896	0	<u>0</u>			
b		38,990	38,990	0	0			
d	Van Service Contract Supplies	36,129	36,129	0	0			
	Tanking	16,814	16,814	0				
e f	All other expenses	166,852	62,809	102,679	1,364			
25	Total functional expenses. Add lines 1 through 24f	7,146,380	5,294,060		413,798			
		7,140,330	5,237,000	1,700,022	710,130			
26	Joint costs. Check here ► if following							
	SOP 98-2. Complete this line only if the organization				-1			
	reported in column (B) joint costs from a combined							
	educational campaign and fundraising							
	solicitation .				Form 990 (2009)			
					FORM 230 (2009)			

Pá	irt X	Balance Sheet			
			(A)		(B) -
			Beginning of year		End of year
	1	Cash—non-interest-bearing	528,046		193,076
	2	Savings and temporary cash investments	3,071,800		3,390,178
	3	Pledges and grants receivable, net	193,264	3	142,017
	4	Accounts receivable, net	5,496	4	15,164
	5	Receivables from current and former officers, directors, trustees, key	,		ł.
		employees, and highest compensated employees. Complete Part II of	·		
		Schedule L	200,000	_ 5	130,921
	6	Receivables from other disqualified persons (as defined under section			1
		4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete			
		Part II of Schedule L		6	
Assets	7	Notes and loans receivable, net	0	7	0
SS	8	Inventories for sale or use		8	
Q	9	Prepaid expenses and deferred charges	14,079	9	10,611
	10a	Land, buildings, and equipment. cost or 10a 7,319,630			
		other basis Complete Part VI of Schedule D			
	b	Less accumulated depreciation 10b 3,576,103			3,743,527
	11	Investments—publicly traded securities	3,945,223		4,658,892
	12	Investments—other securities See Part IV, line 11	0		0
	13	Investments—program-related See Part IV, line 11	0		0
	14	Intangible assets	0		0
	15	Other assets See Part IV, line 11	15,040		12 204 206
	16	Total assets. Add lines 1 through 15 (must equal line 34)	11,851,211		12,284,386
	17	Accounts payable and accrued expenses	262,923	17 18	333,738
	18	Grants payable	443,863		408,963
	19	Deferred revenue	443,003	20	400,303
w	20	Tax-exempt bond liabilities Escrow or custodial account liability Complete Part IV of Schedule D		21	
Liabilities	21	Payables to current and former officers, directors, trustees, key			
ij	22	employees, highest compensated employees, and disqualified		ļ <i>:</i>	
<u>.e</u>		persons. Complete Part II of Schedule L.		22	
_	23	Secured mortgages and notes payable to unrelated third parties	0	-	0
	24	Unsecured notes and loans payable to unrelated third parties .	0		0
	25	Other liabilities Complete Part X of Schedule D	0		0
	26	Total liabilities. Add lines 17 through 25	706,786	-	742,701
		Organizations that follow SFAS 117, check here ► X and			,
S		complete lines 27 through 29, and lines 33 and 34.			
Š			7 406 752	27-	7 447 575
<u>a</u>	27	Unrestricted net assets	7,406,753 219,870	1	7,447,575 569,859
8	28	Temporarily restricted net assets	3,517,802		3,524,251
ŭ	29	Permanently restricted net assets	3,317,002	23	3,324,231
Ē	ļ	Organizations that do not follow SFAS 117, check here ▶			
0		and complete lines 30 through 34.			n
Net Assets or Fund Balances	30	Capital stock or trust principal, or current funds		30	
Ass	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
et ,	32	Retained earnings, endowment, accumulated income, or other funds.		32	1.2==
Z	33	Total net assets or fund balances	11,144,425		11,541,685
	34	Total liabilities and net assets/fund balances .	11,851,211	34	12,284,386

Form **990** (2009)

Part	XI Financial Statements and Reporting			
			Yes	No
1	Accounting method used to prepare the Form 990			4
	Schedule O	[[[[]		, ,
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		X
b	Were the organization's financial statements audited by an independent accountant?	2b	X	
С	If "Yes" to line 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?	2c	Х	_
	If the organization changed either its oversight process or selection process during the tax year, explain in			
	Schedule O			, '
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were	,		(1)
	issued on a consolidated basis, separate basis, or both.			
	X Separate basis Consolidated basis Both consolidated and separate basis			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in			
	the Single Audit Act and OMB Circular A-133?	3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the			
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3b		
		Fo	rm 99 ((2009)

SCHEDULE A (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.

OMB No 1545-0047 Open to Public **Inspection**

Employer identification number

Internal Revenue Service Name of the organization

Department of the Treasury

See separate instructions.

FAR BROOK SCHOOL 22-1487185 Part I Reason for Public Charity Status (All organizations must complete this part) See instructions The organization is not a private foundation because it is: (For lines 1 through 11, check only one box) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i), 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state. 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II) 9 An organization that normally receives: (1) more than 33 1/3 % of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3 % of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the 11 purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h. c Type III-Functionally integrated **b** Type II By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization? 11g(ı) A family member of a person described in (i) above? 11g(ii) (iii) A 35% controlled entity of a person described in (i) or (ii) above? 11g(iii) h Provide the following information about the supported organization(s) (iv) Is the organization (vi) Is the (v) Did you notify (vii) Amount of (III) Type of organization (i) Name of supported (ii) EIN (described on lines 1-9 in col (i) listed in your the organization in organization in col support organization above or IRC section governing document? col (i) of your (i) organized in the US? (see Instructions)) support? Yes Yes No Yes No 0 0

0

0

0

0

Total

	(Complete only if you checked t	he box on line	e 5, 7, or 8 of	<u>_Part I.)</u>			
	on A. Public Support						
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")						0
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0
3	The value of services or facilities furnished by a governmental unit to the organization without charge						0
4 5	Total. Add lines 1 through 3 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)	0	O STATE OF THE STA	0	0	0	0
6	Public support. Subtract line 5 from line 4						0
	on B. Total Support						
	ndar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7	Amounts from line 4	0	0	0	0	0	0
8	Gross income from interest, dividends,	<u> </u>					
·	payments received on securities loans, rents, royalties and income from similar sources						0
9	Net income from unrelated business activities, whether or not the business is regularly carried on						0
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV)						0
11	Total support. Add lines 7 through 10		<u> </u>	li		1	0
12	Gross receipts from related activities, etc. (s			•		12	
13	First five years. If the Form 990 is for the o organization, check this box and stop here			ird, fourth, or fift	th tax year as	a section 501(c)(3) ► □
	ion C. Computation of Public Suppor				· · · · · · · · · · · · · · · · · · ·	1 1	
14 15	Public support percentage for 2009 (line 6, Public support percentage from 2008 Scheol	dule A, Part II,	line 14			14 15	0 00%
16a	33 1/3% support test–2009. If the organization qualifies a	s a publicly su	pported organi	zation .			▶ 🔝
b 	33 1/3% support test–2008. If the organization qualification qualification and stop here. The organization qualification and stop here.	es as a publicl	y supported or	ganızatıon			▶ 📙
17a b	10%-facts-and-circumstances test–2009. or more, and if the organization meets the "the organization meets the "facts-and-circumstances test–2008. or more, and if the organization meets the "the organization meets the "facts-and-circumstances".	facts-and-circumstances" test if the organizations facts-and-circu	imstances" tes The organiza ation did not ch imstances" tes	t, check this bo tion qualifies as eck a box on lir t, check this bo	x and stop he a publicly sup ne 13, 16a, 16l x and stop he	re. Explain in P oported organiz b, or 17a, and li re. Explain in F	art IV how ation ▶ ☐ ine 15 is 10% Part IV how
18	Private foundation. If the organization did not ch	neck a box on lin	e 13, 16a, 16b, 1	or 17b, chec	k this box and s	ee instructions	▶ □

Support Schedule for Organizations Described in Section 509(a)(2) Part III (Complete only if you checked the box on line 9 of Part I) Section A. Public Support Calendar year (or fiscal year beginning in) (d) 2008 (a) 2005 (b) 2006 (c) 2007 (e) 2009 (f) Total Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants"). . . 0 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose 0 Gross receipts from activities that are not an 0 unrelated trade or business under section 513 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf 0 The value of services or facilities furnished by a governmental unit to the 0 organization without charge 0 0 0 0 Total. Add lines 1 through 5. 0 7a Amounts included on lines 1, 2, and 3 received from disqualified persons 0 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 0 0 0 Add lines 7a and 7b. O Public support (Subtract line 7c from 8 0 Section B. Total Support (a) 2005 (b) 2006 (d) 2008 (e) 2009 (f) Total Calendar year (or fiscal year beginning in) (c) 2007 0 O 0 0 Amounts from line 6. 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar 0 Unrelated business taxable income (less section 511 taxes) from businesses 0 acquired after June 30, 1975 0 0 0 0 O c Add lines 10a and 10b Net income from unrelated business 11 activities not included in line 10b. whether or not the business is regularly 0 carried on Other income Do not include gain or loss from the sale of capital assets 0 (Explain in Part IV) 13 Total support. (Add lines 9, 10c, 11, 0 and 12.) . 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 Public support percentage for 2009 (line 8, column (f) divided by line 13, column (f)) 15 0 00% Public support percentage from 2008 Schedule A, Part III, line 15 16 0 00% 16 Section D. Computation of Investment Income Percentage Investment income percentage for 2009 (line 10c, column (f) divided by line 13, column (f)) 0 00% 17 18 Investment income percentage from 2008 Schedule A, Part III, line 17 0 00% 18 19a 33 1/3% support tests-2009. If the organization did not check the box on line 14, and line 15 is more than 33 1/3% and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support tests-2008. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

	990 or 990-EZ) 2009	FAR BROOK SCHOOL	22-1487185	Page 4
Part IV	Supplemental	Information. Complete this part to provide the explanation	ons required by Part II, line 10	,
		or 17b, and Part III, line 12 Provide any other additional i		
	<u>.,</u>			
				
				
·				
				
			·	
				
				

SCHEDULE D (Form 990)

Supplemental Financial Statements

Complete if the organization answered "Yes," to Form 990,

Open to Public

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

Part IV, line 6, 7, 8, 9, 10, 11, or 12.

▶ Attach to Form 990. ▶ See separate instructions.

Open to Public Inspection

Name of the organization Employer identification number FAR BROOK SCHOOL 22-1487185 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6 (a) Donor advised funds (b) Funds and other accounts Total number at end of year 1 2 Aggregate contributions to (during year) 3 Aggregate grants from (during year) Aggregate value at end of year 4 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Yes 6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Yes Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7 Part II Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or pleasure) Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Tax Year 2a Total number of conservation easements 2b b Total acreage restricted by conservation easements Number of conservation easements on a certified historic structure included in (a). 2c C Number of conservation easements included in (c) acquired after 8/17/06 2d d Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization 3 during the tax year Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, handling of 5 violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year 6 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year 7 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 8 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III Complete if the organization answered "Yes" to Form 990, Part IV, line 8 1a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenues included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the 2 following amounts required to be reported under SFAS 116 relating to these items Revenues included in Form 990, Part VIII, line 1 Assets included in Form 990, Part X

P	а	n	e	2
г	a	ы	c	-

Using the organization's acquisition, accession, and other records, check any of the following that use of its collection items (check all that apply) a Public exhibition d Loan or exchange programs b Scholarly research e Other c Preservation for future generations 4 Provide a description of the organization's collections and explain how they further the organization Part XIV. 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other	
use of its collection items (check all that apply) a Public exhibition d Loan or exchange programs b Scholarly research e Other c Preservation for future generations 4 Provide a description of the organization's collections and explain how they further the organization Part XIV. 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other	
a Public exhibition d Loan or exchange programs b Scholarly research e Other c Preservation for future generations 4 Provide a description of the organization's collections and explain how they further the organization Part XIV. 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other	
c Preservation for future generations 4 Provide a description of the organization's collections and explain how they further the organization Part XIV. 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other	
 c Preservation for future generations 4 Provide a description of the organization's collections and explain how they further the organization Part XIV. 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other 	
 4 Provide a description of the organization's collections and explain how they further the organization Part XIV. 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other part XIV. 	ante averant numana in
Part XIV. 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other	on's exempt purpose in
During the year, did the organization solicit or receive donations of art, historical treasures, or other	
assets to be sold to raise funds rather than to be maintained as part of the organization's collection	on? Yes No
Part IV Escrow and Custodial Arrangements. Complete if the organization answered "You	es" to Form 990, Part
IV, line 9, or reported an amount on Form 990, Part X, line 21	
1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other as	
included on Form 990, Part X?	Yes No
b If "Yes," explain the arrangement in Part XIV and complete the following table.	Amount
c Beginning balance 1c	Amount
e Distributions during the year 1e	
f Ending balance	0
	Yes X No
A STATE OF THE STA	
Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part V	art IV, line 10
	e years back (e) Four years back
1a Beginning of year balance 3,708,759 4,587,427	
b Contributions 6,449 59,934	
c Net investment earnings, gains,	
and losses 769,509 -773,500	
d Grants or scholarships 166,781 165,102	
e Other expenditures for facilities	
and programs	
f Administrative expenses	,
g End of year balance 4,317,936 3,708,759	
2 Provide the estimated percentage of the year end balance held as	
a Board designated or quasi-endowment ▶ 11%	
b Permanent endowment ► 82%	
c Term endowment ► 7%	
3a Are there endowment funds not in the possession of the organization that are held and administe	
organization by	
(i) unrelated organizations	
(ii) related organizations	3a(ii) X
b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?	
 Describe in Part XIV the intended uses of the organization's endowment funds Part VI Investments—Land, Buildings, and Equipment. See Form 990, Part X, line 10. 	
Description of investment (a) Cost or other basis (b) Cost or other (c) Accumulation (investment) basis (other) depreciation	on
1a Land 0 73,300	73,300
b Buildings	794,510 3,583,443
	0 0
c Leasehold improvements 0 0	
c Leasehold improvements 0 0 d Equipment 0 868,377 7	781,593 86,784
c Leasehold improvements	

organization's liability for uncertain tax positions under FIN 48.

Part VII Investments—Other Securities	See Form 990, Part X,	line 12
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
Financial derivatives	0	
Closely-held equity interests	0	
Other	0	
	0	
	0	
	0	
	0	
	0	
	0	
	0	
	0	
	0	
Total (Column (b) must equal Form 990, Part X, col. (B) line 12.)	0	<u> </u>
Part VIII Investments—Program Relate	d. See Form 990, Part X,	line 13
(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value
	0	
	0	
	0	
	0	
	0	
	0	
	0	
	0	
	0	
	0	
Total (Column (b) must equal Form 990, Part X, col. (B) line 13.)	0	<u> </u>
Part IX Other Assets. See Form 990, P	art X, line 15	
	a) Description	(b) Book value
		0
		0
		0
		0
		0
		0
		0
		0
		0
Total (Column (h) must agual Form 000, Dort V.	ool (B) line 15)	
Total. (Column (b) must equal Form 990, Part X, of Part X Other Liabilities. See Form 990		
1. (a) Description of liability	(b) Amount	
Federal income taxes	(b) Amount	
rederal income taxes		<u> </u>
		<u></u> 0
	······································	<u> </u>
		<u> </u>
		<u></u>
		0
		0
		_
		<u> </u>
Total (Column (b) must equal Form 990, Part X, col (B) line 25)		0
2. FIN 48 Footnote. In Part XIV, provide the text of	the footnote to the organiz	<u> </u>

Schedule D (Form 9	FAR BROOK SCHOOL		22-1487185
	Supplemental Information (c	ontinued)	Page 5
	Cappioniental information (C	on and a second	
	·		
		,	

SCHEDULE E (Form 990 or 990-EZ)

Schools

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

Inspection

OMB No 1545-0047

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization

FAR BROOK SCHOOL

► Attach to Form 990 or Form 990-EZ.

22-1487185

			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	X	
2	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its			3. 1
	brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	 2	<u>.</u>	'
3	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media		-^-	
3	during the period of solicitation for students, or during the registration period if it has no solicitation program,			1
	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 If you need more space, use Schedule O (Form 990)	3	Х	
	The School uses ads in local newspapers Published racially non-discriminatory policy as a part of the ads			1
	"At Far Brook School all rights, priveleges, programs and activities are available to all students without regard to race, religion, sex, or national origin."			·
	to race, religion, sex, or national origin			!
				1
4	Does the organization maintain the following?	_		1
	Records indicating the racial composition of the student body, faculty, and administrative staff? .	4a	X	
b	Records documenting that scholarships and other financial assistance are awarded on a racially			
_	nondiscriminatory basis?	4b	X	
С	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	4c	×	
d	Copies of all material used by the organization or on its behalf to solicit contributions?	4d	Х	
	If you answered "No" to any of the above, please explain If you need more space, use Schedule O			
	(Form 990)			1
5	Does the organization discriminate by race in any way with respect to			!
	Students' rights or privileges?	5a	-	X
		5 h		
b	Admissions policies?	5b	 	<u> </u>
С	Employment of faculty or administrative staff?	5c		X
d	Scholarships or other financial assistance?	5d	<u> </u>	X
A	Educational policies?	5e		x
·	Educational politicis			
f	Use of facilities?	5f	<u> </u>	X
g	Athletic programs?	5g	ļ	<u> </u>
h	Other extracurricular activities? .	5h		x
	If you answered "Yes" to any of the above, please explain. If you need more space, use Schedule O			
	(Form 990)			
				۱
	Does the organization receive any financial aid or assistance from a governmental agency?	6a	<u> </u>	X
b	Has the organization's right to such aid ever been revoked or suspended?	6b	 	X
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 900)	· •	1 ~	1

SCHEDULE (Form 990)

Department of the Treasury Internal Revenue Service

Grants and Other Assistance to Organizations,

Governments, and Individuals in the United States Complete if the organization answered "Yes," on Form 990, Part IV, lines 21 or 22.

- 1	•	
047		I
545-004	×	l
_		
3 No	3	
OMB	90	ļ
	1	٠

▶ Attach to Form 990.

Inspection Employer Identification number

vame of the organization							
AR BROOK SCHOOL					;	22-	22-1487185
Part General Information on Grants and Assistance	n on Grants	and Assistance				3	
1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and	ain records to s	substantiate the am	nount of the grants or a	ssistance, the grantee	s' eligibility for the grar	nts or assistance, and	[
the selection criteria used to award the grants or assistance? Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.	award the gran	nts or assistance?	of orant func	Is in the United States			X Yes No
art II	Assistance to ine 21, for any	Governments a	Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use	n the United States 000 Check this box	. Complete if the org	lanization answered sceived more than \$	"Yes" to
Part IV and Schedule I-1 (Form 990) if additional	le I-1 (Form 9	90) if additional s	space is needed.	•			
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
			0	0			
			0	0			
	•		0	0	,		
			0	0			
			0	0			
			0	0			
			0	0			
			0	0			
			0	0			
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			0	0			
2 Enter total number of section 501(c)(3) and government organizations	n 501(c)(3) and	government organ	nzations	•		A A	

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

Schedule I (Form 990) 2009

(HTA)

22-1487185

Schedule I (Form 990) 2009

FAR BROOK SCHOOL

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

Schedule I (Form 990) 2009

SCHEDULE J (Form 990)

Department of the Treasury

(HTA)

Name of the organization

FAR BROOK SCHOOL

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.

 OMB No 1545-0047

2009

Open to Public Inspection

Schedule J (Form 990) 2009

Employer identification number

22-1487185

Questions Regarding Compensation Yes No Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 1a 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items First-class or charter travel Housing allowance or residence for personal use Travel for companions Payments for business use of personal residence Tax indemnification and gross-up payments Health or social club dues or initiation fees X Discretionary spending account Personal services (e.g., maid, chauffeur, chef) 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 1b Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all 2 officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a? 2 3 Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director. Check all that apply X Written employment contract Compensation committee Independent compensation consultant X Compensation survey or study X Approval by the board or compensation committee Form 990 of other organizations During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing 4 organization or a related organization. Receive a severance payment or change-of-control payment? 4a Participate in, or receive payment from, a supplemental nonqualified retirement plan? 4b b Participate in, or receive payment from, an equity-based compensation arrangement? 4c 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 5a The organization?. 5b Any related organization? If "Yes" to line 5a or 5b, describe in Part III 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 The organization? 6a а 6b Any related organization?. If "Yes" to line 6a or 6b, describe in Part III For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed 7 7 payments not described in lines 5 and 6? If "Yes," describe in Part III 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 8 Х in Part III . . If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?

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

Schedule J (Form 990) 2009

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

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

		(R) Broakdown of W	M-2 and/or 1099-MISC compensation	S. Compensation				
		Daniel (a)		(iii) Other	(C) Retirement and	oldevetooN (C)	(E) Total of continues	(F) Compensation
(A) Name		compensation	compensation	reportable compensation	other deferred compensation	benefits	(B)(I)-(D)	reported in prior Form 990 or Form 990-EZ
	ε		0	516	23,100	14,768	266,384	115,500
Murray Lopdeli Lawrence	(ii)	0	0	0	0	0	0	0
	(<u>:</u>)	125,000	0	10,000	0	0	135,000	0
iviary vvearn vviener	(ii)		0	0	0	0	0	0
	(:)	0	0	0	0	0	0	0
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	Ì							

Schedule J (Form 990) 2009

FAR BROOK SCHOOL Schedule J (Form 990) 2009
tental Information provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8 Also complete this par
for any additional information
Schedule J (Form 990) 2009

SCHEDULE J-1 (Form 990)

FAR BROOK SCHOOL Name of the organization Department of the Treasury Internal Revenue Service

Continuation Sheet for Schedule J (Form 990)

Attach to Form 990 to list additional information for Schedule J (Form 990), Part II.

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OMB No 1545-0047

Employer identification number

22-1487185

See Instructions for Schedule J (Form 990).

0;0 0:0 0:0 0:0 (F) Compensation reported in prior Form 990 or Form 990-EZ (E) Total of columns (B)(I)–(D) Continuation of Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (Schedule J, Part II) (D) Nontaxable benefits (C) Retirement and other deferred compensation (B) Breakdown of W-2 and/or 1099-MISC compensation (iii) Other reportable compensation 0;0 0 0 0:0 (ii) Bonus & incentive compensation (I) Base compensation Ξ €€ €€ Ξ \equiv Ξ Ξ \equiv €€ Ξ Ξ Ξ Ξ Ξ Ξ (A) Name Part I

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

Schedule J-1 (Form 990) 2009

SCHEDULE L

(Form 990 or 990-EZ)

Transactions With Interested Persons

➤ Complete if the organization answered
"Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c,
or Form 990-EZ, Part V, line 38a or 40b.

20**09**

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Department of the Treasury Internal Revenue Service

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

Name of the organization Employer identification number **FAR BROOK SCHOOL** 22-1487185 Excess Benefit Transactions (section 501(c)(3) and section 501(c)(4) organizations only). Part I Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b (c) Corrected? (b) Description of transaction 1 (a) Name of disqualified person Yes No Enter the amount of tax imposed on the organization managers or disqualified persons during the year under section 4958. Enter the amount of tax, if any, on line 2, above, reimbursed by the organization Loans to and/or From Interested Persons. Part II Complete if the organization answered "Yes" on Form 990, Part IV, line 26, or Form 990-EZ, Part V, line 38a (c) Original (e) In default? (b) Loan to or from (d) Balance due (f) Approved (g) Written (a) Name of interested person and purpose the organization? principal amount agreement? by board or committee? Yes No То From Yes No X Х Х Х 200,000 130,921 M Lopdell-Lawrence home purchase 0 0 0 0 0 0 0 ol 0 0 130.921 Total Grants or Assistance Benefiting Interested Persons. Part III Complete if the organization answered "Yes" on Form 990, Part IV, line 27 (c) Amount of grant or type of assistance (a) Name of interested person (b) Relationship between interested person and the organization **Business Transactions Involving Interested Persons.** Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c (d) Description of transaction (c) Amount of (a) Name of interested person (b) Relationship between (e) Sharing of transaction organization's interested person and the revenues? organization Yes No 0 0 0

000

SCHEDULE M (Form 990)

Noncash Contributions

Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

► Attach to Form 990.

OMB No 1545-0047

2009

Open To Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

FAR BROOK SCHOO

Employer identification number

	ROOK SCHOOL				185			
Pari	Types of Property		1					
		(a) Check if applicable	(b) Number of contributions	(c) Revenues reported on Form 990, Part VIII, line 1g	Meth	(d) lod of det revenu		;
1	Art—Works of art .							
2	Art—Historical treasures							
3	Art—Fractional interests							
4	Books and publications .							
5	Clothing and household		The second second second	-				
	goods		Property of the State of the					
6	Cars and other vehicles							
7	Boats and planes .							
8	Intellectual property							
9	Securities—Publicly traded	Х	12	36,880	sale of st	tocks		
10	Securities—Closely held stock							
11	Securities—Partnership, LLC,		·					
	or trust interests							
12	Securities—Miscellaneous							
13	Qualified conservation							
	contribution—Historic							
	structures							
14	Qualified conservation							
	contribution—Other							
15	Real estate—Residential							
16	Real estate—Commercial							
17	Real estate—Other							
18	Collectibles .							
19	Food inventory							
20	Drugs and medical supplies							
21	Taxıdermy .				<u> </u>			
22	Historical artifacts				ļ			
23	Scientific specimens				ļ			
24	Archeological artifacts .				ļ			
25	Other ► ()		0)			
26	Other ► ()		0		+			
27	Other ► ()		0	C				
28	Other ► ()	l	0	l c)			
29	Number of Forms 8283 receive	d by the o	rganization during the tax ve	ar for contributions for				
	which the organization complete	•			29			0
	Which the organization complete		,200, rantit, bondo nomion	.oogoo			Yes	No
30 a	During the year, did the organiz	ation rece	eive by contribution any propi	erty reported in Part I. lines	1–28			
•••	that it must hold for at least three							
	required to be used for exempt	-				30a		X
h	If "Yes," describe the arrangem		_ ·					
31	Does the organization have a g			review of any non-standard				
٠.	contributions?	4000	and pondy macroquired me			31	X	-
32 a	Does the organization hire or us	se third o	 arties or related organizations	s to solicit process, or sell		''	<u> </u>	
J2 a	noncash contributions?	•		•		32a	Х	1
h	If "Yes," describe in Part II					1	<u> </u>	
33	If the organization did not repor	t revenue	s in column (c) for a type of r	property for which column (a) is	}		
	checked, describe in Part II.		20.a (2) ioi a typo oi p		,			

SCHEDULE O (Form 990)

Supplemental Information to Form 990

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization Complete to provide information for responses to specific questions on Form 990 or to provide any additional information. ► Attach to Form 990.

Open to Public Inspection

Employer identification number **FAR BROOK SCHOOL** 22-1487185 Form 990 Part VI Section B Line 11a The Audit Committee and Treasurer review the 990 and recommends for Board approval Form 990 Part VI Section B Line 12c The Board has a Conflict of Interest policy for its members which requires written disclosure each year of actual and potential conflicts based on definitions contained in the policy. There is an ongoing obligation to update disclosures if circumstances change Form 990 Part VI Section B Line 15b A Board committee reviews and sets compensation for the Organization's Head The Board and Management review and set compensation for all other positions in a process that considers comparable pay data Form 990 Part VI Section A Line 6 & 7 The School's members are the parents and legal guardians of the children enrolled in the school. These members elect the Board of Trustees annually Form 990 Part VI Section A Line 8 Minutes are documented at all Board of Trustee meetings, reviewed the subsequent meeting, and retained on file

· 8868

(Rev April 2009)
Department of the Treasury
Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

► File a separate application for each return.

OMB No 1545-1709

• If yo	ou are filing for an Automatic 3-Month Extension, complete only Part I and check this box ou are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page to complete Part II unless you have already been granted an automatic 3-month extension on a prev		•	X					
Part	Automatic 3-Month Extension of Time. Only submit original (no copies needed)								
A corp	oration required to file Form 990-T and requesting an automatic 6-month extension—check this box a only	and comple	ete ►[
	er corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to re- file income tax retums	quest an e	xtension of						
of the relectro	pnic Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic returns noted below (6 months for a corporation required to file Form 990-T). However, you cannot file nically if (1) you want the additional (not automatic) 3-month extension or (2) you file Forms 990-BL, is, or a composite or consolidated Form 990-T. Instead, you must submit the fully completed and signer files. For more details on the electronic filing of this form, visit www.irs.gov/efile.	e Form 886 6069, or 88 ed page 2	58 370, group (Part II) of						
Type o		-	r identification number						
print	FAR BROOK SCHOOL 22-1487 Number, street, and room or suite no. If a P.O. box, see instructions	100							
File by the due date f									
filing your return Se	City town or post office state and ZID and a Form foreign address and matrixtons								
instruction	· • · · · · · · · · · · · · · · · · · ·	J 07	078						
Check	type of return to be filed (file a separate application for each return)								
	rm 990 Form 990-T (corporation)	[Form 4720						
∏ Fo	rm 990-BL Form 990-T (sec. 401(a) or 408(a) trust)		Form 5227						
=	rm 990-EZ Form 990-T (trust other than above)	一	Form 6069						
=	· · · · · · · · · · · · · · · · · · ·	H	Form 8870						
F0	rm 990-PF Form 1041-A	Ļ	j F01111 007U						
Tele If the lf the list for the	ephone No. ► (973) 379-3442 FAX No ► ee organization does not have an office or place of business in the United States, check this box is is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) he whole group, check this box I If it is for part of the group, check this box in the names and EINs of all members the extension will cover	•	If this and attach	a					
1	request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of until 2/15/2011 , to file the exempt organization return for the organization name s for the organization's return for. calendar year or 7/1/2009 , and ending 6/30		he extension	I					
2 If this tax year is for less than 12 months, check reason. Initial return Final return Change in accounting period									
	f this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax,								
	ess any nonrefundable credits. See instructions	<u>3</u> a	\$						
	If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax		_						
_	payments made Include any prior year overpayment allowed as a credit	3b	\$						
c Balance Due. Subtract line 3b from line 3a Include your payment with this form, or, if required,									
	deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment	3c	\$	0					
	System) See instructions on. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO ai			0					
for payment instructions.									
, <u>, , , , , , , , , , , , , , , , , , </u>									