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SCANNED DEC 0 6 2010

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.

OMB No 1545-0047 Open to Public Inspection

Α_	For the 2009	calendar y	ear, or tax year beginning $07/01/09$, and ending $06/30/1$.0		
В	Check if applicable	e Please use IRS	C Name of organization		D Employer	r identification number
	Address change	label or	THE WILSON SCHOOL			cance c
	Name change	print or	Doing Business As	T :-		613656
П	Initial return	type. See	Number and street (or P O box if mail is not delivered to street address)	Room/suite	E Telephone	
$\overline{\sqcap}$	Termination	Specific	271 BOULEVARD	1		334-0181
		Instruc- tions.	City or town, state or country, and ZIP + 4 MOUNTAIN LAKES NJ 07046		G Gross receipts	1,649,473
	Amended return	E Nom	e and address of pnncipal officer		H(a) Isthisagn	oun return for
Ш	Application pend	ing Nami	, and address of philopal officer		affiliates?	Yes X No
					H(b) Are all affit included?	iates Yes No
					i .	ach a list. (see instructions)
三	Tax-exempt s	tatus X	501(c) (3) ◄ (insert no) 4947(a)(1) or 527			
J	Website:		The-Wilson-School.org		Н(с) Group ехе	mption number
*****	Type of organiza			Year of formation	M	State of legal domicile
F	art I	Summa				
	1		he organization's mission or most significant activities			
Se	ET	ementa	ry School			
nar						
Ver	2 Chec	k this hoy	if the organization discontinued its operations or disposed of more than 2	25% of its net as	eate	
ŏ	3 Numb		g members of the governing body (Part VI, line 1a)	2070 01 113 1101 113		11
es &	4 Numb		endent voting members of the governing body (Part VI, line 1b)			9
Activities & Governance	5 Total		employees (Part V, line 2a)		5 4	42
Acti	6 Total	number of	volunteers (estimate if necessary)		6	3.0
_			ated business revenue from Part VIII_column (C), line 12		7a	
_	b Net u	nrelated bu	siness taxable income from Form 990-T, line SECEIVED	Prior Ye	. 7b	Current Year
	8 Contr	ributions an	d grants (Part VIII, line 1h)		0,232	41,890
Revenue	9 Progr		revenue (Part VIII, line 2g) me (Part VIII, column (A), lines 3, 4, and rd)		0,054	1,357,647
evel	10 Inves		me (Part VIII, column (A), lines 3, 4, and 7d)		8,850	-24,586
ď	11 Other		Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c and the North		5,553	
_			add lines 8 through 11 (must equal Part VIII, column (A), line 12)	1,53	4,689	1,374,951
	13 Gran	ts and simi	ar amounts paid (Part IX, column (A), lines 1–3)			
	L		or for members (Part IX, column (A), line 4)	<u>- 200</u>	7 066 004	
enses	15 Salar	-	ompensation, employee benefits (Part IX, column (A), lines 5–10)	1,01	6,302	1,066,094
ens	h Total		draising fees (Part IX, column (A), line 11e) j expenses (Part IX, column (D), line 25) ►	:		
Exp	1	-	(Part IX, column (A), lines 11a–11d, 11f–24f)	40	0,770	385,330
		-	Add lines 13–17 (must equal Part IX, column (A), line 25)		7,072	1,451,424
	19 Reve	-	penses Subtract line 18 from line 12	11	7,617	-76,473
Net Assets or				Beginning of Cu		End of Year
sse	20 Total	•	rt X, line 16)		2,474	1,106,064
Net	21 Total	•	Part X, line 26) and balances. Subtract line 21 from line 20		8,653 6,179	1,158,671 -52,607
	Part II		re Block	1	0,11	32,007
		Under pena	Ities of penury, I declare that I have examined this return, including accompanying schedule	es and statements,	and to the best	of my knowledge
		and belief,	t is true, correct, and complete Declaration of preparer (other than officer) is based on all ii	nformation of which	preparer has ar	ıy knowledge
Si	gn		Anda Mylls			
Н	ere	Signat	ure of officer		Date	lalia
			I'nda Myers Business Manager			18/10
_		▼ Type c	r print name and title			Preparer's identifying number
Pa	aid	Preparer's signature	Date Date	Check self-	. 🗆	(see instructions)
	eparer's	Signature	JAMES R TONELLI CRA 11/6 Crane, Tonelli, Rosenberg & Co.		oyed ▶	P00144149
	se Only	Firm's nam	EIN	22-1627982		
		if self-empli address, ar			Phone no	908-277-2350
Ma	av the IRS di		eturn with the preparer shown above? (see instructions)		IIU	Yes No
Fo	r Privacy Ac		erwork Reduction Act Notice, see the separate instructions.			Form 990 (2009)
DA	A	ŕ				617 18

4d Other program services (Describe in Schedule O)										
	(Expenses \$	including grants of \$) (Revenue \$)						
4e	Total program service expenses ▶	949,207								
				000						

Form 990 (2009) THE WILSON SCHOOL

Part IV. Checklist of Required Schedules

			Yes	No
1	'Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"		7.7	
_	complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
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_		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete			••
	Schedule C, Part II	4		<u>X</u>
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,"	_		7.7
_	complete Schedule D, Part I	6		<u>X</u>
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	_		7,
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
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? If "Yes,"			
10	complete Schedule D, Part IV	9		<u>X</u> _
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,	10		
••	VII, 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		ł	
	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 related 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.		ł	
•	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	<u> </u>
12A	Was the organization included in consolidated, independent audited financial statements for the tax year? Yes No			
	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional.			
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	X	<u> </u>
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	<u> </u>	X
Ь	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising,			٠,,
	business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any	۱		
40	organization or entity located outside the United States? If "Yes," complete Schedule F, Part II	15		<u>X</u>
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance	46		v
47	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	47		v
18	on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I Did the organization report more than \$15,000 total of fundraising event gross income and contributions on	17	 	X
10	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		Х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?	' '		<u>^</u> _
	If "Yes," complete Schedule G, Part III	19	1	x
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20	\vdash	X
	and the second s		n 990	(2009)

Checklist of Required Schedules (continued)

			Yes	No
	Old the organization report more than \$5,000 of grants and other assistance to governments and organizations			
	n the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		<u>X</u>
	Oid the organization report more than \$5,000 of grants and other assistance to individuals in the			
	Juited States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
	Old 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 Schedule J	23		<u>X</u>
	Oid the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	3100,000 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	24a		<u>X</u>
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	o defease any tax-exempt bonds?	24c	_	<u> </u>
	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 disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
	s 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			
	190-EZ? If "Yes," complete Schedule L, Part I	25b		X
	Vas a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or			
	isqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		X
	old 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?			
	f "Yes," complete Schedule L, Part III	27		X
	Vas the organization a party to a business transaction with one of the following parties (see Schedule L,			
	Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			l
	Schedule L, Part IV	28b		X
	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a			ļ
	amily member) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L,			
	Part IV	28c		X
	Old the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		X
_	Oid the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
	Part I	31		X
	Old the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		X
	Old the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	ections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
	Vas the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II,			
	II, IV, and V, line 1	34		X
	s 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
	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
	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,			
	Part VI	37		X
38 D				
	Old the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 9? Note. All Form 990 filers are required to complete Schedule O.	38	Х	

Statements Regarding Other IRS Filings and Tax Compliance Yes No 1a ' Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b b Did the organization comply with backup withholding rules for reportable payments to vendors and reportable Х gaming (gambling) winnings to prize winners? 1c 2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax 42 Statements, filed for the calendar year ending with or within the year covered by this return X If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 2b Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions) Did the organization have unrelated business gross income of \$1,000 or more during the year covered by 3a this return? X 3a If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O 3b 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 Х 4a If "Yes," enter the name of the foreign country b See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5a Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5b If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction? 5c Does the organization have annual gross receipts that are normally greater than \$100,000, and did the 6a organization solicit any contributions that were not tax deductible? 6a If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 6b Organizations that may receive deductible contributions under section 170(c). Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? 7a 7b 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 was required to file Form 8282? 7с 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 personal benefit contract? 7e Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7f a For all contributions of qualified intellectual property, did the organization file Form 8899 as required? 7g For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required? 7h Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year? 8 Sponsoring organizations maintaining donor advised funds. Did the organization make any taxable distributions under section 4966? 9a Did the organization make a distribution to a donor, donor advisor, or related person? 9b h Section 501(c)(7) organizations. Enter Initiation fees and capital contributions included on Part VIII, line 12 10a 10b b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities Section 501(c)(12) organizations. Enter. Gross income from members or shareholders а 11a Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) 11b Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b

Form 990 (2009) THE WILSON SCHOOL 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			
b	Enter the number of voting members that are independent 9]		ĺ
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with	7	[
	any other officer, director, trustee, or key employee?	2	X	
3	Did the organization delegate control over management duties customarily performed by or under the direct			
	supervision of officers, directors or trustees, or key employees to a management company or other person?	3		Х
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		Х
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		Х
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 members			
	of the governing body?	7a		Х
ь	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
	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	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached		1	
	at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal			
	venue Code.)			
			Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a		Х
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters,			
_	affiliates, and branches to ensure their operations are consistent with those of the organization?	10b		
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the		1	†
• •	form?	11	X	
11a	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Does the organization have a written conflict of interest policy? If "No," go to line-13	12a	T	-X
<u></u> _	Are officers, directors or trustees, and key employees required to disclose annually interests that could give			
_	rise to conflicts?	12b		l
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		
13	Does the organization have a written whistleblower policy?	13	1	Х
14	Does the organization have a written document retention and destruction policy?	14	1	X
15	Did the process for determining compensation of the following persons include a review and approval by		1	
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	1	X
ь	Other officers or key employees of the organization	15b		1
-	If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions)			1
16a			1	
. 54	with a taxable entity during the year?	16a	1	Х
h	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate	1.50		1
	its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard			
	the organization's exempt status with respect to such arrangements?	16b	.1	
Sac	ction C. Disclosure		٠	'

Section C. Discl	osure
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- ŊJ List the states with which a copy of this Form 990 is required to be filed ▶
- Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply

Own website Another's website X Upon request

- Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public
- State the name, physical address, and telephone number of the person who possesses the books and records of the organization ▶ Linda Myers 271 Boulevard

Mountain Lakes

NJ 07046

973-334-0181

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."

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

- 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 hours per	Posi		(C check	c)	hat ap	ply)	(D) Reportable	(E) Reportable compensation	(F) Estimated
	week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
Carolyn K. Borlo										
Secretary	65.00	Х		Х				90,500	0	0
Linda Myers Business Mgr	65.00	х						74,000	0	0
John P. Demezzo	2.00	х						0	0	0
Kenneth DeVries	2.00	X	_			-	-	0	0	0
Tim DeVries	2.00	X			_			0	0	0
Douglas Idelman	2.00	X						0	0	0
Maria Marchigian	<u> </u>	 								<u></u>
	2.00	X						0	0	0
Christopher Modze	lewski									
Vice President	2.00	X		X				0	0	0
Henry Modzelewsk	2.00	х						0	0	0
Dr. E. Thomas Bel	4									
President	4.00	X		X		ļ		0	.0	0
_Carol A. Guedez		l							_	_
Treasurer	2.00	X	-	X		-		0	0	0
Tom Tyson		х						0	0	0

Part VI	(A) Name and Title	(B) Average hours per			((chec	C)	that a	oply)	(D) Reportable compensation	(E) Reportable compensation		(F) stimated	
•		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)	com fi org an	other of other of other of other of other of other of other other of other o	no n t
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				<u> </u>				Ĺ	164 506				
	al number of individuals (in				tho	se li	sted	abov	ve) who received more than				
	ortable compensation fron											Y	es No
emp 4 For the indi	oloyee on line 1a? If "Yes, any individual listed on lir organization and related o vidual	" complete Sche ne 1a, is the sum organizations gre	dule of re ater	J fo epor thar	r sud table n \$15	ch ir e coi 50,0	npen 002 l	ual satio	on and other compensation on and other compensation es," complete Schedule J for a second of the sec	n from or such		3 4	X X
ser	vices rendered to the orga	nization? If "Yes							ny unrelated organization f r such person	or		5	X
1 Cor	B. Independent Contract mplete this table for your from the organ	ive highest comp	ens	ated	ınde	epen	dent	con	tractors that received more	e than \$100,000 of			
		(A) d business address							Descr	(B) aption of services		Comp	(C) ensation
		<u>, </u>						+	 				
								+					
								+					
								+				•	
	al number of independent re than \$100,000 in comp						ited t	o th	ose listed above) who rece	eived		0	
DAA	+ 1001000 III 00111p			y-11 114									990 (200

Pa	rt V	III Statement of Reve	nue		······································	, AS Y	, m,	· · · · · · · · · · · · · · · · · · ·	
	*					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
SS	10	Federated campaigns	1a	······································			ievenue		312, 313, 0/ 314
art	la L	Membership dues	1b			1	Ī		
흗		•			<u></u> [‡		
ra ra	C .	Fundraising events	1c				1		
뺼	ď	Related organizations	1d						
Sis	е	Government grants (contributions)	1e					-	
걸힐	f	All other contributions, gifts, grants, and similar amounts not included above							
문항		and similar amounts not included above	1f		41,890				
on	g	Noncash contributions included in lines 1a-	1f 3	5	ŀ				
Program Service Revenue Contributions, gifts, grants and other similar amounts	h	Total. Add lines 1a-1f			. •	41,890			
ae					Busn. Code				·····
e e	2a	Tuition				1,234,464	1,234,464		
ě	b	Rental Income - Cra	ig			176,200	176,200		
Ş	С	Shared expenses Inc	ome C	raig		117,025	117,025		
Sel	d	Rental income				49,721	49,721		
an	е	Wilson Plus Income				17,939	17,939		
g	f	All other program service reve	nue			-237,702	-237,702		
4	g	Total. Add lines 2a-2f			•	1,357,647			
	3	Investment income (including	dıvıder	ds, intere	est, and			·	
		other similar amounts)			▶ [7,978	7,978		
	4	Income from investment of tax	-exem	pt bond p	roceeds ▶				
	5	Royalties			▶ [
		(ı) Real		(II) F	Personal				
	6a	Gross Rents							
	b	Less rental exps							
	С	Rental inc or (loss)							
	d	Net rental income or (loss)			•				
1	7a	(i) Securities	S	(11)	Other				
		sales of assets other than inventory 241,	311		647				•
	b	Less cost or other				,			
		basis & sales exps 274,	522	1					
	С	Gain or (loss) -33,	211		647			,	
	d	Net gain or (loss)			•	-32,564			-32,564
		Gross income from fundraising eve	nts						
nue		(not including \$							
š		of contributions reported on line 1c)						
Other Reven		See Part IV, line 18	а						
the	b	Less direct expenses	b						
0	С	Net income or (loss) from fund	iraising	events	•				
		Gross income from gaming activities	1						
		See Part IV, line 19	а						
	b	Less direct expenses	b						
		Net income or (loss) from gam	ning ac	tıvıties	•			***************************************	
		Gross sales of inventory, less		-					
		returns and allowances	а		İ	•			
	b	Less: cost of goods sold	ь						
		Net income or (loss) from sale	s of in	ventorv	•				
		Miscellaneous Revenue			Busn. Code				
	11a	· · · · · · · · · · · · · · · · · · ·]		
	b		•						
	c								
	d	All other revenue							_
	e	Total. Add lines 11a-11d							
	12	Total Revenue. See instruction	ns.			1,374,951	1,365,625	0	-32,564
-						-, -, -, -, -	,,	<u></u>	32,301

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).

	o not include amounts reported on lines 6b, , 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
	Grants and other assistance to governments and		expenses	general expenses	expenses
'	organizations in the U.S. See Part IV, line 21			j	
2	Grants and other assistance to individuals in				
2	the U.S. See Part IV, line 22				
3	Grants and other assistance to governments,	 			
3			!		
	organizations, and individuals outside the			1	
	U S See Part IV, lines 15 and 16 Benefits paid to or for members				······································
4	· · · · · · · · · ·				
5	Compensation of current officers, directors,				
c	trustees, and key employees				
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
7	persons described in section 4958(c)(3)(B)	070 044	600 600	200 211	
7	Other salaries and wages	970,944	680,633	290,311	
8	Pension plan contributions (include section 401(k)				
^	and section 403(b) employer contributions)	20.000	3.5 50.6		
9	Other employee benefits	22,268	15,588	6,680	
10	Payroll taxes	72,882	51,017	21,865	-
11	Fees for services (non-employees)				
a	Management				
b	Legal	10			
c	Accounting	13,573		13,573	
d	Lobbying				
e	Professional fundraising services See Part IV, line 17				
f	Investment management fees				
g	Other				
12	Advertising and promotion				
	Office expenses	6_,_049		6,049	
14	Information technology				
15	Royalties				
16	Occupancy	80,810	80,810		
17	Travel				
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
9	Conferences, conventions, and meetings	1,131		1,131	
20	Interest	58,217	58,217		
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	25,135	25,135		
23	Insurance				
24	Other expenses. Itemize expenses not				
	covered above. (Expenses grouped together				
	and labeled miscellaneous may not exceed				
	5% of total expenses shown on line 25 below.)				
а	Insurance (Liab, Fire, WC	39,335	· · · · · · · · · · · · · · · · · · ·	39,335	
b	Cleaning Service	36,345		36,345	
c	Repairs & Maintenance	28,471		28,471	
d	Development & Promotion	21,270		21,270	
e	Misc G & A	9,465		9,465	
	All other expenses	65,529	37,807	27,722	
25	Total functional expenses. Add lines 1 through 24f	1,451,424	949,207	502,217	
26	Joint costs. Check here ▶ ☐ If following		2 2 2 7 2 0 7	302/21/	
	SOP 98-2 Complete this line only if the			{	
	organization reported in column (B) joint costs from a combined educational campaign and				
	fundraising solicitation				

Part X -**Balance Sheet** (B) (A) End of year Beginning of year 30,233 Cash-non-interest bearing 47,705 1 468,076 2 411,040 Savings and temporary cash investments Pledges and grants receivable, net 3 3 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 6 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 7 Notes and loans receivable, net 8 Inventories for sale or use 20,626 23,544 Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost or 10a 3,727,411 other basis Complete Part VI of Schedule D 323,761 352,397 3,375,014 10b 10c b Less accumulated depreciation 249,388 291,768 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 14 Intangible assets 15 15 Other assets See Part IV, line 11 1,112,474 106,064 16 16 Total assets. Add lines 1 through 15 (must equal line 34) 13,744 7,292 17 Accounts payable and accrued expenses 18 18 Grants payable 74,757 86,662 19 19 Deferred revenue 20 20 Tax-exempt bond liabilities 21 Escrow or custodial account liability Complete Part IV of Schedule D 21 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L _____ 22 992,616 974,006 23 23 Secured mortgages and notes payable to unrelated third parties Unsecured notes and loans payable to unrelated third parties 24 Other liabilities. Complete Part X of Schedule D 83,988 25 84,259 1,158,653 26 1,158,671 Total liabilities. Add lines 17 through 25 Assets or Fund Balances Organizations that follow SFAS 117, check here ▶ |X| and complete lines 27 through 29, and lines 33 and 34. -66,231 -52,607 Unrestricted net assets 27 20,052 28 Temporarily restricted net assets Permanently restricted net assets 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 31 Paid-in or capital surplus, or land, building, or equipment fund 32 Retained earnings, endowment, accumulated income, or other funds 32 -46,179 -52,607 33 33 Total net assets or fund balances 1,106,064 Total liabilities and net assets/fund balances 112,474

the Single Audit Act and OMB Circular A-133?

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

orn 990 (2009) THE WILS	SON SCHOOL	22-1613656		Pag	ge 12
Part XI Financial Stat	tements and Reporting				
				Yes	No
1 `Accounting method used to	prepare the Form 990 Cash	X Accrual Other			
If the organization changed	its method of accounting from a prior ye	rear or checked "Other," explain in			
Schedule O		·			
2a Were the organization's fina	incial statements compiled or reviewed	by an independent accountant?	2a		Х
b Were the organization's fina	incial statements audited by an indepen	ndent accountant?	2b	Х	
c If "Yes" to line 2a or 2b, doe	s the organization have a committee th	nat assumes responsibility for oversight of			
the audit, review, or compile	ation of its financial statements and sele	lection of an independent accountant?	2c		Х
If the organization changed	either its oversight process or selection	n process during the tax year, explain in			
Schedule O	•				
d If "Yes" to line 2a or 2b, che	ck a box below to indicate whether the	financial statements for the year were			
issued on a consolidated ba	isis, separate basis, or both	·			
CCC	_	lated and separate basis			
3a As a result of a federal awa	rd, was the organization required to und	dergo an audit or audits as set forth in			

Form 990 (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. ► See separate instructions.

OMB No 1545-0047

2009

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

THE WILSON SCHOOL

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

Employer identification number 22-1613656

Schedule A (Form 990 or 990-EZ) 2009

Pa	art l	Reaso	on for Public Charity	Status (All organizations	must c	omplete	e this p	oart.) S	see in	structi	ons.				
he	orga	nization is not	a private foundation because	e it is. (For lines 1 through 11, o	heck only	one box.)								
1		A church, con	vention of churches, or asso	ociation of churches described i	n section	170(b)(1)(A)(i).								
2	X	A school desc	cribed in section 170(b)(1)(A	A)(ii). (Attach Schedule E)											
3	П	A hospital or	a cooperative hospital service	ce organization described in sec	tion 170(b)(1)(A)(i	ii).								
4	П	A medical res	search organization operated	I in conjunction with a hospital of	described.	ın sectioi	n 170(b)	(1)(A)(ii	i). Ente	r the ho	spital's name				
		city, and state	•				• • •		•		•				
5	\Box	•		of a college or university owned	or operate	ed by a go	vemme	ntal unit	descrit	oed in					
_	ب	-	b)(1)(A)(iv). (Complete Part	•	,	,									
6	\Box	-		overnmental unit described in s	ection 17	O(b)(1)(A)	(v).								
7	Ħ	•	, ,	substantial part of its support from			• •	rom the	genera	Loublic					
•	ــــا	•	section 170(b)(1)(A)(vi). (Co	• • • • • • • • • • • • • • • • • • • •	= 5				3						
8	\Box			70(b)(1)(A)(vi). (Complete Part	H)										
9	Н	-	An organization that normally receives (1) more than 33 1/3 % of its support from contributions, membership fees, and gross												
•	لــــا		•												
	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														
		• •	•	0, 1975 See section 509(a)(2).	•			,							
10			•	exclusively to test for public safe	•		•								
11	П	•	,	exclusively for the benefit of, to	•			to carry	out the)					
	ـــا	_	•	ed organizations described in s	•			-							
			, , , , , ,	he type of supporting organizati					•						
		a Type		c Type III-Function		•	a ĺ	一	e III-Ot	her					
е			□ <i>''</i>	anization is not controlled direc	-		ne or m	ore disq	ualified						
				and other than one or more pul	-					section					
		509(a)(1) or s	section 509(a)(2)			_									
f		If the organization	ation received a written dete	rmination from the IRS that it is	a Type I,	Type II, o	or Type i	III suppo	orting						
		organization,	check this box		- —					_			-[-]-		
g		Since August	17, 2006, has the organization	tion accepted any gift or contrib	ution from	any of th	ne						_		
_		following per	sons?												
		(i) A persor	who directly or indirectly co	ontrols, either alone or together	with perso	ons descr	ibed ın (u)				Yes	No		
		and (III) b	below, the governing body of	f the supported organization?							11g(i)				
		(ii) A family	member of a person describ	ped in (i) above?							11g(ii)				
		(iii) A 35% c	ontrolled entity of a person of	described in (i) or (ii) above?							11g(iii				
h		Provide the f	following information about t	he supported organization(s).											
(ı)	Nam	e of supported	(ii) EIN	(iil) Type of organization	1	organization		ou notify		sthe	(viı) Am				
	org	anization		(described on lines 1-9 above or IRC section		sted in your document?		nization in of your	organızat	ion in col zed in the	supp	ort			
				(see instructions))	governing			port?		S?					
					Yes	No	Yes	No	Yes	No					
							İ								
						ļ	-		 						
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				-	1		<u> </u>								
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Tota	ı					1		[1 1					

Form 990 or 990-EZ.

Schedule A (Form 990 or 990-EZ) 2009 THE WILSON SCHOOL Page 2 Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked 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 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge 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) Public support. Subtract line 5 from line 4 Section B. Total Support Calendar year (or fiscal year beginning in) ▶ (a) 2005 (b) 2006 (c) 2007 (d) 2008 (e) 2009 (f) Total 7 Amounts from line 4 Gross income from interest, dividends. payments received on securities loans, rents, royalties and income from similar sources Net income from unrelated business activities, whether or not the business is regularly carned on 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 -12 Gross receipts from related activities, etc. (see instructions) 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)) Public support percentage from 2008 Schedule A, Part II, line 14 15 15 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 more, check this box and stop here. The organization qualifies as a publicly supported organization 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 % or more, check this box and stop here. The organization qualifies as a publicly supported organization 10%-facts-and-circumstances test--2009. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or 17a more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization 10%-facts-and-circumstances test—2008. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the

organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

18

Part III Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 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 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") 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 Gross receipts from activities that are not an 3 unrelated trade or business under section 513 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities 5 furnished by a governmental unit to the organization without charge Total. Add lines 1 through 5 Amounts included on lines 1, 2, and 3 7a received from disqualified persons Amounts included on lines 2 and 3 received ь from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year Add lines 7a and 7b C Public support (Subtract line 7c from Section B. Total Support Calendar year (or fiscal year beginning in) ▶ (a) 2005 (b) 2006 (c) 2007 (d) 2008 (e) 2009 (f) Total 9 Amounts from line 6 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carned on 12 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV.) 13 Total support. (Add lines 9, 10c, 11, 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) 14 organization, check this box and stop here Section C. Computation of Public Support Percentage 15 Public support percentage for 2009 (line 8, column (f) divided by line 13, column (f)) 15 % Public support percentage from 2008 Schedule A, Part III, line 15 16 Section D. Computation of Investment Income Percentage Investment income percentage for 2009 (line 10c, column (f) divided by line 13, column (f)) 17 17 18 Investment income percentage from 2008 Schedule A, Part III, line 17 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 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

Schedule A (Form 990 or 990-EZ) 2009 THE WILSON SCHOOL

22-1613656

Page 4

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

DAA

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

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

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

▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

Open to Public Inspection

Schedule D (Form 990) 2009

lame	e of the organization		Employer identification number
וידי	HE WILSON SCHOOL		22-1613656
	organizations Maintaining Donor Advised Further organization answered "Yes" to Form 990, I		
		(a) Donor advised funds	(b) Funds and other accounts
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		
5	Did the organization inform all donors and donor advisors in writing tha	t the assets held in donor advised	
	funds are the organization's property, subject to the organization's excl	usive legal control?	Yes No
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 o	r donor advisor, or for any other	
	purpose conferring impermissible private benefit?		Yes No
Pa	ert II Conservation Easements. Complete if the organized	anization answered "Yes" to For	m 990, Part IV, line 7.
1	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 im	portant land area
	Protection of natural habitat	Preservation of certified historic	structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualified conse	rvation contribution in the form of a conse	ervation
	easement on the last day of the tax year		
	Total and the second se		Held at the End of the Tax Yea
a	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements	hidad in (a)	2b
c	Number of conservation easements on a certified historic structure inc		2c 2d
di 3	Number of conservation easements included in (c) acquired after 8/17. Number of conservation easements modified, transferred, released, experiences.		
3	the taxable year	tunguished, or terminated by the organize	ation during
4	Number of states where property subject to conservation easement is	located >	
5	Does the organization have a written policy regarding the periodic mor		
•	violations, and enforcement of the conservation easements it holds?		☐ Yes ☐ No
6	Staff and volunteer hours devoted to monitoring, inspecting, and enfor	cing conservation easements during the y	year
	>		~
7	Amount of expenses incurred in monitoring, inspecting, and enforcing	conservation easements during the year	
	> \$		
8	Does each conservation easement reported on line 2(d) above satisfy	the requirements of section	
	170(h)(4)(B)(ı) and section 170(h)(4)(B)(ıı)?		Yes No
9	In Part XIV, describe how the organization reports conservation easen	•	·
	balance sheet, and include, if applicable, the text of the footnote to the the organization's accounting for conservation easements.	organization's financial statements that of	describes
D:	art III Organizations Maintaining Collections of Art.	Historical Treasures or Other	Similar Assets
, ,	Complete if the organization answered "Yes" to		Official Assets.
1a	if the organization elected, as permitted under SFAS 116, not to repor	t in its revenue statement and balance sh	neet works of
	art, historical treasures, or other similar assets held for public exhibition		
	provide, in Part XIV, the text of the footnote to its financial statements	that describes these items.	
b	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, e	ducation, or research in furtherance of pu	ublic 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		▶ \$
2	If the organization received or held works of art, historical treasures, o	r other similar assets for financial gain, pi	rovide the
	following amounts required to be reported under SFAS 116 relating to	these items	
а	Revenues included in Form 990, Part VIII, line 1		▶ \$ ▶ \$
b	Assets included in Form 990, Part X		▶ \$

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

depreciation (investment) basis (other) 1a Land **b** Buildings c Leasehold improvements d Equipment 3,375,014 -3,375,014

Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c))

Schedule D (Form 990) 2009

375,01

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		
Closely-held equity interests		
Other		
Total (Online (b) must small Form 000 Part V and (D) line 40.)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.)	Dort V. line 42	
Part VIII Investments—Program Related. See Form 99		(AMahadataa)
(a) Description of investment type	(b) Book value	(c) Method of valuation
		Cost or end-of-year market value
		<u> </u>
	<u> </u>	
		· · · · · · · · · · · · · · · · · · ·
<u> </u>		
· · · · · · · · · · · · · · · · · · ·		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.)	<u> </u>	
Part IX Other Assets. See Form 990, Part X, line 15.		
(a) Description		(b) Book value
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)		>
Part X Other Liabilities. See Form 990, Part X, line 2	25.	
1 (a) Description of liability	(b) Amount	·
Federal income taxes		
Security deposits Craig School	82,759	
Reserve for Unemployment Claim	1,500	
	 	
	+	
	-	
	04.050	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	84,259	
2. FIN 48 Footnote In Part XIV, provide the text of the footnote to the orga	anization's financial statemer	nts that reports the
organization's liability for uncertain tax positions under FIN 48		

Pa	int XI. Reconciliation of Change in Net Assets from Form 990 to	Audit	ted Financial Statem	ents	
1	Total revenue (Form 990, Part VIII, column (A), line 12)			1	1,374,951
2 .	Total expenses (Form 990, Part IX, column (A), line 25)	2	1,451,424		
3	Excess or (deficit) for the year. Subtract line 2 from line 1		3	-76,473	
4	Net unrealized gains (losses) on investments		4	72,838	
5	Donated services and use of facilities		Í	5	
6	Investment expenses			6	
7	Prior period adjustments			7	
8	Other (Describe in Part XIV)			8	-2,793
9	Total adjustments (net). Add lines 4 through 8			9	70,045
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9			10	-6,428
Pa	Reconciliation of Revenue per Audited Financial Stateme		ith Revenue per Ref	turn	
1	Total revenue, gains, and other support per audited financial statements			1	1,444,996
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12.				
а	Net unrealized gains on investments	2a	72,838		
ь	Donated services and use of facilities	2b			
С	Recovenes of prior year grants	2c		. !	
d	Other (Describe in Part XIV)	2d	-2,793		
е	Add lines 2a through 2d		<u> </u>	2e	70,045
3	Subtract line 2e from line 1			3	1,374,951
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	ſ			
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	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)			5	1,374,951
Pa	art XIII Reconciliation of Expenses per Audited Financial Statem	ents '	With Expenses per F	Retur	'n
1	Total expenses and losses per audited financial statements			1	1,451,424
2	Amounts included on line 1 but not on Form 990, Part IX, line 25				
а	Donated services and use of facilities	2a			İ
b	Prior year adjustments	2b		[
c	Other losses	2c		ŀ	
d	Other (Describe in Part XIV)	2d		<u> </u>	İ
_ e.	_Add lines 2a.through 2d			- 2e-	
3	Subtract line 2e from line 1			3	1,451,424
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			Ė	İ
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		ŀ	
b	Other (Describe in Part XIV.)	4b			
c	Add lines 4a and 4b			4c	
******	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)			5	1,451,424
	art XIV Supplemental Information				
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lii				
	2b, Part V, line 4, Part X, line 2; Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, li	nes 2d	and 4b. Also complete		
	part to provide any additional information.		_		
_P	<u>art XI, Line 8 - Reconcilation of Changes -</u>	o <u>t</u>	h <u>e</u> r		. _
I	nvestment fees		Ś	;	-2,793
			'		
_P	<u>art XII, Line 2d - Revenue Amounts Included</u>	d_ir	<u> Financials</u>	_0 <u>t</u>	:her
	nvestment fees				
1-	11 A C D C III C T C C D			'- -	·

Schedule D (Fe	om 990) 2009	THE WILSON	SCHOOL		22-1613656	Page 5
Part XIV	Supplemen	ntal Information (co	ontinued)	·····		
<u> </u>						
			- -			<u>-</u>
		_				
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	- -	·				-

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.

Attach to Form 990 or Form 990-EZ.

OMB No 1545-0047

2009

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

THE WILSON SCHOOL

Employer identification number 22-1613656

	1112 1112011 2011001	02000	1450	Lua
		<u> </u>	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	ļ
2	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its			
	brochures, catalogues, and other written communications with the public dealing with student admissions,		1,,	
	programs, and scholarships?	2	X	ļ
3	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media		1	
	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		1	
	describe If "No," please explain. If you need more space, use Schedule O (Form 990)	3	X	
	Newspaper advertisments		1	
			1	
			ł	
			Ī	
4	Does the organization maintain the following?		1	
а	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?	45	X	<u> </u>
С	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing			ļ
	with student admissions, programs, and scholarships?	40		ļ
d	Copies of all material used by the organization or on its behalf to solicit contributions?	4c	X	ļ
	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		1	
а	Students' rights or privileges?	5a	 	X
b	Admissions policies?		-	X
]
С	Employment of faculty or administrative staff?			X
				l
d	Scholarships or other financial assistance?	50		X
		Ì		
е	Educational policies?	5€		X
f	Use of facilities?	5f		X
g	Athletic programs?	50		Х
h	Other extracurricular activities?	51		X
	If you answered "Yes" to any of the above, please explain. If you need more space, use Schedule O			
	(Form 990)			
6a	Does the organization receive any financial aid or assistance from a governmental agency?	68	.]	X
b	Has the organization's right to such aid ever been revoked or suspended?	61		X
_	If you answered "Yes" to either line 6a or line 6b, explain on Schedule O (Form 990)	- <u></u> -	1	1
7	Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05		}	
•	of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," explain on Schedule O			
	(Form 990)	7	X	

SCHEDULE O (Form 990)

Supplemental Information to Form 990

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

Attach to Form 990.

OMB No 1545-0047
2009
Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

THE WILSON SCHOOL

Employer identification number

22-1613656

Form 990, Part VI, Line 2 - Related Party Information Among Officers

Christopher Modzelewski

Henry Modzelewski

BOT member

BOT member

Family relationship

Tim DeVries

Kenneth DeVries

BOT member

BOT member

Family relationship

Form 990, Part VI, Line 11A - Organization's Process to Review Form 990 990 is reviewed by The Wilson School management prior to its approval and submission to the IRS.

Form 990, Part VI, Line 15b - Compensation Process for Officers

Compensation of Head of School and Business Manager is subject to review

and approval by the Board of Trustees

Form 990, Part VI, Line 18 - No Public Disclosure Explanation Forms are available to the public upon request.

Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation Governing documents are made available to the public upon request.

Department of the Treasury Internal Revenue Service

Depreciation and Amortization

(Including Information on Listed Property)

Attachment Sequence No 67

► See separate instructions.

Attach to your tax return.

OMB No 1545-0172

Name	e(s) snown on return '만나다 되는	T CON CCUOOT						fying n	
Dunn		LSON SCHOOL	<u> </u>				1 22-	. 101	3656
	ess or activity to which this form relates ndirect Depreciat	ion							
			erty Under Section	170					
FC			<u>ty,</u> complete Part V			nloto D	n=+ 1		
1				belore you	COII	ipiete ra	ail i.	1	250 000
2	Maximum amount. See the instructions for a higher limit for certain businesses Total cost of section 179 property placed in service (see instructions)								250,000
3	Threshold cost of section 179 property			tions)				3	800,000
4	Reduction in limitation. Subtract I			alons)				4	800,000
5	Dollar limitation for tax year Subtract I			nn conaratoly c	aa inetr	uctions		5	
6		on of property		st (business use			lected cos	<u> </u>	
					- //				
						-			
7	Listed property Enter the amoun	t from line 29		ľ	7				
8	Total elected cost of section 179	property. Add amount	s in column (c), lines 6 a	nd 7				8	
9	Tentative deduction. Enter the sr	naller of line 5 or line	8					9	
10	Carryover of disallowed deduction	n from line 13 of your	2008 Form 4562					10	
11	Business income limitation Ente	r the smaller of busine	ess income (not less than	zero) or line !	5 (see	instruction	s)	11	
12	Section 179 expense deduction.	Add lines 9 and 10, bu	it do not enter more than	line 11				12	
<u>13</u>	Carryover of disallowed deduction			•	13				
***************************************	: Do not use Part II or Part III belo								
			nd Other Deprecia	· · · · · · · · · · · · · · · · · · ·		lude liste	ed prop	erty.)	(See instr.)
14	Special depreciation allowance for		ther than listed property)	placed in ser	vice				
	during the tax year (see instruction	•						14	
15	Property subject to section 168(f)	. ,						15	05.105
16 Da	Other depreciation (including AC		ida liatad aramanti.	/Caa inata	4!	\		16	25,135
100	art III MACRS Deprecia	tion (Do not Incli	ude listed property. Section A	(See Instr	uctio	ns.)			
17_	MACRS deductions for assets of	and in continuing in tou		000				1 47	
-1 <i>7</i> 18	MACRS deductions for assets plant and assets								0
10	If you are electing to group any assets Section B—		rvice During 2009 Tax Y					vstem	
		(b) Month and year	(c) Basis for depreciation	(d) Recovery				you	[
	(a) Classification of property	placed in service	(business/investment use only–see instructions)	period	(e) C	onvention	(f) Me	thod	(g) Depreciation deduction
<u>19a</u>	3-year property	-			<u> </u>				
<u>b</u>	5-year property	4		-					
	7-year property	-		 					
_ <u>d</u>	10-year property	-							
- f	15-year property 20-year property	-							
_ <u>'</u> _	25-year property	-		25 yrs.			S/	1	
	Residential rental			27 5 yrs.	 -	MM	S/		
•••	property			27 5 yrs		MM	S/		
	Nonresidential real			39 yrs		MM	S/		
•	property			1 00 7.0		MM	S/		
	Section C—A	ssets Placed in Serv	rice During 2009 Tax Ye	ar Using the	Alterna				n
20a	Class life			Τ		· · · · · · · · · · · · · · · · · · ·	S/		
ь	12-year	7		12 yrs			S/		
	40-year			40 yrs	L	MM	S/		
	ert IV Summary (See in	structions.)							
21	Listed property Enter amount fro	m line 28			-			21	
22	Total. Add amounts from line 12,	lines 14 through 17,	lines 19 and 20 in colum	n (g), and line	21. Er	iter here			
	and on the appropriate lines of yo				s			22	25,135
23	For assets shown above and pla-	ced in service during	the current year, enter th	е					
	portion of the basis attributable to	section 263A costs			23				
	Same and the Control of the Control		4.0						- 4500

1421					
Forms 990 / 990-PF	Mort	gages and Otl	her Notes Payable	<u> </u>	2009
Name	For calendar year 2009, o	or tax year beginning	07/01/09 , and ending 06	5/30/10	Intification Number
				Employer ide	muncation Number
THE WILSON SO	CHOOL			22-1613	3656
Form 990, Par	ct X, Line 23 -	Additional	Information		
	Name of lender		Relationship to d	isqualified nerso	n
(1) Bank of Ame			Notationion to u		
(2)					
(4)	. =				
(5)					
(6) (7)					
(8)					
(9) (10)					·· ·- ·
			T		
Onginal amount borrowed	Date of loan	Maturity date	Repayment terms		Interest rate
(1) 1,004,5		01/07/14			5.850
(2)					
(4)					
(5)				 	
(6) (7)					
(8)					
(9) (10)					
(10)					
s	ecurity provided by borrower		Purpose	of loan	
(1) Land and bu			Mortgage		
(2)					
(3) (4)					
(5)					
(6) (7)					
(8)					
(9) (10)					
(10)					
Conside	eration furnished by lender		Balance due at beginning of year		alance due at end of year
(1)			992,616		974,006
(2)		· · · · · · · · · · · · · · · · · · ·			
(4)					
(5)					
(6) (7)			-		
(8)				• • • • • • • • • • • • • • • • • • • •	
(9) (10)					
Totals			992,616		974,006