

See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



Form **990**

Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

2009

Open to Public Inspection

A Fo	r the 2	2009 ca	lendar yea	r, or tax year beginning	07-01-2009	and ending 06-30-201	0			
B Ch	eck ıf aş	pplicable	Please	C Name of organization CRANBROOK EDUCATION	IAL COMMUNITY	,		D Employer	identif	ication number
- Ad	dress ch	ange	use IRS label or					38-2015		
— Na	me chai	nge	print or type. See	Doing Business As				E Telephone		
— Ind	tıal retur	rn	Specific	Number and street (or P	O box if mail is	s not delivered to street addre	ess) Room/suite	(248) 64!		
— Te	mınated	d	Instruc- tions.	PO BOX 801				G Gross receip	ots \$ 29	8,132,461
– _{Am}	nended i	return		City or town, state or cou		- 4				
— _{Ap}	plication	pending		BLOOMFIELD HILLS, MI	483030801					
			F Nan	ne and address of princ	ıpal officer		H(a) Is th	■ is a group ret	urn foi	
			DOMIN	IIC DIMARCO	.,,			is a group reti ites?	urn ioi	┌ Yes ┌ No
			PO BO	X 801 1FIELD HILLS,MI 483	3030801					
			DEGGI	111220 111223, 111 40.	3030001		1 ' '	ll affiliates incl		·
r Ta	x-exem	pt status	▽ 501(c)	(3) ◄ (insert no)	947(a)(1) or	527		o," attach a II Ip exemption		ee instructions)
				ROOK EDU			H(C)	ap exemption	iidiiib.	-1 F
							<u> </u>			
				ion Trust Association	Other ►		L Year of fo	rmation 1973	M Sta	te of legal domicile MI
Pa	rt I									
	1	•		e organization's missio VIDES EXCELLENT E	-	INITICANT ACTIVITIES A L PRO GRAMS SERVII	IG DIVERSE	AUDIENCES	IN AN	I ENVIRONMENT
မှ				CREATIVITY, EXPERI						
Governance										
Ě		-								
\$	2	Check t	his hox 🍽	If the organization dis	continued its	s operations or disposed	of more than	25% of its ne	t ass	
	1		,			t VI, line 1a)				29
et er			_	_		ng body (Part VI, line 1				28
Activities							3)	•		1,137
χĮΛ				nployees (Part V, line 2						
ĕ				lunteers (estimate if ne						172
		-				I, column (C), line 12	•		⁄а 7b	-70,970 -70,970
	Ь	Net unr	erated busi	ness taxable income fr	om Form 990	7-1, line 34			/B	
		8 Contributions and grants (Part VIII, line 1h)					Pric	or Year		Current Year
ā								11,777,560	_	7,341,697
Revenu	9							44,321,700		46,552,666
Нэу	10			ne (Part VIII, column (-4,270,725	_	-1,816,573	
_	11			art VIII, column (A), lı		:, 9c, 10c, and 11e) art VIII, column (A), lın		2,907,819		2,401,104
	12			ad lines 8 through 11 (i	•		e	54,736,354		54,478,894
	13			r amounts paid (Part I)				7,872,421		8,326,925
	14	Benefi	ts paid to o	r for members (Part IX	, column (A),	line 4)				0
	15	Saları	es, other co	mpensation, employee	5 –					
8		10)				39,769,716		37,136,960		
Expenses	16a	Profes	sional fund	raising fees (Part IX, c		73,492		0		
ਡੋ	b	Total fu	ndraising exp	enses (Part IX, column (D),	line 25) ► 2,496	5,138				
	17	Other	expenses (Part IX, column (A), lır	nes 11a-11d	l, 11f–24f)		34,094,490		32,175,795
	18	Total	expenses A	Add lines 13–17 (must	equal Part I	X, column (A), line 25)		81,810,119		77,639,680
	19	Reven	ue less exp	enses Subtract line 1	8 from line 1.	2		-27,073,765		-23,160,786
\$ 68	1						_	g of Current		End of Year
Net Assets or Fund Balances	20	T - 4 '		+ V 1 4.6.\				'ear	1	
Ass Ba	20			t X, line 16)				419,841,762	 	424,095,485
5 E	21		-	Part X, line 26)				123,845,686	_	124,081,905
	22			d balances Subtract III	ne 21 from II	ne 20		295,996,076		300,013,580
Pa	rt II		ature Blo			-t				ant of more lengths and an
						eturn, including accompanying rer (other than officer) is base				
		l 					1			
Sigr		****						04-12		
Here		F Signa	ature of office	:r			Date			
			INIC DIMARC							
		F ¹yp∈	or print nam	e and tide		 		1		
		Preparer					Check If self-	Preparer's ide		number
Paid		signature	* F				empolyed 🕨 🦵	, see maducid		
	arer's		ame (or yours	PLANTE & MORAN PLLC		<u>. </u>	<u> </u>	EIN Þ		
Use	Only		nployed), and ZIP + 4	PO BOX 307				CTIA L.		
		 								352-2500
May	the ID:	C diccii	e this ratu	SOUTHFIELD, MI 4803		coo instructions)				Vas E No

Cat No 11282Y

Part III Statement of Program Service Accomplishments

Briefly describe the organization's mission

CRANBROOK PROVIDES EXCELLENT EDUCATIONAL PROGRAMS SERVING DIVERSE AUDIENCES IN AN ENVIRONMENT THAT INSPIRES CREATIVITY, EXPERIMENTATION AND LEARNING

2	_	on undertake any signific 0 or 990-EZ?	. •	• •		Yes 🗸 No
	If "Yes," describe	these new services on S	chedule O			
3	Did the organizati	on cease conducting, or	make sıgnıfıcaı	nt changes in how it cor		Yes 🗸 No
	If "Yes," describe	these changes on Sched	ule O			
4	Section 501(c)(3		ions and secti	on 4947(a)(1) trusts a	largest program services by ex re required to report the amoun ervice reported	•
4a	(Code) (Expenses \$	48,441,266	including grants of \$	7,215,925) (Revenue \$	41,328,887)
		OLS IS AN EDUCATIONAL INSTI RMITORIES, DINING HALLS AN			53 STUDENTS IN K-12TH GRADE INCL	LUDED IN THE COST OF
4b	(Code) (Expenses \$	7,340,092	ıncludıng grants of \$	1,111,000) (Revenue \$	4,495,303)
	CRANBROOK ACADE	MY OF ART IS A GRADUATE SC	HOOL OF FINE AR	TS AND ARCHITECTURE WIT	TH FALL 2009 ENROLLMENT OF 157 ST	UDENTS
4c	(Code) (Expenses \$	3,045,958	ıncludıng grants of \$) (Revenue \$	728,476)
	CRANBROOK INSTIT 2009/2010	UTE OF SCIENCE IS A NATURA	L SCIENCE MUSEU	JM OPEN TO THE PUBLIC WH	IICH HAD APPROXIMATELY 159,261 VI	SITORS IN FISCAL YEAR
4d	• •	ervices (Describe in Sch	edule O) See	also Additional Data fo	r Description	
	(Expenses \$	3,071,031 inc	luding grants o	of \$) (Revenue \$)
4e	Total program se	ervice expenses►\$	61,898,34	17		

Part TV	Check	list of	Peguired	Schedules
	CHECK	HISL OI	neuun eu	Juliculies

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors? 🕏	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		Νο
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4		Νο
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8	Yes	
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		No
10	Did the organization, directly or through a related organization, hold assets in term, permanent,or quasi- endowments? If "Yes," complete Schedule D, Part V	10	Yes	
11	Is the organization's answer to any of the following questions "Yes"? If so,complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable	11	Yes	
	◆ Did the organization report an amount for land, buildings, and equipment in Part X, line10? If "Yes," complete Schedule D, Part VI.			
	◆ Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.			
	◆ Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.			
	◆ Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.			
	◆ Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.			
	◆ Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X.			
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12	Yes	
12A	Was the organization included in consolidated, independent audited financial statements for the tax year? Yes No			
	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional	Į		
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	Yes	
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Νο
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I	14b		Νο
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the U S? <i>If "Yes," complete Schedule F, Part II</i>	15		No
16	Did the organization report on Part IX, column (A), line 3, more than $$5,000$ of aggregate grants or assistance to individuals located outside the U S ? If "Yes," complete Schedule F, Part III	16		No
17	Did the organization report a total of more than \$15,000, of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		Νο
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	Yes	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19	Yes	
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		Νo

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		Νο
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer questions 24b-24d and complete Schedule K. If "No," go to line 25	24a	Yes	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		Νo
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		Νο
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		No
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
Ь	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		No
28	Was the organization a party to a business transaction with one of the following parties? (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a	Yes	
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
С	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or owner? If "Yes," complete Schedule L, Part IV	28c	Yes	
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 🕏	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30	Yes	
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		N o
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		No
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35		No
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	
		F	orm 99 0	(2009)

Part V	Statements	Regarding	Other IR	S Filings and	Tax	Compliance
--------	------------	-----------	----------	---------------	-----	------------

			Yes	No
.a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1a 376 1b 1			
с	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Yes	
а	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements filed for the calendar year ending with or within the year covered by this return			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions)	2b	Yes	
a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this	3-	Yes	
h	return?	3a 3b	Yes	
a	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	163	Νο
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 and Financial Accounts			
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Νο
Ь	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Νo
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?	5c		
	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		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
	Organizations that may receive deductible contributions under section 170(c).			
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	Yes	
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Yes	
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		No
	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal			
	benefit contract?	7e		N c
•	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		N c
9	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7h		
	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.			
а	Did the organization make any taxable distributions under section 4966?	9a		
Ь	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
	Section 501(c)(7) organizations. Enter			
a	Initiation fees and capital contributions included on Part VIII, line 12 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
	Section 501(c)(12) organizations. Enter			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
a	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			

PO BOX 801

(248) 645-3110

BLOOMFIELD HILLS, MI 483030801

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

Se	ction A. Governing Body and Management				
			Yes	No	
1a	Enter the number of voting members of the governing body 1a 29]			
b	Enter the number of voting members that are independent 1b 28]			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2	Yes		
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		Νο	
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		Νο	
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		Νο	
6	Does the organization have members or stockholders?	6	Yes		
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a	Yes		
ь	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		Νο	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following				
а	The governing body?	8a	Yes		
ь	Each committee with authority to act on behalf of the governing body?	8b	Yes		
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the		103		
•	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		Νo	
	ction B. Policies (This Section B requests information about policies not required by the Internal	•			
Re	venue Code.)				
			Yes	No	
	Does the organization have local chapters, branches, or affiliates?	10a		Νo	
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?	10b			
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form				
11A	Describe in Schedule O the process, if any, used by the organization to review the Form 990				
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes		
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes		
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c	Yes		
13	Does the organization have a written whistleblower policy?	13	Yes		
14	Does the organization have a written document retention and destruction policy?	14	Yes		
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?				
а	The organization's CEO, Executive Director, or top management official	15a	Yes		
	Other officers or key employees of the organization	15b	Yes		
	If "Yes" to line a or b, describe the process in Schedule O (See instructions)				
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		Νo	
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the				
	organization's exempt status with respect to such arrangements?	16b			
Se	ction 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 Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you make these available. Check all that apply Own website. Another's website. Upon request				
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public. See Additional Data Table				
20	State the name, physical address, and telephone number of the person who possesses the books and records of the	ne orga	nızatıor	n 🕨	
	PAM RUTHVENCFO				

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

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

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year. Use Schedule J-2 if additional space is needed

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and current key employees Enter -0- in columns (D), (E), and (F) if no compensation was paid
- List all of the organization's current key employees. See instructions for definition of "key employee"
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

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

1b Total	. •	2,426,513	0	286,033

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

			Yes	No
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If</i> "Yes," complete Schedule J for such individual	3		Νο
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual	4	Yes	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? If "Yes," complete Schedule J for such person	5		Νο

Section B. Independent Contractors

Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization

(A)	(B)	(C)
Name and business address	Description of services	Compensation
FRANK REWOLD & SONS INC 333 E SECOND ST ROCHESTER, MI 48307	CONSTRUCTION	13,092,500
CHARTWELLS PO BOX 91337 CHICAGO, IL 60693	FOOD SERVICE	3,393,740
SKANSKA USA BUILDING INC 26100 AMERICAN DRIVE STE 200 SOUTHFIELD, MI 48034	CONSTRUCTION	3,345,240
TEACHER'S INS AND ANNUITY PO BOX 8500 PHILADELPHIA, PA 19178	PENSION	2,790,461
GOLDMAN SACHS & CO 85 BROAD STREET NEW YORK, NY 10087	INVESTMENT	1,906,334
2 Total number of independent contractors (including but not limited to those listed above \$100,000 in compensation from the organization ►46) who received more than	

Page 8

Part \	7111	Statement of Reven	ue					
b	1a	Federated campaigns .	. 1a		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512,513, or 514
말								
gra out	b	Membership dues	1b					
ું.≝	C	Fundraising events	1c	449,936				
無った	d	Related organizations .	1d					
<u>ي آ</u>	e	Government grants (contribution	ns) 1e	617,754				
등	f	All other contributions, gifts, gra	ants, and 1f	6,274,007				i
Program Service Revenue and other similar amounts		similar amounts not included al						
真皇	g	Noncash contributions in 509,005	cluded in					
등포	h	lines 1a-1f \$ \frac{509,005}{}{} Total. Add lines 1a-1f .		▶	7,341,697			
O m	⊢ "	Total: Add files Id IT .			, ,			
<u> 9</u>				Business Code				
ē.	2a	CRANBROOK SCHOOLS K-12		900,099	41,328,887	41,328,887		
æ	Ь	ART ACADEMY TUITION &	900,099	4,495,303	4,495,303			
မှ	c	INSTITUTE OF SCIENCE A		611,600	728,476	728,476		
5= 35	d							
Q,	e	-						
ogran	f	All other program service	revenue					
查	g	Total. Add lines 2a-2f.			46,552,666			
	3	Investment income (inclu		+				
	1	and other similar amounts		. h	3,940,502		-70,970	4,011,472
	4	Income from investment of tax	exempt bond p	oroceeds 🕨				
	5	Royalties		•				
		(ı) R		(II) Personal				
	6a	Gross Rents	1,132,985					
	ь	Less rental	1,353,952					
		expenses Rental income	-220,967					
	C	or (loss)	·					
	d	Net rental income or (loss	5)		-220,967			-220,967
			(ı) Securities	(II) O ther				
	7a	from sales of assets other	34,909,921					
	١.	than inventory Less cost or 2	40,666,996					
	Ь	other basis and	40,000,990					
	l _	sales expenses Gain or (loss)	-5,757,075					
	C .				-5,757,075			-5,757,075
	d 8a	Net gain or (loss)			3,737,073			3,737,073
Other Revenue	Oa	Gross income from fundra events (not including \$449,936 of contributions reported See Part IV, line 18 .	on line 1c)					
Œ	1	*	а	1,373,991				
j e	ь	Less direct expenses .	ь	1,114,245				
ŏ	С	Net income or (loss) from	fundraising 6		259,746			259,746
	9a	Gross income from gamin See Part IV, line 19						
	1		а	65,895				
	b	Less direct expenses .		26,494				
	С	Net income or (loss) from		/ities►	39,401			39,401
	10a	Gross sales of inventory, returns and allowances	•					
	.		a	559,452				
	Ь	Less cost of goods sold		491,880	67 570			62 520
	С	Net income or (loss) from		-	67,572			67,572
	<u> </u>	Miscellaneous Revenue		Business Code	4 4 7 4 7 4 7			4 474 045
	11a	AUXILIARY		900,099	1,171,915			1,171,915
	Ь	MISCELLANEOUS		900,099	1,083,437			1,083,437
	c							
	d	All other revenue						
	e	Total. Add lines 11a-11d						
	1			▶	2,255,352			
	12	Total revenue. See Instru	ictions	▶	54,478,894	46,552,666	-70,970	655,501

Part IX Statement of Functional Expenses
Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

_	Section 501(c)(3) and 501(c)(4) organizations m			(B)	
	ll other organizations must complete column (A) but are not required to		(B), (C), and (B)	(D). (C)	(D)
	ot include amounts reported on lines 6b, b, 9b, and 10b of Part VIII.	(A) Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to governments and organizations in the U S $$ See Part IV $\!$				
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22	8,326,925	8,326,925		
3	Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	1,328,840	528,349	800,491	
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$				
7	Other salaries and wages	27,705,757	20,222,116	6,049,406	1,434,235
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	1,855,165	1,315,982	442,259	96,924
9	Other employee benefits	4,158,594	3,245,657	734,333	178,604
10	Payroll taxes	2,088,604	1,515,963	472,635	100,006
11	Fees for services (non-employees)				
а	Management				
ь	Legal	132,707	1,048	131,659	
С	Accounting	163,532		163,532	
d	Lobbying				
e	Professional fundraising See Part IV, line 17				
f	Investment management fees	17,908		17,908	
g	Other	1,720,069	919,568	800,501	
12	Advertising and promotion	342,704	131,357	47,817	163,530
13	Office expenses	1,367,624	743,343	471,688	152,593
14	Information technology	235,738		235,738	
15	Royalties				
16	Occupancy	4,705,191	2,857,692	1,844,355	3,144
17	Travel	604,991	552,100	29,000	23,891
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	157,090	140,570	7,631	8,889
20	Interest	10,864,658		10,864,658	
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	6,688,491	6,688,491		
23	Insurance	733,617	8,227	725,390	
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	FOOD SERVICE SCHOOLS	3,562,407	3,513,376	21,051	27,980
b	MISCELLANEOUS EXPENSE	520,873	10,814	15,869	494,190
С	BAD DEBT EXPENSE	358,195	304,680		53,515
d	ALLOCATION OF SERVICES	0	10,872,089	-10,630,726	-241,363
e					
f	All other expenses				
25	Total functional expenses. Add lines 1 through 24f	77,639,680	61,898,347	13,245,195	2,496,138
26	Joint costs. Check here ► ☐ If following SOP 98-2	,			· ·
	Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Pa	rt X	Balance Sheet					
					(A)		(B)
	١				Beginning of year		End of year
	1	Cash—non-interest-bearing			52,683		40,479
	2	Savings and temporary cash investments	•		4,673,346		6,801,487
	3	Pledges and grants receivable, net	•		23,381,024	3	20,698,727
	4	Accounts receivable, net			856,100	4	1,086,721
	5	Receivables from current and former officers, directors, trustee highest compensated employees Complete Part II of	s, key	employees, and			
		Schedule L				5	_
	6	Receivables from other disqualified persons (as defined under spersons described in section $4958(c)(3)(B)$ Complete Part II		n 4958(f)(1)) and			
		Schedule L				6	
ssets	7	Notes and loans receivable, net				7	
SS	8	Inventories for sale or use			810,513	8	854,295
⋖	9	Prepaid expenses and deferred charges			3,243,352	9	2,444,433
	10a	Land, buildings, and equipment cost or other basis <i>Complete</i> Part VI of Schedule D	10a	269,873,250			
	ь	Less accumulated depreciation	10b	83,875,291	167,350,887	10c	185,997,959
	11	Investments—publicly traded securities	· · ·		126,790,712	11	103,870,625
	12	Investments—other securities See Part IV, line 11			90,678,145	12	100,574,039
	13	Investments—program-related See Part IV, line 11				13	
	14	Intangible assets				14	
	15	Other assets See Part IV, line 11			2,005,000	15	1,726,720
	16	Total assets. Add lines 1 through 15 (must equal line 34) .			419,841,762	16	424,095,485
	17	Accounts payable and accrued expenses .			15,705,276	17	23,822,042
	18	Grants payable				18	
	19	Deferred revenue			13,158,012	19	15,384,579
_	20	Tax-exempt bond liabilities			93,615,000	20	83,815,000
<u> </u>	21	Escrow or custodial account liability Complete Part IV of Schedu		21			
Liabilities	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified	,				
- 23		persons Complete Part II of Schedule L				22	
	23	Secured mortgages and notes payable to unrelated third parties	s .			23	
	24	Unsecured notes and loans payable to unrelated third parties				24	
	25	Other liabilities Complete Part X of Schedule D			1,367,398	25	1,060,284
	26	Total liabilities. Add lines 17 through 25			123,845,686	26	124,081,905
5		Organizations that follow SFAS 117, check here 🕨 🔽 and com	plete	lines 27			
Ф		through 29, and lines 33 and 34.					
an	27	Unrestricted net assets			206,081,304	27	211,437,021
8	28	Temporarily restricted net assets			38,603,641	28	36,120,685
Fund Balance	29	Permanently restricted net assets			51,311,131	29	52,455,874
Ξ		Organizations that do not follow SFAS 117, check here $ ightharpoonup$ as	nd cor	nplet e			
5		lines 30 through 34.					
	30	Capital stock or trust principal, or current funds				30	
Assets	31	Paid-in or capital surplus, or land, building or equipment fund				31	
	32	Retained earnings, endowment, accumulated income, or other for	ınds			32	
Net	33	Total net assets or fund balances			295,996,076		300,013,580
	34	Total liabilities and net assets/fund balances			419,841,762	34	424,095,485

			Yes	No
1	Accounting method used to prepare the Form 990			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		Νo
b	Were the organization's financial statements audited by an independent accountant?	2b	Yes	
c	If "Yes," to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	2c	Yes	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both			
	▼ Separate basis			
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	Yes	
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	Yes	

Form **990** (2009)

OMB No 1545-0047

Inspection

SCHEDULE A

(Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service

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

Public Charity Status and Public Support

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

Name of the organization CRANBROOK EDUCATIONAL COMMUNITY Employer identification number									umber					
	o.roon	2500,110							38-201504	. 8				
	rt I			olic Charity Stat						tructions				
The	organı —			foundation because					:)					
1	<u> </u>		•	on of churches, or as:				(1)(A)(i).						
2	고			ın section 170(b)(1)										
3	<u> </u>	-	-	perative hospital serv	=									
4	ı		cal research l's name, cıt	organization operate y, and state	ed in conjunc	tion with a h	iospital desc	rıbed ın sect	ion 170(b)(1)(A)(iii). Ente	er the			
5	Γ	_	•	rated for the benefit	=	or university	owned or op	erated by a	governmenta	l unit describ	 ed ın			
6	\vdash			ocal government or	· ·	d unit descr	ihed in sectio	on 170(b)(1)	(A)(v).					
7	,	An orga describ	An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi) (Complete Part II) A community trust described in section 170(b)(1)(A)(vi) (Complete Part II)											
8		A comn	nunity trust (described in section	170(b)(1)(A)(vi) (Com	plete Part II)						
9	Γ	An organization that normally receives (1) more than 331/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 331/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses												
		• •	_					•		ix) iioiii basii				
10	Г	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).												
11	_	An orga one or r the box	nızatıon org nore publicly	anized and operated v supported organiza ves the type of suppo b Type II	exclusively to tions describ orting organiz	for the bene bed in section zation and c	fit of, to perfo on 509(a)(1)	orm the funct or section 5 11e through	ions of, or to 09(a)(2) See	•	(a)(3). Check			
e	Γ	other th	-	x, I certify that the o	-		•	•	•	•	•			
f			-	eceived a written de	termınatıon f	rom the IRS	that it is a T	ype I, Type	II or Type II	I supporting	organizatio <u>n,</u>			
g				006, has the organiz	ation accept	ed any gift o	or contributio	n from any o	fthe		ı			
		(i) a pe	rson who dır	ectly or indirectly co	ntrols, eithe	r alone or to	gether with p	ersons desc	rıbed ın (ıı)		Yes No			
		and (III)	below, the g	overning body of the	the support	ed organiza	ion?			11g(i)				
		(ii) a fa	mıly membe	r of a person describ	ed ın (ı) abov	/e [?]				11g(ii)				
				ed entity of a person						11g(iii)				
h 		Provide	the followin	g information about t	he supported	d organizatio	on(s)							
			d EIN lines 1-9 above		Is the organizati col (i) list your gove	(iv) Is the organization in col (i) listed in your governing document?		tify the tion in f your rt?	(vi) Is the organization in col (i) organized in the US?		(vii) A mount of support?			
				(see instructions))	Yes	No	Yes	No	Yes	No				
								1						
Tota														

ınstructions

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

▶□

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

	(Complete only if you	cnecked the	box on line 9 o	r Part I.)			
	ction A. Public Support			<u> </u>	1	T	ı
Cale	ndar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not						
_	include any "unusual grants ")						
2	Gross receipts from admissions, merchandise sold or services						
	performed, or facilities furnished in						
	any activity that is related to the						
	organization's tax-exempt						
3	purpose Gross receipts from activities that				+		
3	are not an unrelated trade or						
	business under section 513						
4	Tax revenues levied for the						
	organization's benefit and either						
	paid to or expended on its behalf						
5	The value of services or facilities						
_	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5				-		
7a	A mounts included on lines 1, 2, and 3 received from disqualified						
	persons				1		
ь	Amounts included on lines 2 and 3						
	received from other than						
	disqualified persons that exceed						
	the greater of \$5,000 or 1% of the amount on line 13 for the year						
с	Add lines 7a and 7b						
8	Public Support (Subtract line 7c						
	from line 6)						
	ction B. Total Support		1			1	Γ
Cale	ndar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9	A mounts from line 6						
10a	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources						
ь	Unrelated business taxable						
	ıncome (less section 511 taxes)						
	from businesses acquired after						
_	June 30, 1975 Add lines 10a and 10b						
c 11	Net income from unrelated						
	business activities not included						
	ın lıne 10b, whether or not the						
	business is regularly carried on						
12	Other income Do not include gain or loss from the sale of						
	capital assets (Explain in Part						
	IV)						
13	Total support (Add lines 9, 10c,						
14	11 and 12) First Five Years If the Form 990 is for	or the organizat	lon's first, second	L third fourth or	l fifth tax vear as a	1 a 501(c)(3) organ	l uzation
	check this box and stop here	or the organizat		., 4,	men tax your as t	(c)(c) c.gu.	▶ ┌
	ction C. Computation of Publ						
15	Public Support Percentage for 2009	(line 8 column	(f) divided by line	13 column (f))		15	
16	Public support percentage from 200	8 Schedule A , F	art III, line 15			16	
Se	ction D. Computation of Inve	stment Inco	ome Percenta	ge			
17	Investment income percentage for 2	009 (line 10c c	olumn (f) dıvıded	by line 13 columi	n (f))	17	
18	Investment income percentage from	2008 Schedule	A, Part III, line 1	L 7		18	
19a	33 1/3% support tests—2009. If the	organization di	d not check the b	ox on line 14, and	d line 15 is more	than 33 1/3% and	d line 17 is not
	more than 33 1/3%, check this box a	ind stop here. T					
L	organization 33 1/3% support tests—2008. If the	► C	d not chastes been	on line 14 amilion	100 and line 4	5 ic mara +ha= 22	1/20/2 and line
b	שר בו בע suppoit tests—zouo. If the	organization (I	и посепеска вох	OILLINE TH OLINE	= ⊥⊃a, anu nne 1(us more man 33	1/370 and ine

18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization **Private Foundation** If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions

Part IV

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

Schedule A (Form 990 or 990-EZ) 2009

Additional Data

Software ID:

Software Version:

EIN: 38-2015048

Name: CRANBROOK EDUCATIONAL COMMUNITY

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)

4d. Other program ser	vices				
(Code) (Expenses \$	3,071,031	including grants of \$) (Revenue \$)
CRANBROOK HOUSE	AND GARDENS AUXILIARY	'-FUNDS	ARE RAISED AND EXPENDED	FOR THE PRESERVATION O	FCRANBROOK
HOUSE AND GARDEN	S, A NATIONAL HISTORIC	LANDMA	RK, AS WELL AS TOURS AND	EDUCATIONAL PRO GRAMS	

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

Compensated Employees, and Independent Contractors												
(A) Name and Title	(B) Average hours per	Posi t	tion (hat a	(che)			(D) Reportable compensation from the	(E) Reportable compensation from related	(F) Estimated amount of other compensation		
	week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)	from the organization and related organizations		
MICHAEL ACHESON TRUSTEE	1 00	x						0	0	0		
MAGGIE ALLESEE TRUSTEE	1 00	Х						0	0	0		
LINDA WASSERMAN AVIV TRUSTEE	1 00	×						0	0	0		
JEFFREY T CHAMBERS TRUSTEE	1 00	Х						0	0	0		
JEFFREY K CLARK TRUSTEE	1 00	Х						0	0	0		
DENISE DAVID TRUSTEE	1 00	Х						0	0	0		
PAUL M DODYK TRUSTEE	1 00	Х						0	0	0		
VIRGINIA B FOX TRUSTEE	1 00	Х						0	0	0		
MAXINE FRANKEL TRUSTEE	1 00	Х						0	0	0		
ERICA WARD GERSON TRUSTEE	1 00	Х						0	0	0		
EDWARD HAGENLOCKER TRUSTEE	1 00	Х						0	0	0		
JEFFREY A HARRIS TRUSTEE	1 00	Х						0	0	0		
PATRICIA C HARTMANN TRUSTEE	1 00	Х						0	0	0		
ARNOLD JACOB TRUSTEE	1 00	Х						0	0	0		
LINDA H GILLUM TRUSTEE	1 00	Х						0	0	0		
DONALD J KUNZ TRUSTEE	1 00	Х						0	0	0		
WILLIAM KM GOLDSMITH TRUSTEE	1 00	х						0	0	0		
RALPH A GRAHAM TRUSTEE	1 00	Х						0	0	0		
EUGENE A MILLER TRUSTEE	1 00	Х						0	0	0		
BRUCE D PETERSON TRUSTEE	1 00	Х						0	0	0		
STEPHEN R POLK TRUSTEE	1 00	Х						0	0	0		
LLOYD E REUSS TRUSTEE	1 00	Х						0	0	0		
ROBERT S TAUBMAN TRUSTEE	1 00	Х						0	0	0		
JAMES J VLASIC TRUSTEE	8 00	Х						0	0	0		
RICHARD E WARREN TRUSTEE	1 00	×						0	0	0		

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

Compensated Employees, and	Independ	ent C	ontr	act	ors					
(A) Name and Title	(B) Average hours	Posi t	((tion (hat a	che)			(D) Reportable compensation from the	(E) Reportable compensation	(F) Estimated amount of other
	per week	Individual trustee or director	rrom the organization (V 2/1099-MISO 2/1099-MISO Penployee Key employee Officer Institutional Trustee		from the organization (W- 2/1099-MISC)	from related organizations (W- 2/1099- MISC)	compensation from the organization and related organizations			
GARY L WASSERMAN TRUSTEE	1 00	Х						0	0	0
LISA PAYNE TRUSTEE	1 00	Х						0	0	0
A DELE A CHESO N TRUSTEE	1 00	Х						0	0	0
LYNDA CHARFOOS TRUSTEE	1 00	Х						0	0	0
JOHN M ERB TRUSTEE	1 00	Х						0	0	0
WARREN ROSE TRUSTEE	1 00	Х						0	0	0
PAUL J CHIAPPARONE TRUSTEE	1 00	Х						0	0	0
JULIE FISHER CUMMINGS TRUSTEE	1 00	Х						0	0	0
IRA J JAFFE TRUSTEE	1 00	Х						0	0	0
ROBERT C LARSON TRUSTEE	1 00	Х						0	0	0
WAYNE B LYON TRUSTEE	1 00	Х						0	0	0
LESLIE ROSE TRUSTEE	1 00	Х						0	0	0
FREDERICK NAHM PRESIDENT	55 00			х				395,575	0	34,991
PATRICA CARI SECRETARY	55 00			х				82,998	0	24,321
DOMINIC DIMARCO COO	55 00			х				244,804	0	12,508
ARLYCE SEIBERT DIR OF SCHOOLS	55 00				x			269,953	0	55,757
REED KROLOFF DIR OF ART ACADEMY	55 00				х			212,634	0	55,732
MICHAEL HILLIARD CHIEF CAMPAIGN OFF	55 00					Х		639,500	0	26,293
MICHAEL STAFFORD DIR OF SCIENCE INSTITUTE	55 00					Х		143,743	0	23,627
MARSHA GILMAN CHIEF ADV OFFICER	55 00					Х		143,863	0	17,261
PAMELA RUTHVEN CHIEF FINANCIAL OFFICER	55 00					х		153,474	0	8,691
ANDREW MILLER DIR OF ADMISSIONS	55 00					х		139,969	0	26,852

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

DLN: 93493116000041

OMB No 1545-0047

SCHEDULE D (Form 990)

Department of the Treasury

Supplemental Financial Statements

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

Open to Public

erna	Il Revenue Service	► Attach to F	orm 990. ► See separate instructions.			Inspect	ion
	me of the organi			Emp	loyer identifica	tion numbe	r
-K/	MINDROOK EDUCATIO	NAME COMMONTH		38-	2015048		
Pa			dvised Funds or Other Similar F	unds	or Accounts	. Complet	e if the
	organiz	zation answered "Yes" to Form 99	90, Part IV, line 6. (a) Donor advised funds		(b) Funds and o		
	Total number a	t and of year	(a) Donor advised lunds	'	b) Funds and o	iner accour	its
		tributions to (during year)					
	33 3	nts from (during year)					
		ie at end of year					
	Did the organiz	zatıon ınform all donors and donor adv	L Isors in writing that the assets held in dor organization's exclusive legal control?	nor advi	sed	┌ Yes	┌ No
	used only for c	- , , , , , , , , , , , , , , , , , , ,	donor advisors in writing that grant funds nefit of the donor or donor advisor, or for a	•		☐ Yes	┌ No
a	rt III Conse	rvation Easements. Complete	ıf the organization answered "Yes" t	o Forn	n 990, Part IV	, line 7.	
	Preservat Protection Preservat Complete lines	conservation easements held by the o ion of land for public use (e g , recreat i of natural habitat ion of open space s 2a-2d if the organization held a qual he last day of the tax year		certıfıe	d historic struc	•	a
					Held at the	End of the	Year
а	Total number o	of conservation easements		2a			
b	Total acreage	restricted by conservation easements		2b			
3	Number of con	servation easements on a certified his	storic structure included in (a)	2c			
d	Number of con	servation easements included in (c) a	cquired after 8/17/06	2d			
	the taxable ye	servation easements modified, transform ar Fraction tes where property subject to conserv	erred, released, extinguished, or terminato	ed by th	ie organization	during	
	Does the organ	, , , ,	g the periodic monitoring, inspection, han	dling of	violations, and	┌ Yes	┌ No
	Staff and volur	nteer hours devoted to monitoring, ins	pecting and enforcing conservation easen	nents d	uring the year 🕨	-	
	A mount of exp	enses incurred in monitoring, inspecti	ng, and enforcing conservation easement	s durin	g the year 🟲 🕏 _		
		nservation easement reported on line 2) and 170(h)(4)(B)(ii)?	2(d) above satisfy the requirements of sec	ction		┌ Yes	┌ No
	balance sheet,	-	onservation easements in its revenue and the footnote to the organization's financia ments	•	•		
ą į	t IIII Organ	izations Maintaining Collection	ons of Art, Historical Treasures, "Yes" to Form 990, Part IV, line 8.	or Ot	her Similar <i>i</i>	Assets.	
3	art, historical t	treasures, or other similar assets held	i 116, not to report in its revenue statemo for public exhibition, education or resear nancial statements that describes these i	ch ın fu			,
b	historical treas	· ·	5 116, to report in its revenue statement a public exhibition, education, or research i s				
	(i) Revenues i	ncluded in Form 990, Part VIII, line 1			► \$		
	(ii) Assets inc	luded in Form 990, Part X			F \$_		
	If the organiza	,	orical treasures, or other similar assets f S 116 relating to these items	or finan			
a	Revenues incli	uded in Form 990, Part VIII, line 1			> \$		
					· +		

b Assets included in Form 990, Part X

Par	Organizations Maintaining Co	ollections of Art	, His	torical Tre	easu	res, or O	the	r Similar As	sets (continued
3	Using the organization's accession and othe items (check all that apply)	r records, check any	y of th	e following th	at ar	e a sıgnıfıca	nt u	se of its collec	tion	
а	Public exhibition		d	☐ Loan or	rexcl	nange progra	ams			
b	Scholarly research		e	┌ Other						
с	✓ Preservation for future generations									
4	Provide a description of the organization's c Part XIV	ollections and expla	ın hov	they further	the c	organization'	s ex	empt purpose	ın	
5	During the year, did the organization solicit assets to be sold to raise funds rather than			•					√ Yes	┌ No
Pai	t IV Escrow and Custodial Arrang					n answered	1 "Y	es" to Form ⁹	90,	
	Part IV, line 9, or reported an ar			•						
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?				ions (or other asse	ets i	not	┌ Yes	☐ No
b	If "Yes," explain the arrangement in Part XI	V and complete the	follow	ıng table				_		
_						-	_	An	nount	
C _ı	Beginning balance					<u> </u>	1c			
d	Additions during the year						1d			
e	Distributions during the year					<u> </u>	1e			
f	Ending balance						1f			
2a	Did the organization include an amount on F		e 21?						│ Yes	☐ No
	If "Yes," explain the arrangement in Part XIV			1 1157						
Pa	rt V Endowment Funds. Complete	If the organization (a)Current Year		wered "Yes')Prior Year				t IV, line 10. Three Years Back	(e)Four	Years Bac
1a	Beginning of year balance	168,388,552	(1)	236,966,944	+	WO TEATS DACK	1	Tillee Teals back	(E) our	rears bac
	Contributions	2,095,228		5,676,615						
c	Investment earnings or losses	20,073,157		-54,883,285						
d	Grants or scholarships									
e	Other expenditures for facilities	10,051,800		15,322,603						
f	and programs	-672,863		4,049,119			+			
g	End of year balance	181,178,000		168,388,552			-			
9 2	Provide the estimated percentage of the year	, ,								
		66.000 %	13							
a	Board designated or quasi-endowment	33.333 13								
b	reimanent endowment F									
c 3a	reminendowment 🗭 =======	acion of the organiza		hat ara hald i	- n d -	dministarad	.	+h.a		
Ja	Are there endowment funds not in the posse organization by	ssion of the organiza	ation t	.iiat are neiu d	allu a	ullillistereu	101	tile	Yes	s No
	(i) unrelated organizations							3a	(i)	No
	(ii) related organizations							3a(ii)	Νο
b	If "Yes" to 3a(II), are the related organization	•						3	b	
4	Describe in Part XIV the intended uses of th									
Pai	t VI Investments—Land, Building	s, and Equipme	nt. S	ee Form 999 I	0, Pa				T	
	Description of investment			(a) Cost or oth basis (investme		(b)Cost or oth basis (other		(c) Accumulated depreciation	(d) E	Book value
1a	Land					7,869,	942			7,869,94
b	Buildings					80,142,	454	29,386,940		50,755,51
c	Leasehold improvements					137,077,	584	36,500,020	5 :	100,577,55
d	Equipment					16,004,	124	14,463,43	2	1,540,69
е	Other					28,779,	146	3,524,893	3	25,254,25

185,997,959

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
		Cost of end-of-year market value
Financial derivatives	_	
Closely-held equity interests	_	
Other See Additional Data Table		
See Hadicional Baca Fabio		
	100 574 000	
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)	100,574,039	
Part VIII Investments—Program Related. Se	<u>ee Form 990, Part X, line</u>	
(a) Description of investment type	(b) Book value	(c) Method of valuation
	+	Cost or end-of-year market value
	+	
	+	
Total. (Column (b) should equal Form 990, Part X, col (B) line 13)	p -	
Total. (Column (b) should equal Form 990, Part X, col (B) line 13) Part IX Other Assets. See Form 990, Part X, I		
Total. (Column (b) should equal Form 990, Part X, col (B) line 13) Part IX Other Assets. See Form 990, Part X, (a) Description	ine 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, I	ine 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, I	ine 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, I	ine 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, I	ine 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, I	ine 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, I	ine 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, I	ine 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, I	ine 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, I	ine 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, I	ine 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, I	ine 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, I	ine 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, I	ine 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, I	ine 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, I	ine 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, I	ine 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, I	ine 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, I (a) Descr	ine 15.	
Part IX Other Assets. See Form 990, Part X, (a) Described to the second	ine 15.	(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line Part X Other Liabilities. See Form 990, Part	Ine 15. Iption 15.) X, line 25.	
Total. (Column (b) should equal Form 990, Part X, col.(B) line Part X Other Liabilities. See Form 990, Part (a) Description of Liability	ine 15.	
Total. (Column (b) should equal Form 990, Part X, col.(B) line Part X Other Liabilities. See Form 990, Part	Ine 15. Iption 15.) X, line 25.	
Total. (Column (b) should equal Form 990, Part X, col.(B) line Part X Other Liabilities. See Form 990, Part (a) Description of Liability Federal Income Taxes	Ine 15. Iption 15.) X, line 25.	
Total. (Column (b) should equal Form 990, Part X, col.(B) line Part X Other Liabilities. See Form 990, Part (a) Description of Liability Federal Income Taxes CAPITAL LEASES PAYABLE - CURRENT	15.) X, line 25. (b) A mount	
Total. (Column (b) should equal Form 990, Part X, col.(B) line Part X Other Liabilities. See Form 990, Part (a) Description of Liability Federal Income Taxes CAPITAL LEASES PAYABLE - CURRENT	15.)	
Total. (Column (b) should equal Form 990, Part X, col.(B) line Part X Other Liabilities. See Form 990, Part (a) Description of Liability Federal Income Taxes CAPITAL LEASES PAYABLE - CURRENT	15.)	
Total. (Column (b) should equal Form 990, Part X, col.(B) line Part X Other Liabilities. See Form 990, Part (a) Description of Liability Federal Income Taxes CAPITAL LEASES PAYABLE - CURRENT	15.)	
Total. (Column (b) should equal Form 990, Part X, col.(B) line Part X Other Liabilities. See Form 990, Part (a) Description of Liability Federal Income Taxes CAPITAL LEASES PAYABLE - CURRENT	15.)	
Total. (Column (b) should equal Form 990, Part X, col.(B) line Part X Other Liabilities. See Form 990, Part (a) Description of Liability Federal Income Taxes CAPITAL LEASES PAYABLE - CURRENT	15.)	
Total. (Column (b) should equal Form 990, Part X, col.(B) line Part X Other Liabilities. See Form 990, Part (a) Description of Liability Federal Income Taxes CAPITAL LEASES PAYABLE - CURRENT	15.)	
Total. (Column (b) should equal Form 990, Part X, col.(B) line Part X Other Liabilities. See Form 990, Part (a) Description of Liability Federal Income Taxes CAPITAL LEASES PAYABLE - CURRENT	15.)	
Total. (Column (b) should equal Form 990, Part X, col.(B) line Part X Other Liabilities. See Form 990, Part (a) Description of Liability Federal Income Taxes CAPITAL LEASES PAYABLE - CURRENT	15.)	
Total. (Column (b) should equal Form 990, Part X, col.(B) line Part X Other Liabilities. See Form 990, Part (a) Description of Liability Federal Income Taxes CAPITAL LEASES PAYABLE - CURRENT	15.)	
Total. (Column (b) should equal Form 990, Part X, col.(B) line Part X Other Liabilities. See Form 990, Part (a) Description of Liability Federal Income Taxes CAPITAL LEASES PAYABLE - CURRENT	15.)	
Total. (Column (b) should equal Form 990, Part X, col.(B) line Part X Other Liabilities. See Form 990, Part (a) Description of Liability Federal Income Taxes CAPITAL LEASES PAYABLE - CURRENT	15.)	
Total. (Column (b) should equal Form 990, Part X, col.(B) line Part X Other Liabilities. See Form 990, Part (a) Description of Liability Federal Income Taxes CAPITAL LEASES PAYABLE - CURRENT	15.)	
Total. (Column (b) should equal Form 990, Part X, col.(B) line Part X Other Liabilities. See Form 990, Part (a) Description of Liability Federal Income Taxes CAPITAL LEASES PAYABLE - CURRENT	15.)	
Total. (Column (b) should equal Form 990, Part X, col.(B) line Part X Other Liabilities. See Form 990, Part (a) Description of Liability Federal Income Taxes CAPITAL LEASES PAYABLE - CURRENT	15.)	
Total. (Column (b) should equal Form 990, Part X, col.(B) line Part X Other Liabilities. See Form 990, Part (a) Description of Liability Federal Income Taxes	15.) X, line 25. (b) A mount 424,613 635,671	

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	54,478,894
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	77,639,680
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	-23,160,786
4	Net unrealized gains (losses) on investments	4	28,092,884
5	Donated services and use of facilities	5	
6	Investment expenses	6	-914,583
7	Prior period adjustments	7	-11
8	Other (Describe in Part XIV)	8	
9	Total adjustments (net) Add lines 4 - 8	9	27,178,290
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	4,017,504
Par	t XII Reconciliation of Revenue per Audited Financial Statements With Revenue p	er R	eturn
1	Total revenue, gains, and other support per audited financial statements	1	84,643,766
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments		
b	Donated services and use of facilities		
c	Recoveries of prior year grants		
d	Other (Describe in Part XIV)		
e	Add lines 2a through 2d	2e	31,079,455
3	Subtract line 2e from line 1	3	53,564,311
4	A mounts included on Form 990, Part VIII, line 12, but not on line 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a 914,583		
b	Other (Describe in Part XIV)		
c	Add lines 4a and 4b	4c	914,583
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	54,478,894
	Reconciliation of Expenses per Audited Financial Statements With Expenses	per	
1	Total expenses and losses per audited financial statements	1	80,626,251
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities		
ь	Prior year adjustments	1	
С	Other losses		
d	Other (Describe in Part XIV) 2d 2,986,571		
e	Add lines 2a through 2d	2e	2,986,571
3	Subtract line 2e from line 1	3	77,639,680
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIV) 4b		
c	Add lines 4a and 4b	4c	0
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5	77,639,680
Pai	rt XIV Supplemental Information		

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

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

Ident if ier	Return Reference	Explanation
Part III, Line 1a		IN ACCORDANCE WITH GENERALLY ACCEPTED PRACTICES OF SIMILAR INSTITUTIONS, ARCHIVAL ITEMS AND COLLECTIONS PURCHASED AND DONATED ARE NOT RECORDED IN THE STATEMENT OF FINANCIAL POSITION
Part III, Line 4		AS THE COMMUNITY'S OFFICIAL ARCHIVAL REPOSITORY, THE ARCHIVES DEPARTMENT COLLECTS, PRESERVES, AND MAKES AVAILABLE COMMUNITY AND DIVISIONAL RECORDS OF PERMANENT VALUE, THE PAPERS OF MEMBERS OF THE BOOTH, SCRIPPS, AND SAARINEN FAMILIES, THE RECORDS OF THE CHRIST CHURCH CRANBROOK AND OTHER ANCILLARY ORGANIZATIONS, AND THE PERSONAL PAPERS OF FACULTY, STAFF, ALUMNI AND OTHER INDIVIDUALS WHO HAVE BEEN ASSOCIATED WITH THE COMMUNITY SINCE 1904
Part XII, Line 2d - Other Adjustments		RENTAL EXPENSES 1353952 DIRECT EXPENSES - FUNDRAISING 1114245 DIRECT EXPENSES - GAMING 26494 COST OF SALES 491880
Part XIII, Line 2d - Other Adjustments		RENTAL EXPENSES 1353952 DIRECT EXPENSES - FUNDRAISING 1114245 DIRECT EXPENSES - GAMING 26494 COST OF SALES 491880

Software ID: Software Version:

EIN: 38-2015048

Name: CRANBROOK EDUCATIONAL COMMUNITY

Form 990, Schedule D, Part VII - Investments— Other Securities

(a) Description of security or cateory (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
WEATHERLO W HEDGE FUNDS	28,048,392	F
PAUL CAPITAL PROGRAMS	2,905,225	F
CF DISTRESSED DEBT	1,593,594	F
CF GLOBAL DISTRESSED DEBT	3,836,634	F
ENDOWMENT ENERGY PARTNERS III	694,511	F
ENDOWMENT ENERGY PARTNERS IV	4,152,882	F
ENDOWMENT VENTURE PARTNERS I-IV, VII, VIII	3,735,992	F
ENDOWMENT EQUITY PARTNERS I-II, IV-V	3,519,822	F
INTERNATIONAL PRIVATE EQUITY PARTNERS VI	859,897	F
RCP GRADUATE FUND	571,914	F
CORSAIR III	3,164,512	F
CAPITAL INTERNATIONAL PARTNERS IV	1,552,264	F
CAPITAL INTERNATIONAL PARTNERS V	3,360,909	F
RCP FUND II	4,016,877	F
RCP FUND III	3,009,317	F
CHARLES BANK	1,897,841	F
HRJ Capital VC VI LP	630,672	F
HRJ CAPITAL VC VI (INTERNATIONAL)	1,335,715	F
DILLON (SILVER CREEK LOW VOLUME)	19,381,497	F
ENDO WMENT INTERNATIONAL EQUITY PARTNERS	891,480	F
ENDOWMENT PRIVATE EQUITY PARTNERS III	1,508,410	F
NATURAL RESOURCES PARTNERS VIII	591,504	F
HRJ CAPITAL VC V (FOREIGN)	419,420	F
HRJ CAPITAL VC V	1,148,543	F
HRJ GLOBAL REAL ESTATE III	1,158,976	F
ELLIOTT	4,000,000	F
CAYMAN III	2,587,239	F

Employer identification number

SCHEDULE E

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

CRANBROOK EDUCATIONAL COMMUNITY

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

	38-2015048			
			YES	NO
1	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?	1	Yes	
2	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?		W	
3	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe If "No,"	2	Yes	
	please explain POLICY IS PRINTED ON ALL ADMISSION MATERIAL AND ALSO PRINTED ON OUR ADVERTISEMENT	3	Yes	
4	Does the organization maintain the following?			
а	Records indicating the racial composition of the student body, faculty, and administrative staff?	4a	Yes	
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	4b	Yes	
c	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	4c	Yes	
d	Copies of all material used by the organization or on its behalf to solicit contributions?	4d	Yes	
	If you answered "No" to any of the above, please explain If you need more space, use Schedule O (Form 990)			
	Does the organization discriminate by race in any way with respect to Students' rights or privileges?	5a		Νo
b	Admissions policies?	5b		Νo
c	Employment of faculty or administrative staff?	5с		Νo
d	Scholarships or other financial assistance?	5d		Νo
	Educational policies?	5e		Νo
	Use of facilities?	5f		Νo
g	Athletic programs?	5g		Νo
h	Other extracurricular activities? If you answered "Yes" to any of the above, please explain If you need more space, use Schedule O (Form 990)	5h		No
6>	Does the organization receive any financial aid or assistance from a governmental agency?	- - 6a	Yes	
	. Has the organization's right to such aid ever been revoked or suspended?	6b	162	Νo
	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 CB 587, covering racial nondiscrimination? If "No," explain on Schedule O (Form 990)	7	Yes	

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

CRANBROOK EDUCATIONAL COMMUNITY

DLN: 93493116000041

OMB No. 1545-0047

SCHEDULE G (Form 990 or 990-EZ) **Supplemental Information Regarding Fundraising or Gaming Activities**

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19,

Department of the Treasury or if the organization entered more than \$15,000 on Form 990-EZ, line 6a. ► Attach to Form 990 or Form 990-EZ. ► See separate instructions. Internal Revenue Service Name of the organization

Employer identification number

					38-2015048	!
	c tivities. Comple ers are not require			tion answered "Yes" s part.	to Form 990, Part IV	', line 17.
1 Indicate whether the orga	nization raised fund:	s through a	any of the	following activities Ch	eck all that apply	
a Mail solicitations			e	Solicitation of noi	n-government grants	
b	olicitations		f	☐ Solicitation of gov	vernment grants	
c Phone solicitations			g	☐ Special fundraisir	ng events	
d In-person solicitation	ıs					
2a Did the organization have or key employees listed ii						Г _{Yes} Г _N
b If "Yes," list the ten higher to be compensated at least						
(i) Name of individual or entity (fundraiser)	(ii) Activity	(iii) fundrais custo contr contribu	er have dy or ol of	(iv) Gross receipts from activity	(v) A mount paid to (or retained by) fundraiser listed in col (i)	(vi) A mount paid to (or retained by) organization
		Yes	No			
otal			•			
					1	

Pa	rt I	Fundraising Events. Commore than \$15,000 on Form					repor	ted
			(a) Event #1 KALEIDOSCOPE	(b) Event #2 SCRIP (event type)	(c) O ther Events	(Add co	otal Eve I (a) th ol (c))	
Φ			(event type)		(total number)			
Reveilue	1	Gross receipts Less Charitable	432,824	586,190	734,274			3,288
Rey	2	contributions	226,496	0	223,440		44	9,936
	3	Gross income (line 1 minus line 2)	206,328	586,190	510,834		1,30	3,352
	4	Cash prizes						
မွာ	5	Non-cash prizes						
ense	6	Rent/facility costs	7,330		60,637		6	7,967
Expenses	7	Food and beverages	71,435		145,675		21	7,110
Direct	8	Entertainment	6,998		7,095		1	.4,093
ā	9	Other direct expenses .	69,147	512,490	233,437		81	5,074
	10	Direct expense summary Add lin	nes 4 through 9 ın column	(d)			1,11	4,244
	11	Net income summary Combine li	nes 3, column d, and line	10	🟲		18	9,108
Par	t II	Gaming. Complete if the oi \$15,000 on Form 990-EZ, lii		"Yes" to Form 990, Pa	rt IV, line 19, or repo	rted mo	re tha	n
 ₽			(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) O ther gaming	(d) To	otal gar	
Revenue							ol `(c))	
	1	Gross revenue			65,895		6	5,895
şe Şe	2	Cash prizes						
Expenses	3	Non-cash prizes			25,959		2	5,959
	4	Rent/facility costs						
Direct	5	Other direct expenses			535			535
	6	Volunteer labor	Yes	Г Yes	Yes 75 000 %			
			I NO	I NO	1 100			26,494
	7	Direct expense summary Add line	s 2 through 5 in column (d)				
	8	Net gaming income summary Com	nbine lines 1, column d, a	nd line 7				9,401
9	Fn	ter the state(s) in which the organize	ation operates gaming ac	tivities MI			Yes	No
а		the organization licensed to operate			 .	. 9a	Yes	
b	If'	"No," Explain						
10a b		ere any of the organization's gaming "Yes," Explain	licenses revoked, susper	ided or terminated during	the tax year?	10a	+	No
11		es the organization operate gaming	activities with nonmombo	ure?			Yes	
12	Is	the organization a grantor, beneficia	ry or trustee of a trust or	a member of a partnersh	ıp or other entity		1 163	
	for	med to administer charitable gaming	g [?]			12		No.
					Schedule G (Form 9	990 or 99	J-EZ) 2	υ09

		Yes	No
13	Indicate the percentage of gaming activity operated in		
а	The organization's facility		
b	An outside facility		
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records		
	Name ► RITA STEDMAN		
	Address PO BOX 801 BLOOMFIELD HILLS, MI 483030801		
15a	Does the organization have a contract with a third party from whom the organization receives gaming		
	revenue?	a	No
b	If "Yes," enter the amount of gaming revenue received by the organization 🕨 \$ and the		
	amount of gaming revenue retained by the third party 🟲 \$		
c	If "Yes," enter name and address		
	Name •		
	Address 🕨		
16	Gaming manager information		
	Name RITA STEDMAN		
	Gaming manager compensation ► \$0		
	Summy manager compensations ϕ		
	Description of services provided RECORDKEEPING		
	Director/officer Employee Independent contractor		
17	Mandatory distributions		
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to		
_	retain the state gaming license?	_	No
b	Enter the amount of distributions required under state law distributed to other exempt organizations or spent	_	110
	in the organization's own exempt activities during the tax year 🕨 \$		

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

Schedule I

(Form 990)

DLN: 93493116000041 OMB No 1545-0047

Grants and Other Assistance to Organizations, Governments and Individuals in the United States Department of the Treasury

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

Open to Public

Name of the organization						Employer identifica	ation number
CRANBROOK EDUCA	TIONAL COMMUNI	TY				38-2015048	
1 Does the organize the selection critical Describe in Part	ration maintain recor teria used to award th IV the organization's	ds to substantiate the amount of the grants or assistance? s procedures for monitoring the ustance to Governments and	se of grant funds in the	United States			✓ Yes T
Form 99	0, Part IV, line 21	for any recipient that receive Form 990) if additional space	d more than \$5,000	. Check this box if r	no one recipient receiv	ed more than \$5,00	0. Use
(a) Name and addre organization or government		(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of gran or assistance
2 Enter total numb	er of section 501(c)	(3) and government organizations					
3 Enter total numb	er of other organizati	ions					

Ident if ier

Return Reference

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

(a)Type of grant or assistance	(b)Number of recipients	(c)A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
FINANCIAL AID NEED BASED - CAA	117	968,300			
MERIT-BASED INSTITUTIONAL - CAA	35	142,700			
MERIT-BASED INSTITUTIONAL - SCHOOLS	42	501,400			
FINANCIAL AID NEED BASED - CRANBROOK SCHOOLS	371	5,148,306			
TUITION REMISSION	61	1,296,219			

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

Explanation

Tuent ii lei	Return Reference	Explanation
Procedure for Monitoring Grants in the U S		Schedule I, Part I, Line 2 TO RECEIVE GRANTS AND OTHER ASSISTANCE FROM CRANBROOK EDUCATIONAL COMMUNITY ALL CANDIDATES MUST DEMONSTRATE FINANCIAL NEED TO THE FINANCIAL AID COMMITTEE BASED ON AN ANALYSIS OF THE REQUIRED DOCUMENTATION THE REQUIRED DOCUMENTATION IS (1) PARENTS' FINANCIAL STATEMENT (PFS) COMPLETED THROUGH WWW NAIS ORG, (2) INCOME VERIFICATION BY CURRENT W-2'S, END OF YEAR PAY STUBS, EMPLOYER LETTER VERIFYING INCOME, (3) SIGNED COPY OF IRS FORM 4506, (4) SIGNED COPY OF CURRENT YEAR FEDERAL TAX RETURN INCLUDING ALL SCHEDULES, (5) FINANCIAL AID APPLICATION SUBMITTED TO THE SCHOOL AID PACKAGES ARE REVIEWED ANNUALLY ON THE BASIS OF THE FAMILY'S CURRENT FINANCIAL STATUS AID AT CRANBROOK SCHOOLS IS DISTRIBUTED WITHOUT REGARD TO RACE, RELIGION OR ETHNIC BACKGROUND ALL RECIPIENTS ARE EXPECTED TO DEMONSTRATE DILIGENCE IN THEIR ACADEMIC SUBJECTS, MAINTAIN ACCEPTABLE CITIZENSHIP STANDARDS, AND CONTRIBUTE POSITIVELY TO THE SCHOOL COMMUNITY REQUIRED DOCUMENTATION FOR CRANBROOK ART ACADEMY IS A TIMELY FILED FAFSA THROUGH THE GOVERNMENT, AFTER COMPLETION A SAR IS RECEIVED ELECTRONICALLY AT THE SCHOOL ALSO, A COPY OF A SIGNED FEDERAL TAX RETURN IS REQUIRED ASSISTANCE IS BASED UPON THE APPLICANT'S TIMELY APPLICATION AND DEMONSTRATED FINANCIAL NEED ALL ASSISTANCE IS DETERMINED THROUGH THE REGISTER'S OFFICE AT THE ART ACADEMY
		Schedule I (Form 990) 2009

DLN: 93493116000041

Employer identification number

OMB No 1545-0047

Schedule J (Form 990)

Internal Revenue Service

Department of the Treasury

Name of the organization

CRANBROOK EDUCATIONAL COMMUNITY

Compensation Information For certain Officers, Directors, Trustees, Key Employees, and Highest

Compensated Employees ► Complete if the organization answered "Yes" to Form 990, Part IV, question 23.

► Attach to Form 990. ► See separate instructions.

Open to Public Inspection

			38-2015048			
Pa	rt I Questions Regarding Compensation	on	·			
					Yes	Νo
1a	Check the appropriate box(es) if the organization pr 990, Part VII, Section A, line 1a Complete Part I		ny of the following to or for a person listed in Form ride any relevant information regarding these items			
	First-class or charter travel	굣	Housing allowance or residence for personal use			
	Travel for companions	Г	Payments for business use of personal residence			
	Tax idemnification and gross-up payments	\vdash	Health or social club dues or initiation fees			
	Discretionary spending account	Γ	Personal services (e g , maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the creimbursement orprovision of all the expenses des	-		1b	Yes	
2	Did the organization require substantiation prior to officers, directors, trustees, and the CEO/Executiv			2	Yes	
3	Indicate which, if any, of the following the organization organization's CEO/Executive Director Check all		•			
	✓ Compensation committee	Γ	Written employment contract			
	Independent compensation consultant	⊽	Compensation survey or study			
	Form 990 of other organizations	<u> </u>	Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990 or a related organization	, Part VII	I, Section A, line 1a with respect to the filing organization			
а	Receive a severance payment or change-of-contro	ol paymen	it?	4a		No
ь	Participate in, or receive payment from, a supplem	ental non	qualified retirement plan?	4b		Νo
c	Participate in, or receive payment from, an equity-	based co	mpensation arrangement?	4c		Νo
	If "Yes" to any of lines 4a-c, list the persons and p	provide th	e applicable amounts for each item in Part III			
	Only 501(c)(3) and 501(c)(4) organizations only m	nust comp	olete lines 5-9.			
5	For persons listed in form 990, Part VII, Section A compensation contingent on the revenues of	A, line 1a,	did the organization pay or accrue any			
а	The organization?			5a		Νo
b	Any related organization?			5b		Νo
	If "Yes," to line 5a or 5b, describe in Part III					
6	For persons listed in form 990, Part VII, Section A compensation contingent on the net earnings of	A, line 1a,	did the organization pay or accrue any			
а	The organization?			6a		No
ь	Any related organization?			6b		Νo
	If "Yes," to line 6a or 6b, describe in Part III					
7	For persons listed in Form 990, Part VII, Section Appayments not described in lines 5 and 6? If "Yes,"			7		No.
8	Were any amounts reported in Form 990, Part VII,					
	subject to the initial contract exception described					
	ın Part III			8	<u> </u>	Νo
9	If "Yes" to line 8, did the organization also follow to section 53 4958-6(c)?	he rebutt	able presumption procedure described in Regulations	9		

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

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

Note. The sum of columns (B)(I)-(III) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a

(A) Name		(B) Breakdown of	W-2 and/or 1099-MI	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	reported in prior Form 990 or Form 990-EZ
FREDERICK NAHM	(I) (II)	351,575 0	0	44,000 0	19,600 0	15,391 0	430,566 0	
DOMINIC DIMARCO	(I) (II)	244,804 0	0	0	5,446 0	7,062 0	257,312 0	
ARLYCE SEIBERT	(I) (II)	252,086 0	17,867 0	0	19,600 0	36,157 0	325,710 0	
REED KROLOFF	(1) (11)	212,634 0	0	0	17,080 0	38,652 0	268,366 0	
MICHAEL HILLIARD	(I) (II)	236,009 0	403,491 0	0	18,906 0	7,387 0	665,793 0	
MICHAEL STAFFORD	(I) (II)	143,743 0	0	0	5,761 0	17,866 0	167,370 0	
MARSHA GILMAN	(I) (II)	143,863 0	0	0	11,273 0	5,988 0	161,124 0	
PAMELA RUTHVEN	(ı) (ıı)	153,474 0	0	0	7,096 0	1,595 0	162,165 0	
ANDREW MILLER	(I) (II)	139,969	0	0	9,139	17,713 0	166,821	

Part III Supplemental Information

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

Ident if ier	Return Reference	Explanation
	,	THE PRESIDENT RECEIVES A HOUSING ALLOWANCE AS HE IS REQUIRED TO LIVE IN THE CITY OF BLOOMFIELD HILLS THE DIRECTOR OF THE ART ACADEMY AND THE DIRECTOR OF SCHOOLS ARE PROVIDED A HOUSE ON CAMPUS AS RESIDENCY IS A REQUIREMENT OF THEIR POSITIONS THE PRESIDENT'S HOUSING ALLOWANCE IS APPROPRIATELY INCLUDED IN HIS FORM W-2

Schedule J (Form 990) 2009

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

DLN: 93493116000041

Schedule K (Form 990)

Supplemental Information on Tax Exempt Bonds

Complete if the organization answered "Yes" to Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Schedule 0 (Form 990).
 ★ Attach to Form 990.
 ★ See separate instructions.

OMB No 1545-0047

2009

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization
CRANBROOK EDUCATIONAL COMMUNITY

Employer identification number

38-2015048

Р	art I Bond Issues													
	(a) Issuer Name	(b) Issuer EIN	(c) CUSIP #	(d) Date	e Issued	(e) Issue	e Price	(f) Des	cription of	Purpose	(g) De	feased		On alf of uer
											Yes	No	Yes	No
A	ECONOMIC DEVELOPMENT CORP OF OAKLAND COUNTY	672523GN1	10-15-2009		18,599,313 SEE S		SEE SCHED	ULE O			х		Х	
В	ECONOMIC DEVELOPMENT CORP OF OAKLAND COUNTY	672523GD3	11-01-	-2007	46,390,000 S		SEE SCHED	ULE O			х		Х	
Pa	art II Proceeds	•					<u>'</u>	_			'			
					4	_	В		С		D		E	
1	Total proceeds of issue			1	8,410,368	4	16,285,837	7						
_2														
3	Proceeds in refunding or defeasan	nce escrows												
4	Other unspent proceeds													
5	Issuance costs from proceeds				370,346		436,000	ס						
6	Working capital expenditures from	n proceeds												
7	Capital expenditures from proceed	ds												
8	Year of substantial completion													
				Yes	No	Yes	No	Yes	No	Yes	No	Ye	s	No
9	Were the bonds issued as part of a	a current refunding is:	sue?		X		X							
10	Were the bonds issued as part of a	an advance refunding	ıssue [?]	Х		Х								•
11	Has the final allocation of proceed	ds been made?		Х		Х								
12	Does the organization maintain ad the final allocation of proceeds?	dequate books and rec	ords to support	Х		х								
Pa	rt IIII Private Business Use					_								
				—	A	B)	-	E	
	Man Harrison and the control of the	b		Yes	No	Yes	No	Yes	No	Yes	No	Ye	5	No
1	Was the organization a partner in which owned property financed by		ember of an LLC,											
2	Are there any lease arrangements which may result in private busine		nanced property											
For	Privacy Act and Paperwork Reduction Ac	ct Notice, see the Instr	uctions for Form 990	•		Cat No 50	0193E				Schedule	K (Form	990) 20	09

Were any gross proceeds invested beyond an available temporary period?

Did the bond issue qualify for an exception to rebate?

5

Par	t III Private Business Use (Continued)											-
				A	E	3		С		D		E
			Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
3a	Are there any management or service contracts with respect to financed property which may result in private business use?	the the										
3b	Are there any research agreements with respect to the finance which may result in private business use?	d property										
3с	Does the organization routinely engage bond counsel or other o counsel to review any management or service contracts or rese agreements relating to the financed property?											
4	Enter the percentage of financed property used in a private bus by entities other than a section 501(c)(3) organization or a stagovernment									·		
5	Enter the percentage of financed property used in a private bus as a result of unrelated trade or business activity carried on by organization, another section 501(c)(3) organization, or a state government	your										
6	Total of lines 4 and 5											
7	Has the organization adopted management practices and proce ensure the post-issuance compliance of its tax-exempt bond lis											
Pa	rt IV Arbitrage											
		ı	١		В		С)		<u> </u>
1	Has a Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate, been filed with respect to the bond issue?	Yes	No	Yes	No	Y€	es	No	Yes	No	Yes	No

							_		- ,		
		Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
1	Has a Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate, been filed with respect to the bond issue?		х		х						
2	Is the bond issue a variable rate issue?		Х	Х							
3a	Has the organization or the governmental issuer identified a hedge with respect to the bond issue on its books and records?		Х	Х							
ь	Name of provider	GOLDMAN S MITS		GOLDMAN: MITS	SACHS						
С	Term of hedge	30 0000	00000000	30 0000	00000000						
4a	Were gross proceeds invested in a GIC?		Х	Х							
ь	Name of provider	ROYAL BAN CANADA		ROYAL BAN CANADA	KOF						
С	Term of GIC	12 0000	00000000	12 0000	00000000						
d	Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?	X		х							

Χ

Χ

Χ

Χ

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

DLN: 93493116000041

Transactions with Interested Persons

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

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

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

(Form 990 or 990-EZ)

Schedule L

Name of the organization CRANBROOK EDUCATIONAL COMMUNITY **Employer identification number**

								8-20150				
Part I Excess Benefit Trai										4.0	.1	
Complete if the organizat				1 990, F	art IV, line 25a (or 25	b, or Form	990-EZ,	Part V, II			rected
1 (a) Name of disq	ualıfıed	persor	n e		(b) Desc	riptio	on of trans	action		<u> </u>	Yes	No
												"
										-		
												<u> </u>
2 Enter the amount of tax impos		he orga		_			-	ear unde	r			
section 4958		•							• \$ —			
3 Enter the amount of tax, If any	, on line	e ∠, ab	ove, reimburse	ed by th	e organization .	•			* \$			
Part II Loans to and/or I	From	Inter	ested Pers	ons.								
Complete if the organiz	zation a	nswere	ed "Yes" on Fo	orm 990), Part IV, line 26	, or F	orm 990-l	Z, Part ۱	/, lıne 38	a		
	(b) ∟	oan to						(f)		, ,		
(a) Name of interested person and	1	m the	(c) 0 rigi		(d)Balance due		e) In fault?	A ppro by boar			Writte eement	
purpose	organi	zation?	principal ar	mount	(d) Dalalice due	""	idait	commit		lagi.	content	•
	То	From				Yes	No	Yes	No	Ye	:s	No
										_		
								+				
				<u> </u>	1			1		_		
otal				► \$	Dorsons							
Complete if the orga						/. line	e 27.					
					een interested per							
(a) Name of Interested pers	on				ganızatıon .		(c) An	nount of g	rant or ty	pe or	assist	ance
Part IV Business Transact	ions 1	[nvol	vina Intere	stad	Dersons							
Complete if the orga						/, line	e 28a, 28	b, or 28	c.			
			b) Relationship		·			•			(e) Sha	arıng o
(a) Name of interested perso	n		ween interest		(c) A mount of		(d) Desc	ription of	transact	ion	organız	
(a) mame or meeting points		P	erson and the organization		transaction		(4, 2000			···· -		nues?
TE ENERCY		BBILC			792 5	: 4 4	ELECTRIC	CEDVIC	-		Yes	No No
OTE ENERGY			CE PETERSON STEE, IS AN	١,	782,5	944	ELECTRIC	SERVIC	E			INO
		OFFI	CEROFDTE									
		ENEF	RGY									1
		-								$-\!\!\!+$		₩
		-								\dashv		+-
		+										+

SCHEDULE M (Form 990)

NonCash Contributions

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

Name of the organization CRANBROOK EDUCATIONAL COMMUNITY

Employer identification number

					38-2015048			
Pa	rt I Types of Property							
		(a) Check If applicable	(b) Number of Contributions	(c) Revenues reported on Form 990, Part VIII, line 1g	(d Method of do reven	- etermı	nıng	
1	Art-Works of art			J				
2	Art—Historical treasures .							
3	Art—Fractional interests	Х	1	1,200	APPRAISAL			
4	Books and publications	Х		4,270	COST			
5	Clothing and household goods	X		12,148	COST			
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property							
9	Securities—Publicly traded .	Х	48	579,283	AVG MARKET VAL	UATIO	N	
10	${\tt Securities-Closely\ held\ stock} .$							
11	Securities—Partnership, LLC, or trust interests							
12	Securities—Miscellaneous							
13	Q ualified conservation contribution—Historic structures							
14	Qualified conservation contribution—Other							
15	Real estate—Residential .							
16	Real estate—Commercial							
17	Real estate—Other							
18	Collectibles							
19	Food inventory	X	5	350	COST			
20	Drugs and medical supplies .							
21	Taxidermy							
	Historical artifacts							
	Scientific specimens	X	5	3,531	COST			
24	Archeological artifacts							
25	AUCTION	×	782	204,641	COST			
25	Other ► (<u>ITEMS</u>) DONATIONS	<u> </u>	702	204,041	C031			
	FOR							
26	Other ► (FUNDRAISERS)	Х	39	18,541	соѕт			
27	Other ▶()							
28	Other ► ()							
29	Number of Forms 8283 received				29			1
	for which the organization compl	eted Form 8	8283, Part IV , Donee Ackn	owledgement	29		l I	
20-	Burns Herring did the consequent				4. 30 15-1-1		Yes	No
30a	During the year, did the organiza							
	must hold for at least three year			on, and which is not require	a to be used			NI -
_	for exempt purposes for the entire					30a		No
ь	If "Yes," describe the arrangeme							
31	Does the organization have a gif					31	Yes	
∍∠đ	contributions?	· · ·		· · · · · · · · · · · ·		32a		Νο
b	If "Yes," describe in Part II							_ _
33	If the organization did not report describe in Part II	revenues i	n column (c) for a type of p	roperty for which column (a) is checked,			

Page 2

Part II

Supplemental Information. Complete this part to provide the information required by Part I, lines 30b, 32b, and 33. Also complete this part for any additional information.

Identifier Return Reference Explanation

Schedule M (Form 990) 2009

Software ID: Software Version:

As Filed Data -

EIN: 38-2015048

Name: CRANBROOK EDUCATIONAL COMMUNITY

SCHEDULE O

(Form 990)

Supplemental Information to Form 990

DLN: 93493116000041OMB No 1545-0047

2009

Open to Publ Inspection

Department of the Treasury
Internal Revenue Service

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

Attach to Form 990.

Name of the organization CRANBROOK EDUCATIONAL COMMUNITY Employer identification number

38-2015048

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section A, line 2		LINDA WASSERMAN AVIV AND GARY L WASSERMAN, BOTH TRUSTEES OF THE ORGANIZATION, HAVE A FAMILY RELATIONSHIP WITH ONE ANOTHER ADELE ACHESON AND MICHAEL ACHESON, BOTH TRUSTEES OF THE ORGANIZATION, HAVE A FAMILY RELATIONSHIP WITH ONE ANOTHER MAGGIE ALLESSEE AND MICHAEL ACHESON, BOTH TRUSTEES OF THE ORGANIZATION, HAVE A FAMILY RELATIONSHIP WITH ONE ANOTHER

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section A, line 6		CRANBROOK EDUCATIONAL COMMUNITY HAS THREE DIVISIONS OF THE ORGANIZATION, CRANBROOK SCHOOLS, CRANBROOK ART ACADEMY AND CRANBROOK INSTITUTE OF SCIENCE, WHICH EACH HAVE A BOARD OF GOVERNORS THESE BOARD OF GOVERNORS ARE THE MEMBERS OF THE ORGANIZATION

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section A, line 7a		UP TO SIX TRUSTEES OF CRANBROOK EDUCATIONAL COMMUNITY SHALL BE ELECTED BY THE CRANBROOK SCHOOLS MEMBERS, UP TO FOUR TRUSTEES SHALL BE ELECTED BY THE CRANBROOK ART MEMBERS AND UP TO FOUR TRUSTEES SHALL BE ELECTED BY THE CRANBROOK SCIENCE MEMBERS, NONE OF WHICH TRUSTEES NEED TO BE MEMBERS OF THE ORGANIZATION OR ITS THREE DIVISIONS THE CHAIRMAN OF THE BOARD OF GOVERNORS OF THE CRANBROOK SCHOOLS, THE CHAIRMAN OF THE BOARD OF GOVERNORS OF THE CRANBROOK INSTITUTE OF SCIENCE, AS ELECTED BY THE RESPECTIVE BOARDS OF GOVERNORS FROM TIME TO TIME PURSUANT TO THE ORGANIZATION'S BYLAWS, SHALL ALL BE EX OFFICIO MEMBERS OF THE BOARD OF TRUSTEES WITH FULL VOTING AND OTHER RIGHTS, FOR SO LONG AS EACH OF THEM REMAINS CHAIRMAN, AND SHALL THEREAFTER BE REPLACED AS TRUSTEES BY THEIR SUCCESSORS IN SUCH CHAIRMANSHIP POSITIONS

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section B, line 11		THE INITIAL REVIEW OF THE 990 IS DONE BY THE CHIEF FINANCIAL OFFICER, THE CHIEF OPERATING OFFICER AND THE PRESIDENT AND THE INDEPENDENT AUDITORS THE 990 IS REVIEWED BY THE CHAIR OF THE BOARD OF TRUSTEES AND A MEMBER OF THE AUDIT COMMITTEE PRIOR TO FILING, THE 990 IS MADE AVAILABLE TO ALL MEMBERS OF THE BOARD OF TRUSTEES FOR THEIR REVIEW

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section B, line 12c		A FORMAL WRITTEN CONFLICT OF INTEREST POLICY IS SENT OUT ANNUALLY TO OFFICERS, DIRECTORS/TRUSTEES AND KEY EMPLOYEES FOR THEIR COMPLETION, AND MUST BE SIGNED AND RETURNED TO CRANBROOK EDUCATIONAL COMMUNITY

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section B, line 15		THE CHAIR OF THE BOARD OF TRUSTEES, IN CONJUNCTION WITH OTHER TRUSTEES, DETERMINES SALARIES USING INFORMATION PREPARED BY THE HUMAN RESOURCE DEPARTMENT FOR COMPARABLE SALARIES WITH PEER INSTITUTIONS

Identifier	Return Reference	Explanation
Form 990, Part VI, Section C, line 19		THE FOLLOWING DOCUMENTS ARE AVAILABLE UPON REQUEST AUDITED CONSOLIDATED FINANCIAL STATEMENTS AND CRANBROOK LEADERSHIP HANDBOOK

ldentifier	Return Reference	Explanation
FORM 990, PART XI, LINE 2C		THE ORGANIZATION'S AUDIT COMMITTEE OVERSEES THE AUDIT THIS PROCESS HAS NOT CHANGED FROM THE PREVIOUS YEAR

ldentifier	Return Reference	Explanation
SCHEDULE K, PART I, LINE A, COLUMN F		\$18,425,000 SERIES 2009 VARIABLE RATE BONDS WERE ISSUED TO REFUND THE SERIES 1997B AND A PORTION OF THE 1998 BONDS, WHICH WERE PREVIOUSLY ISSUED TO BENEFIT CRANBROOK EDUCATIONAL COMMUNITY, AND TO PAY THE COSTS OF ISSUING THE BONDS THE SERIES 2007 VARIABLE RATE BONDS WERE RESTRUCTURED IN 2009 VIA THE ISSUANCE OF SERIES 2009 VARIABLE RATE BONDS WHICH ARE SUPPORTED BY A JP MORGAN CHASE BANK LETTER OF CREDIT PROCEEDS FROM THE ORIGINAL 2007 ISSUE WERE USED TO REFUND THE SERIES 1997A AND 2001 BONDS, PAY ISSUANCE COSTS, AND TO COMPLETE CERTAIN CAPITAL PROJECTS (BOYS MIDDLE SCHOOL CONSTRUCTION, KINGSWOOD ROOF, IT, ETC.)