

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



DLN: 93493135047542

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)

2010

OMB No 1545-0047

Open to Public Inspection

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

A For	the 20	10 calendar year, or tax year be	ginning 07-01-2010 and ending 06-30-201	1	D Emn	lover	identification number
	k ıf appl ess chan	PHILLIPS EXETER ACADEMY				•	
_	ess chan e change	Doing Business As				0222	
Naiii Initia	_						number
Term		Number and street (or P O bo	ox if mail is not delivered to street address)	Room/s	suite (60:	3)77	2-4311
	nded reti	urn City or town, state or country,	and ZIP + 4		G Gross	s recei	ots \$ 392,396,718
	cation pe	EXETER, NH 038332460					
	•	F Name and address o	f principal officer	H(a)	Is this a group return	n for offil	liates? Yes Vo
		THOMAS E HASSAN		11(4)	is this a group return	IIIOI allii	ilates (140
		20 MAIN STREET EXETER,NH 0383324	60		Are all affiliates ii		
					If "No," attacl Group exemp		t (see instructions) umber ►
I Tax-	exempt	status 501(c)(3) 501(c) () ◀ (insert no)	11(0)	oroup exemp		
J We	bsite: I	► WWW EXETER EDU					
K Form	of orgar	nization 🔽 Corporation 🦳 Trust 🦳 Asso	ociation Cother 🕨	L Yea	r of formation 1	781	M State of legal domicile NH
Par	t I	Summary					
		efly describe the organization's mE SCHEDULE O	nission or most significant activities				
ყ	<u> </u>	L SCHEDOLL O					
ੁ	_						
Activities & Governance		eck this how by if the organization	on discontinued its operations or disposed o	of more t	han 25% of its	s nat :	accatc
§		•	verning body (Part VI, line 1a)		11a11 23 70 01 10	3 Het 1	18
* 5			pers of the governing body (Part VI, line 1b)			4	17
<u>ĕ</u>			ed in calendar year 2010 (Part V, line 2a)			5	1,213
5		tal number of volunteers (estimat				6	3,340
육			om Part VIII, column (C), line 12			7a	1,599,971
			me from Form 990-T, line 34			7b	
					Prior Year		Current Year
.	8 (Contributions and grants (Part VI	II, line 1h)		12,735,	,963	28,177,981
ă l	9	Program service revenue (Part VI		46,184,	,035	47,684,164	
Revenue			lumn (A), lines 3, 4, and 7d)		17,096		17,149,378
-		•	(A), lines 5, 6d, 8c, 9c, 10c, and 11e)		1,934,	,297	1,460,267
			h 11 (must equal Part VIII, column (A), line	e	77,951,	,080	94,471,790
			Part IX, column (A), lines 1-3)		18,328,		18,776,135
	14	Benefits paid to or for members (F	art IX, column (A), line 4)			0	0
ا س			ployee benefits (Part IX, column (A), lines		45.011	226	46 730 714
Expenses			+ TV - column (A) lunc 11 a)		45,011,	,226	46,730,714
<u>क</u>			t IX, column (A), line 11e)			٠	0
		Total fundraising expenses (Part IX, column	(A), lines 11a-11d, 11f-24f)		26,417,	083	32,829,540
			(must equal Part IX, column (A), line 25)		89,756		98,336,389
		•	line 18 from line 12		-11,805	_	-3,864,599
84		<u>'</u>		Beg	inning of Curre		End of Year
Net Assets or Fund Balances					Year	4.4.2	
SA B		Total assets (Part X, line 16)			1,179,439,		1,297,006,603
2 2 2 2 1		Total liabilities (Part X, line 26)	ract line 21 from line 20		130,250,		125,513,655 1,171,492,948
Part		Signature Block			1,015,100,	,551	1,171,192,310
			camined this return, including accompanying so	hedules	and statements	s. and	to the best of my
	dge and		olete. Declaration of preparer (other than office				
MIO WIC	uge.						
					2010-04-27		
Sign		Signature of officer			Date		
Here		CHRISTOPHER V WEJCHERT CFO					
		Type or print name and title					
		nt/Type eparer's name	Preparer's signature D	ate	Check if se		PTIN
Paid		RICEWATERHOUSECOOPERS LLP	PRICEWATERHOUSECOOPERS LLP		employed	<u>' </u>	
Prepar		m's name 🕨 PricewaterhouseCoopers LLI					Firm's EIN
Use O	rii y Fir	m's address 🕨 125 High Street					Phone no 🕨 (617) 530-
		Boston, MA 02110					5000
May th	e IRS	discuss this return with the prepa	rer shown above? (see instructions)				▼ Yes

Form	990 (2010)					Pa	age
Par		of Program Servedule O contains a res		olishments uestion in this Part III			
1	Briefly describe the	organization's missioi	า				
SEE	SCHEDULE O						
2				= -	which were not listed on		
	the prior Form 990 o	or 990-EZ? ese new services on S				Yes 🔽 No	
3	Did the organization services?	cease conducting, or	make sıgnıfıcar	nt changes in how it cor		Yes 🔽 No	
4	Describe the exemp Section 501(c)(3) a	nd 501(c)(4) organiza	ts for each of th tions and secti	3	largest program services by e re required to report the amou service reported	•	
4a	(Code SEE SCHEDULE O) (Expenses \$	79,665,857	including grants of \$	17,646,891) (Revenue \$	41,456,108)	
4b	(Code) (Expenses \$	4,968,452	ıncludıng grants of \$	1,129,244) (Revenue \$	5,767,243)	
	SEE SCHEDULE 0						
4c	(Code) (Expenses \$	1,460,588	ıncludıng grants of \$) (Revenue \$	1,355,134)	
	AUXILIARY ENTERPRISE	ES INCLUDE STUDENT GRIL	L AND GYMSTORE	WHICH SERVE STUDENTS DI	URING BOTH SUMMER AND REGULAR	R SESSIONS	

) (Revenue \$

including grants of \$

Other program services (Describe in Schedule O)

4d

(Expenses \$

Part TV	Checklist of	Required	Schedules
	CHCCKHSCOL	IXC GGII CG	Scriculics

			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 (see instruction)? ਓ	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^{\bullet}	3		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	Yes	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? 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 2	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 quasiendowments? If "Yes," complete Schedule D, Part V^{\bullet}	10	Yes	
11	If the organization's answer to any of the following questions is 'Yes,' then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
a	Did the organization report an amount for land, buildings, and equipment in Part X, line10? If "Yes," complete Schedule D, Part VI.	11a	Yes	
b	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.	11b	Yes	
C	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.	11c		No
d	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.	11d		No
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.	11e	Yes	
f	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 (ASC 740)? If "Yes," complete Schedule D, Part X.	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12a	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	Yes	
14a	, , , , ,	14a		No
	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, Parts I and IV	14b	Yes	
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? If "Yes," complete Schedule F, Parts II and IV	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, Parts III and IV.	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? <i>If</i> "Yes," complete Schedule G, Part I (see instructions)	17		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If</i> "Yes," complete Schedule G, Part II	18		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach its audited financial statement to this return? Note. Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)	20b		

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 $\textcircled{\textbf{5}}$	21		No
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	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 lines 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		No
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
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		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	Yes	
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	Yes	
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			
	<i>IV</i>	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
C	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		N o
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule Ma	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		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		N o
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	Yes	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	35	Yes	
a	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 \Box Yes \Box 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	Yes	
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?	38	Yes	

011111 3 3 0 (,2010)							ı ayı
Part V	Statements Regarding Other IRS Filings and Tax Complia	ance	e					
	Check if Schedule O contains a response to any question in this Part V						. [고	

Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable		Yes	No
1b 0			
gaming (gambling) winnings to prize winners?	1c	Yes	
Statements filed for the calendar year ending with or within the year covered by this			
If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Yes	
Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Yes	
	3b	Yes	
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	Yes	
See instructions for 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		Νo
Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Νo
If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?	6a		Νo
were not tax deductible?	6b		
	7a		No
services provided to the payor?			
file Form 8282?	7 c		No
contract?	7e		Νo
If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as	7f		No
If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a			
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.			
	9a		
	9b		
1 1			
Section 501(c)(12) organizations. Enter			
Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
	12a		
If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
Section 501(c)(29) qualified nonprofit health insurance issuers.			
Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O	13a		
Enter the amount of reserves on hand			
	1/-		NI -
	14a 14b		No
	Enter the number of Forms W-2G included in line 1a. Enter-6- if not applicable. Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (ambling) withings to prace withholding rules for reportable payments to vendors and reportable gaming (ambling) withings to prace withholding rules for reportable payments to vendors and reportable gaming (ambling) withings to prace within the year overed by this return. The test 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 (see instructions). Did the organization has unrelated business gross income of \$11,000 or more during the year? If Yes, has it filed a Form 990-1 for this year? If Wo, "provide an explanation in Schedule 0. If Yes, has it filed a Form 990-1 for this year? If Wo, "provide an explanation in Schedule 0. If Yes, a rather the name of the foreign country (such as a bank account, securities account, or other financial account in a foreign country (such as a bank account, securities account, or other financial accounts for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts. If Yes, anter the name of the foreign country between the 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 she tild was or is a party to a prohibited tax shelter transaction? If Yes, to line 5a or 5b, did the organization file Form BB86-17. Does the organization she was annual gross recepts that are normally greater than \$100,000, and did the organization should an explanation include with every solicitation an express statement that such contributions or gifts were not tax deductible? If Yes, "did the organization include with every solicitation an express shape the filing form of the foreign shape the filing form the filing form the filing form the filing form	Either the number of Forms W-2G included in line 1 a Enter-0-(finat applicable 1 b)	Ester the number reported in Box 3 of Form 1096 Ester -0 - If not appricable Ester the number of Forms W 20 included in line 1a Ester 0 - If not appricable 1a

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.

Check if Schedule O contains a	a response to any question in this Part VI		 			. 攵

_Se	ction A. Governing Body and Management										
			Yes	No							
4 -	Enterphysical Control of Control										
1a	Enter the number of voting members of the governing body at the end of the tax year										
b	Enter the number of voting members included in line 1a, above, who are independent										
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		Νo							
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		No							
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No							
5	5 Did the organization become aware during the year of a significant diversion of the organization's assets? .										
6	6 Does the organization have members or stockholders?										
7a	7a	Yes									
b	governing body?										
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following										
а	The governing body?	8a	Yes								
b	Each committee with authority to act on behalf of the governing body?	8b	Yes								
9	9		No								
	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		No							
	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									
	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes								
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990										
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes								
	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes								
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c	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								
b	Other officers or key employees of the organization	15b	Yes								
	If "Yes" to line 15a or 15b, describe the process in Schedule O (See instructions)										
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No							
h	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its	LUG		110							
U	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	_00									

- 17 List the States with which a copy of this Form 990 is required to be filed►NH
- 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 organization ► BONNIE V OLZACK
 20 MAIN STREET
 EXETER, NH 038332460
 (603) 777-3233

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

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

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year

- ◆ 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, if any See instructions for definition of "key employee"
- ◆ List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- ◆ List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee

(A) Name and Title	(B) A verage hours		tion (that a	(che		ll .		(D) Reportable compensation from the	(E) Reportable compensation from related	(F) Estimated amount of other		
	per week (describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional Trustee	Officei	Highest compensated employee Key employee		ighest compensated mbloxee Key employee		Former	organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)	compensation from the organization and related organizations
(1) DAVID O BEIM TRUSTEE	2 0	х						0	0	0		
(2) FLOBELLE BURDEN DAVIS TRUSTEE	2 0	х						0	0	0		
(3) MARC CHOPIN DE LA BRUYERE TRUSTEE	2 0	х						0	0	0		
(4) WALTER DONOVAN TRUSTEE	2 0	х						0	0	0		
(5) JONATHAN W GALASSI TRUSTEE	2 0	х						0	0	0		
(6) ROBERT HO TRUSTEE	2 0	х						0	0	0		
(7) DAVID R HORN TRUSTEE	2 0	х						0	0	0		
(8) G THOMPSON HUTTON PRESIDENT/TRUSTEE	2 0	х						0	0	0		
(9) ALLAN R JONES TRUSTEE	2 0	х						0	0	0		
(10) SALLY JUTABHA MICHAELS TRUSTEE	2 0	х						0	0	0		
(11) EUNICE JOHNSON PANETTA TRUSTEE	2 0	х						0	0	0		
(12) WILLIAM K RAWSON TRUSTEE	2 0	х						0	0	0		
(13) NINA D RUSSELL MD TRUSTEE	2 0	х						0	0	0		
(14) ROBERT SILBERMAN TRUSTEE	2 0	х						0	0	0		
(15) J DOUGLAS SMITH TRUSTEE	2 0	х						0	0	0		
(16) REMY WHITE TRAFELET TRUSTEE	2 0	Х						0	0	0 Form 990 (2010)		

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and Title	(B) Average hours	1	tion (•		II		(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of other
	per week (describe hours for related organizations in Schedule O)	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
(17) MORRISON D WEBB TRUSTEE	2 0	х						0	0	0
(18) THOMAS E HASSAN PRINCIPAL	38 0	х		х				301,510	0	121,152
(19) CHRISTOPHER V WEJCHERT CFO (SINCE AUGUST 2010)	38 0			х				93,817	0	18,934
(20) WILLIAM C DAVISON DIR MAJOR GIFTS/INST ADVANCEMT	38 0					Х		197,122	0	38,849
(21) EDWARD W PROBERT DIR INSTITUTIONAL ADVANCEMENT	38 0					Х		171,814	0	69,217
(22) JAY H MARTIN DIRECTOR - ITS	38 0					Х		146,784	0	35,099
(23) JULIE QUINN DIRECTOR - COMMUNICATIONS	38 0					х		143,091	0	25,630
(24) JAMES M THEISEN DIR ALUMNI AFFAIRS & DEV	38 0					х		253,930	0	45,580
(25) TYLER C TINGLEY FORMER PRINCIPAL	38 0						х	300,400	0	36,004
(26) JOSEPH FELLOWS FORMER CHIEF FINANCIAL OFFICER	38 0						х	111,450	0	23,056
							<u></u>			
to Total from continuation sheets	to Part VII Sect					<u></u>				
d Total (add lines 1b and 1c)					<u> </u>	-	▶	1,719,918	0	413,521
2 Total number of individuals (inc	luding but not lim	ited to	those	e list	ed a	bove)	who	received more tha	 n	

\$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? If "Yes," complete Schedule J for such individual							
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 I for such							
	ındıvıdual	4	Yes					
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for							
	services rendered to the organization? If "Yes," complete Schedule I for such person	5		No				

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) Name and business address	(B) Description of services	(C) Compensation			
HARVEY CONSTRUCTION COMPANY 10 HARVEY ROAD BEDFORD, NH 03110	CONTRACT SERVICES	3,267,483			
SHAWMUT CONSTRUCTION 5 CAMBRIDGE CENTER CAMBRIDGE, MA 02142	ARCHITECTURAL SVCS	2,377,846			
HINTZ HOLMAN ROBILLARD 400 CONNELL DRIVE SUITE 5100 BERKELEY HEIGHTS, NJ 07922	INVESTMENT MGMT	1,222,807			
RIST-FROST SHUMWAY ENGINEERING 71 WATER STREET LACONIA, NH 03246	ENGINEERING SERVICES	781,925			
BUILD-IT CONSTRUCTION PO BOX 1610 SALEM, NH 03079	CONTRACT SERVICES	546,238			
Total number of independent contractors (including but not limited to those listed above) who received more than					

\$100,000 in compensation from the organization ▶25

Part IX Statement of Functional Expenses

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

A	Section 501(c)(3) and 501(c)(4) organizations mus Il other organizations must complete column (A) but are not required to c			(D).	
	ot include amounts reported on lines 6b, o, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the U S See Part IV, line 21 $$	0			<u> </u>
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22	18,776,135	18,776,135		
3	Grants and other assistance to governments, organizations, and individuals outside the U S See Part IV, lines 15 and 16	0			
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors, trustees, and key employees	679,947	255,217	339,658	85,072
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$	0			
7	Other salaries and wages	33,265,755	28,308,392	1,929,947	3,027,416
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	4,017,881	3,483,949	207,865	326,067
9	Other employee benefits	6,370,785	5,660,178	316,376	394,231
10	Payroll taxes	2,396,346	2,039,235	139,027	218,084
а	Fees for services (non-employees) Management	0			
b	Legal	242,490		242,490	
c	Accounting	228,177		228,177	
d	Lobbying	0			
e	Professional fundraising services See Part IV, line 17	0			
f	Investment management fees	2,297,731		2,297,731	
g	Other	1,750,594	1,286,301	236,223	228,070
12	Advertising and promotion	324,618	303,732	11,103	9,783
13	Office expenses	1,641,308	1,342,352	112,620	186,336
14	Information technology	1,134,286	1,006,704	57,540	70,042
15	Royalties	0			
16	Occupancy	5,827,750	5,600,671	152,621	74,458
17	Travel	879,300	613,198	20,652	245,450
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0			
19	Conferences, conventions, and meetings	692,777	565,952	86,386	40,439
20	Interest	1,968,430	1,896,668	48,240	23,522
21	Payments to affiliates	0			_
22	Depreciation, depletion, and amortization	7,227,955	6,946,309	189,328	92,318
23	Insurance	795,924	539,841	224,800	31,283
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24f If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O)				
а	STUDENT RELATED EXPENSES	2,496,964	2,394,677	102,287	
b	FOOD/PROVISIONS	1,621,755	1,621,755		
С	PLANT RELATED ACTIVITIES	3,478,411	3,342,873	91,112	44,426
d	MISCELLANEOUS EXPENSES	118,090	53,264	51,047	13,779
e	MEMBERSHIP DUES	102,980	57,494	18,621	26,865
f	All other expenses				
25	Total functional expenses. Add lines 1 through 24f	98,336,389	86,094,897	7,103,851	5,137,641
26	Joint costs. Check here ► if following SOP 98-2 (ASC 958-720) Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation	. , .			rm 990 (2010)

Pa	rt X	Balance Sheet					
					(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing			9,339,096	1	5,704,566
	2	Savings and temporary cash investments	120,293,228	2	38,737,778		
	3	Pledges and grants receivable, net	49,961,606	3	43,528,377		
	4	Accounts receivable, net			322,923	4	550,817
	5	Receivables from current and former officers, directors, truste highest compensated employees Complete Part II of					
		Schedule L			84,123	5	65,780
	6	Receivables from other disqualified persons (as defined under persons described in section $4958(c)(3)(B)$, and contributing sponsoring organizations of section $501(c)(9)$ voluntary employeganizations (see instructions)	emplo	yers, and			
ets		Schedule L				6	
Assets	7	Notes and loans receivable, net			204,812	7	55,624
⋖	8	Inventories for sale or use			487,684	8	477,307
	9	Prepaid expenses and deferred charges			2,217,685	9	2,250,277
	10a	Land, buildings, and equipment cost or other basis <i>Complete Part VI of Schedule D</i>	10a	283,518,842			
	b	Less accumulated depreciation	10b	98,775,331	176,275,436	10c	184,743,511
	11	Investments—publicly traded securities			116,237,125	11	166,268,523
	12	Investments—other securities See Part IV, line 11			654,819,261	12	799,285,829
	13	Investments—program-related See Part IV, line 11				13	
	14	Intangible assets		14			
	15	Other assets See Part IV, line 11			49, 196, 163	15	55,338,214
	16	Total assets. Add lines 1 through 15 (must equal line 34) .	1,179,439,142	16	1,297,006,603		
	17	Accounts payable and accrued expenses .			5,054,723	17	5,129,812
	18	Grants payable				18	
	19	Deferred revenue	14,970,214	19	17,584,268		
	20	Tax-exempt bond liabilities			50,000,000	20	50,000,000
es.	21	Escrow or custodial account liability Complete Part IV of Sched	ule D			21	
bilities	22	Payables to current and former officers, directors, trustees, ke employees, highest compensated employees, and disqualified					
Lial		persons Complete Part II of Schedule L				22	
	23	Secured mortgages and notes payable to unrelated third partie	es .	•		23	
	24	Unsecured notes and loans payable to unrelated third parties				24	
	25	Other liabilities Complete Part X of Schedule D			60,225,651	25	52,799,575
	26	Total liabilities. Add lines 17 through 25			130,250,588	26	125,513,655
-A		Organizations that follow SFAS 117, check here ▶ 🔽 and con	plete	lines 27			
Ð		through 29, and lines 33 and 34.					
Balances	27	Unrestricted net assets			233,605,198	27	262,431,875
B 3	28	Temporarily restricted net assets			506,881,138	28	587,208,605
Fund	29	Permanently restricted net assets			308,702,218	29	321,852,468
Fu		Organizations that do not follow SFAS 117, check here ►	nd co	mplete			
ě		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	funds			32	
Net	33	Total net assets or fund balances			1,049,188,554	33	1,171,492,948
	34	Total liabilities and net assets/fund balances			1,179,439,142	34	1,297,006,603

Par	Check if Schedule O contains a response to any question in this Part XI			. [~			
1	Total revenue (must equal Part VIII, column (A), line 12)	1		94,4	471,79°		
2	2 Total expenses (must equal Part IX, column (A), line 25)						
3	Revenue less expenses Subtract line 2 from line 1	3		-3,8	364,59		
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		1,049,1	188,55		
5	Other changes in net assets or fund balances (explain in Schedule O)	5		126,1	168,99		
6	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6		1,171,492,94			
Pai	rt XII Financial Statements and Reporting	•					
	Check if Schedule O contains a response to any question in this Part XII			୮			
				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		No		
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 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 is 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 on a separate basis, consolidated basis, or both Separate basis Consolidated basis Both consolidated and separated basis	ssued					
За		e	3a		No		
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	required	3b				

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493135047542

OMB No 1545-0047

SCHEDULE A (Form 990 or 990EZ)

Department of the Treasury

Name of the organization

Internal Revenue Service

Public Charity Status and Public Support Complete if the organization is a section 501(c)(3) organization or a section

4947(a)(1) nonexempt charitable trust.

Attach to Form 990 or Form 990-EZ. See separate instructions. **Employer identification number**

Inspection

PHILLIPS EXETER ACADEMY 02-0222174 Reason for Public Charity Status (All organizations must complete this part.) See instructions The organization is not a private foundation because it is (For lines 1 through 11, check only one box) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 1 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi) (Complete Part II) A community trust described in section 170(b)(1)(A)(vi) (Complete Part II) 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 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 Seesection 509(a)(4). 10 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of 11 one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h Type I **b** Type II Type III - Other By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) If the organization received a written determination from the IRS that it is a Type I, Type II or Type III supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? (i) a person who directly or indirectly controls, either alone or together with persons described in (ii) Yes No and (III) below, the governing body of the the supported organization? 11g(i) (ii) a family member of a person described in (i) above? 11g(ii) (iii) a 35% controlled entity of a person described in (i) or (ii) above? 11g(iii) h Provide the following information about the supported organization(s)

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 9 above or IRC section (see	(iv) Is the organizati col (i) list your gove docume	on in ted in rning nt?	(v) Did you not organizati col (i) of suppor	on in your t?	(vi) Is the organizati col (i) orga in the U	on in anized S ?	(vii) Amount of support
		inst ruct ions))	Yes	No	Yes	No	Yes	No	
Total									

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1) (A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

<u> </u>	ection A. Public Support		and to quanty t			Jaco complete	
	endar year (or fiscal year beginning						
Care	in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not						
	ınclude any "unusual						
	grants ")						
2	Tax revenues levied for the						
	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)						
6	Public Support. Subtract line 5 from						
Ū	line 4						
S	ection B. Total Support		<u> </u>	I I.			
	endar year (or fiscal year beginning						
	ın) >	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
7	A mounts from line 4						
8	Gross income from interest,						
Ū	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar						
	sources						
9	Net income from unrelated						
	business activities, whether or						
	not the business is regularly						
	carried on						
10	Other income Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part IV)						
11	Total support (Add lines 7						
	through 10)						
12	Gross receipts from related activiti	es, etc (See inst	ructions)			12	
13	First Five Years If the Form 990 is t	for the organizati	on's first, second	, thırd, fourth, or	fifth tax year as a	501(c)(3) organı	
	check this box and stop here						►
	-tiC Ct-ti	L'a Carana at B					
<u> </u>	ection C. Computation of Pub Public Support Percentage for 2010			11 column (f))			
	· ·		•	II Column (1))		14	
15	Public Support Percentage for 2009	Schedule A, Pa	rt II, line 14			15	
16a	33 1/3% support test—2010. If the				line 14 is 33 1/3%	or more, check	
_	and stop here. The organization qua						▶ □
b	33 1/3% support test—2009. If the				5a, and line 15 is 3	33 1/3% or more,	- -
	box and stop here. The organization				45.46		►
1/a	10%-facts-and-circumstances test-						
	is 10% or more, and if the organization made						rt a d
	in Part IV how the organization mee	ts the "racts and	circumstances"	test ine organiz	ration qualifies as	a publicly suppo	
L	organization	_2000 If+ba a	anization did not	chack a hay an l	no 12 165 166 -	r 17a and line	► □
D	10%-facts-and-circumstances test- 15 is 10% or more, and if the organ						
	Explain in Part IV how the organization						v
	supported organization	aon meets the 10	acts and circuilis	tances test file	z organizacion qual	mes as a publici	y ▶[¯
18	Private Foundation If the organizati	on did not check	a box on line 13	. 16a. 16b. 17a o	r 17b, check this	box and see	- 1
	instructions	on ala not check	a box on fine 15	, 100, 100, 1700	I by check tills	SON GING SCC	▶ □

organization

Part III Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.) Section A. Public Support Calendar year (or fiscal year beginning (a) 2006 **(b)** 2007 (c) 2008 (d) 2009 (e) 2010 (f) Total ın) 🟲 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose Gross receipts from activities that are not an unrelated trade or business under section 513 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 5 7a Amounts included on lines 1, 2, and 3 received from disqualified Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year c Add lines 7a and 7b Public Support (Subtract line 7c from line 6) Section B. Total Support Calendar year (or fiscal year beginning (a) 2006 **(b)** 2007 (c) 2008 (d) 2009 (e) 2010 (f) Total in) 9 Amounts from line 6 Gross income from interest, 10a dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b C Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include 12 gain or loss from the sale of capital assets (Explain in Part IV) Total support (Add lines 9, 10c, 11 and 12) First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage Public Support Percentage for 2010 (line 8 column (f) divided by line 13 column (f)) 15 16 Public support percentage from 2009 Schedule A, Part III, line 15 16 Section D. Computation of Investment Income Percentage Investment income percentage for **2010** (line 10c column (f) divided by line 13 column (f)) 17 **17** Investment income percentage from 2009 Schedule A, Part III, line 17 18 18 19a 33 1/3% support tests—2010. If the organization did not check the box on line 14, and line 15 is more than 33 1/3% and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported

33 1/3% support tests-2009. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line

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

▶□

Part IV

Supplemental Information. Supplemental Information. Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).

Schedule A (Form 990 or 990-EZ) 2010

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

DLN: 93493135047542

OMB No 1545-0047

Open to Public

SCHEDULE C

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

For Organizations Exempt From Income Tax Under section 501(c) and section 527 ► Complete if the organization is described below.

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

Political Campaign and Lobbying Activities

Inspection

If the organization answered "Yes," to Form 990, Part IV, Line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities),	,
then	
0 504/ \(\text{\tinit}\text{\tinit}\\ \text{\tinit}\\ \text{\text{\text{\text{\text{\text{\text{\text{\text{\tinit}\\ \text{\text{\text{\text{\text{\text{\text{\text{\text{\tinit}\\ \text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\tinit}\xi}\\ \text{\text{\text{\text{\text{\text{\tinit}\xi{\text{\tinit}\xi{\text{\text{\text{\text{\text{\text{\text{\text{\tinit}\xi{\text{\texi}\tint{\text{\text{\text{\text{\text{\text{\text{\text{\tinit}\tinithtint{\text{\text{\tinithter{\text{\text{\texi}\text{\text{\text{\text{\text{\text{\text{\texi}\tint{\text{\text{\tin}\tint{\tinithtint{\text{\tin}\tinitht{\text{\tinit\tinit{\tinit{	

- Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C

organization answered "Yellon 501(c)(3) organizations that ion 501(c)(3) organizations that organization answered "Yellon by the control of the control organization answered "Yellon by the control organization and the control organization	have filed Form 5768 (election under have NOT filed Form 5768 (election s," to Form 990, Part IV, Line 5 (F	er section 501(h)) under section 501	Complete Part II-A Do (h)) Complete Part II	not co -B Do	omplete Part II-B not complete Part II-A
e of the organization	zacione completo i art iii		Emplo	yerıde	ntıfıcatıon number
IPS EXETER ACADEMY			02-02	22174	
I-A Complete if the or	ganization is exempt under	section 501(
Provide a description of the ord	ganization's direct and indirect polit	ical campaign ac	civities in Part IV		
•	,			F	\$
					т
		_			
·	·			•	\$
			n 4955	•	\$
If the organization incurred a s	ection 4955 tax, did it file Form 47	20 for this year?			☐ Yes ☐ No
Was a correction made?					☐ Yes ☐ No
•			•		1(c)(3).
				5 F	\$
	rganization's funds contributed to c	ther organization	s for section 527	۰	\$
Total exempt function expendi	tures Add lines 1 and 2 Enter here	and on Form 112	0-POL, line 17b	 - -	\$
Did the filing organization file F	Form 1120-POL for this year?				☐ Yes ☐ No
organization made payments f amount of political contribution	For each organization listed, enter t ns received that were promptly and	he amount paid fr directly delivered	om the filing organiz to a separate politi	ation's cal org	funds Also enter the anization, such as a
(a) Name	(b) Address	(c) EIN	filing organizat	ıon's	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-
		1	1		
	cion 501(c)(3) organizations that cion 501(c)(3) organizations that cion 501(c)(3) organizations that organization answered "Yestion 501(c)(4), (5), or (6) organization in the organization in the organization in the organization in the organization of the organization of the organization of the organization of the organization incurred as in the organization in the filing of exempt function activities. Total exempt function expenditude in the filing organization file in the organization made payments in the organization made payments in the organization made payments in the organization organization organization in the organization organizatio	tion 501(c)(3) organizations that have filed Form 5768 (election under ion 501(c)(3) organizations that have NOT filed Form 5768 (election organization answered "Yes," to Form 990, Part IV, Line 5 (Filed Form 501(c)(4), (5), or (6) organizations. Complete Part III lie of the organization IPS EXETER ACADEMY I—A Complete if the organization is exempt under Provide a description of the organization's direct and indirect political expenditures. Volunteer hours I—B Complete if the organization is exempt under Enter the amount of any excise tax incurred by the organization under the organization incurred a section 4955 tax, did it file Form 47 was a correction made? If "Yes," describe in Part IV I—C Complete if the organization is exempt under Enter the amount of the filing organization's funds contributed to dexempt function activities Total exempt function expenditures Add lines 1 and 2 Enter here Did the filing organization file Form 1120-POL for this year? Enter the names, addresses and employer identification number (in organization made payments. For each organization listed, enter the amount of political contributions received that were promptly and separate segregated fund or a political action committee (PAC). I	tion 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) organizations that have NOT filed Form 5768 (election under section 501 organization answered "Yes," to Form 990, Part IV, Line 5 (Proxy Tax) or Form 100 501(c)(4), (5), or (6) organizations Complete Part III e of the organization is exempt under section 501(e) of the organization of the organization is exempt under section 501(e) organization of the organization is exempt under section 501(e) organization of the organization is exempt under section 501(e) organization of the organization is exempt under section 501(e) organization expenditures Volunteer hours I-B Complete if the organization is exempt under section 501(e) organization under section 4955(e) organization under section 4955(e) organization under section 4955(e) organization incurred a section 4955 tax, did it file Form 4720 for this year? Was a correction made? If "Yes," describe in Part IV I-C Complete if the organization is exempt under section 501(e) organization directly expended by the filing organization for section 501(e) organization activities Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 112 Did the filing organization file Form 1120-POL for this year? Enter the names, addresses and employer identification number (EIN) of all section organization made payments. For each organization listed, enter the amount paid for amount of political contributions received that were promptly and directly delivered separate segregated fund or a political action committee (PAC) If additional space separate segregated fund or a political action committee (PAC) If additional space segmants are segregated fund or a political action committee (PAC) If additional space segmants are segregated fund or a political action committee (PAC) If additional space segmants are segmants.	tion 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Doino 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II organization answered "Yes," to Form 990, Part IV, Line 5 (Proxy Tax) or Form 990-EZ, Part V, I is of 501(c)(4), (5), or (6) organizations Complete Part III e of the organization Be file organization of the organization is exempt under section 501(c) or is a section of the organization of the organization is exempt under section 501(c) or is a section of the organization is exempt under section 501(c) (3). Enter the amount of any excise tax incurred by the organization under section 4955 Enter the amount of any excise tax incurred by organization managers under section 4955 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? Was a correction made? If "Yes," describe in Part IV I-C Complete if the organization is exempt under section 501(c) except section for the amount of the filing organization is exempt under section 501(c) except section for the amount of the filing organization is exempt function activities Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b Did the filing organization file Form 1120-POL for this year? Enter the names, addresses and employer identification number (EIN) of all section 527 political organization made payments. For each organization listed, enter the amount paid from the filing organization made payments. For each organization listed, enter the amount paid from the filing organization for section forms the filing organization forms the filing organization forms the filing organization committee (PAC) If additional space is needed, provide	Employer Ide 195 EXETER ACADEMY 1-A Complete if the organization is exempt under section 501(c) or is a section 52. Provide a description of the organization's direct and indirect political campaign activities in Part IV Political expenditures Volunteer hours 1-B Complete if the organization is exempt under section 501(c)(3). Enter the amount of any excise tax incurred by the organization under section 4955 Enter the amount of any excise tax incurred by organization managers under section 4955 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? Was a correction made? If "Yes," describe in Part IV 1-C Complete if the organization is exempt under section 501(c) except section 50 Enter the amount directly expended by the filing organization for section 527 exempt function activities Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b Did the filing organization file Form 1120-POL for this year? Enter the names, addresses and employer identification number (EIN) of all section 527 political organization organization made payments For each organization listed, enter the amount paid from the filing organization's separate segregated fund or a political action committee (PAC) If additional space is needed, provide informs separate segregated fund or a political action committee (PAC) If additional space is needed, provide informs

			funds If none, enter -0-	directly delivered to a separate political organization If none, enter -0-
For Panerwork Reduction Act Notice Se	e the Instructions for Form 990 or 990	- F7 Ca	+ No FOORAC Cohodula C (F	000 av 000 EZ\ 2010

Р	art II-A Complete if the organization under section 501(h)).	is exempt under section 501(c)(3)	and filed Form 5768	(election
	Check If the filing organization belongs to a Check If the filing organization checked bo	n affiliated group x A and "limited control" provisions apply		
	Limits on Lobbying E (The term "expenditures" means ar		(a) Filing O rganization's Totals	(b) Affiliated Group Totals
1a	Total lobbying expenditures to influence public o	pinion (grass roots lobbying)		
b	Total lobbying expenditures to influence a legisl	ative body (direct lobbying)		
C	Total lobbying expenditures (add lines 1a and 1	o)		
d	O ther exempt purpose expenditures			
е	Total exempt purpose expenditures (add lines 1	c and 1d)		
f	Lobbying nontaxable amount Enter the amount to columns	rom the following table in both		
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:		
	Not over \$500,000	20% of the amount on line 1e		
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000		
	Over \$17,000,000	\$1,000,000		
	Grassroots nontaxable amount (enter 25% of lir	ne 1f)		
h	Subtract line 1g from line 1a If zero or less, ent	er -0 -		
i	Subtract line 1f from line 1c If zero or less, ente	er - 0 -		
j	If there is an amount other than zero on either lii section 4911 tax for this year?	ne 1h or line 1i, did the organization file Form	4720 reporting	┌ Yes ┌ No

4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f on page 4.)

	Lobbying Expendit	ures During 4	4-Year Avera	ging Period		
	Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) Total
2a	Lobbying non-taxable amount					
b	Lobbying ceiling amount (150% of line 2a, column(e))					
c	Total lobbying expenditures					
d	Grassroots non-taxable amount					
e	Grassroots ceiling amount (150% of line 2d, column (e))					
f	Grassroots lobbying expenditures					

	,		. 490	
Part II-B	Complete if the organization is exempt under section $501(c)(3)$ and has (election under section $501(h)$).	NOT filed Fo	rm 5768	
	(Ciccuon ander section sortin)).			
		(2)	(h)	

		(a)		(b)
		Yes	No	Amount
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of			
а	Volunteers?		No	
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?		No	
C	Media advertisements?		Νo	
d	Mailings to members, legislators, or the public?		No	
e	Publications, or published or broadcast statements?		Νo	
f	Grants to other organizations for lobbying purposes?		Νo	
g	Direct contact with legislators, their staffs, government officials, or a legislative body?		No	
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		Νo	
i	Other activities? If "Yes," describe in Part IV	Yes		40,418
j	Total lines 1c through 1i			40,418
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		No	
b	If "Yes," enter the amount of any tax incurred under section 4912			
C	If "Yes," enter the amount of any tax incurred by organization managers under section 4912		ľ	
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			
Dai	+ TII-A. Complete if the organization is exempt under section $E01(c)(A)$ section	E01/6	\/E\ 0	r coction

Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

			Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?	1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?	2		
3	Did the organization agree to carryover lobbying and political expenditures from the prior year?	3		

art III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, line 3 is answered "Yes".

2	Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
а	Current year	2a	
b	Carryover from last year	2b	
C	Total	2c	
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess		

Taxable amount of lobbying and political expenditures (see instructions) Part IV Supplemental Information

political expenditure next year?

Dues, assessments and similar amounts from members

Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, and Part II-B, line 1i Also, complete this part for any additional information

Identifier	Return Reference	Explanation
LOBBYING ACTIVITIES		PHILLIPS EXETER ACADEMY IS A MEMBER OF NAIS, NACUFS, ISANNE, NACUBO, CASE, THE NE AND AMERICAN ASSOCIATION OF SCHOOLS & COLLEGES, THE NATIONAL BUSINESS OFFICERS ASSOCIATION, ABOPS, AHISA, AISNE, APPA, INTERNATIONAL ASSOCIATION OF CHIEFS OF POLICE, SOCIETY FOR COLLEGES & UNIVERSITIES, A BETTER CHANCE, SSATB, NACAC, COLLEGE BOARD, NAFSA & NEDRA THESE ORGANIZATIONS MAY USE A PORTION OF MEMBERSHIP DUES TO LOBBY ON BEHALF OF THEIR MEMBERS TOTAL DUES PAID TO THESE ORGANIZATIONS FROM 7/1/10 TO 6/30/11 WAS \$40,418 THE PORTION OF MEMBERSHIP DUES ALLOCATED TO LOBBYING ACTIVITIES BY THESE ORGANIZATIONS IS NOT DETERMINABLE

1

4

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

DLN: 93493135047542

OMB No 1545-0047

Open to Public

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.

emal R	evenue Service	orm 990. ► See separate instructions.			Inspec	tion
	e of the organization PS EXETER ACADEMY		Emp	loyer ident if ica	tion number	er
FIIILL	FS EALTER ACADEPT		02-	0222174		
Par			unds	or Accounts.	. Comple	te if the
	organization answered "Yes" to Form 99	90, Part IV, line 6. (a) Donor advised funds		(h) Funda and of	thorogon	nto
7	otal number at end of year	(a) Donor advised funds	'	(b) Funds and of	iller accou	111.5
	ggregate contributions to (during year)					
	ggregate grants from (during year)					
	ggregate value at end of year					
;	Old the organization inform all donors and donor advi unds are the organization's property, subject to the	<u> </u>	or adv	ısed	┌ Yes	┌ No
ı	Old the organization inform all grantees, donors, and used only for charitable purposes and not for the ben conferring impermissible private benefit	efit of the donor or donor advisor, or for ar	ny othe	er purpose	┌ Yes	┌ No
art	Conservation Easements. Complete	if the organization answered "Yes" to	o Forn	<u>n 990, Part IV</u>	, lıne 7.	
	Preservation of land for public use (e g , recreating Protection of natural habitat Preservation of open space Complete lines 2a-2d if the organization held a qual easement on the last day of the tax year	Preservation of a c	ertifie	d historic struct	ure	
		-		Held at the	End of the	Year
_	Fotal number of conservation easements		2a			
	Total acreage restricted by conservation easements	-	2b			
_	Number of conservation easements on a certified his	` ′	2c			
	Number of conservation easements included in (c) a		2d			
1	Number of conservation easements modified, transfe the taxable year - Number of states where property subject to conserva		a by tr	ie organization (iuring	
	Does the organization have a written policy regarding enforcement of the conservation easements it holds	g the periodic monitoring, inspection, hand	— dling of	violations, and	┌ Yes	┌ No
:	Staff and volunteer hours devoted to monitoring, insp	pecting and enforcing conservation easem	ents d	uring the year 🕨	-	
	Amount of expenses incurred in monitoring, inspecti	ng, and enforcing conservation easements	durin	g the year 🟲 \$ _		
	Does each conservation easement reported on line 2 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)?	2(d) above satisfy the requirements of sec	tion		┌ Yes	┌ No
	n Part XIV, describe how the organization reports coalance sheet, and include, if applicable, the text of the organization's accounting for conservation easer	the footnote to the organization's financial				
art	Organizations Maintaining Collection Complete if the organization answered	ons of Art, Historical Treasures, ("Yes" to Form 990, Part IV, line 8.	or Ot	her Similar <i>I</i>	Assets.	
	f the organization elected, as permitted under SFAS art, historical treasures, or other similar assets held provide, in Part XIV, the text of the footnote to its fir	for public exhibition, education or research	h in fu			≘,
	f the organization elected, as permitted under SFAS historical treasures, or other similar assets held for provide the following amounts relating to these items	public exhibition, education, or research ir				
	(i) Revenues included in Form 990, Part VIII, line 1			► \$		
	(ii) Assets included in Form 990, Part X			► \$		
:	f the organization received or held works of art, histological amounts required to be reported under SFA		r finan			
а	Revenues included in Form 990, Part VIII, line 1			► \$		

b Assets included in Form 990, Part X

Par	Organizations Maintaining Co	llections of Art,	Histo	rical Tre	asures, or O	ther	Similar A	sset	s (co	ntınued)
3	Using the organization's accession and other items (check all that apply)	records, check any	of the f				se of its collec	tion		
а	Public exhibition		d [_ Loan or	exchange progr	ams				
ь	Scholarly research		е Г	Other						
С	✓ Preservation for future generations									
4	Provide a description of the organization's co Part XIV	llections and explair	n how th	ney further	the organization	's ex	empt purpose	ın		
5	During the year, did the organization solicit o assets to be sold to raise funds rather than t						ılar	┌ ʏ	es	√ No
Par	TEXT Escrow and Custodial Arrange Part IV, line 9, or reported an am					l "Ye	es" to Form	990,		
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?	ian or other intermed	lary fo	r contributi	ons or other ass	ets n	ot	┌ ¥	es	┌ No
b	If "Yes," explain the arrangement in Part XIV	and complete the fo	llowing	g table						
_					-	4 -	A	mour	t	
c d	Beginning balance				_	1c 1d				
u e	Additions during the year					1a 1e				
f	Distributions during the year Ending balance				-	1f				
2a	Did the organization include an amount on Fo	rm 990 Part X line	212		L	<u> </u>				
	If "Yes," explain the arrangement in Part XIV		21.					, .	C3	, 140
	rt V Endowment Funds. Complete i		answe	ered "Yes'	' to Form 990.	Pari	t IV. line 10			
		(a)Current Year		nor Year	(c)Two Years Back		(d)Three Years		Four Y	ears Back
1a	Beginning of year balance	936,598,421		916,995,589	1,101,532,1	86	Back	+		
b	Contributions	12,798,975		3,911,704	23,008,7	_		+		
c	Investment earnings or losses	137,016,912		55,273,508	-164,670,2	38				
d	Grants or scholarships	14,835,919		14,616,377		\dashv		+		
e	Other expenditures for facilities and programs	22,350,028		24,731,868	42,638,6	49				
f	Administrative expenses	248,352		234,135	236,4	26				
g	End of year balance	1,048,980,009		936,598,421	916,995,5	89				
2	Provide the estimated percentage of the year	end balance held as	;							
а	Board designated or quasi-endowment 🕨	14 000 %								
b	Permanent endowment ► 31 000 %									
С	Term endowment ► 55 000 %									
3a	Are there endowment funds not in the posses	sion of the organizat	on tha	it are held a	and administered	fort	the	_		
	organization by						_		Yes	No
	(i) unrelated organizations					•	<u> </u>	`	Yes Yes	
b	(ii) related organizations					• •	· · · -		Yes	
4	Describe in Part XIV the intended uses of the	· · · · · · · · · · · · · · · · · · ·				-	· · · <u>L</u>			
Par	t VI Investments—Land, Buildings	, and Equipmen	t. See	Form 990	0, Part X, line	10.				
	Description of investment			a) Cost or oth			(c) Accumulated depreciation	d (d) Boo	ok value
1a	Land		$\neg \uparrow$		2,557,	694		\top		2,557,694
b	Buildings				253,300,	737	81,438,1	54	17:	1,862,583
С	Leasehold improvements		.							
d	Equipment		. [20,730,	633	17,337,17	77		3,393,456
	Other	<u></u>			6,929,	778			(5,929,778
Tota	I. Add lines 1a-1e (Column (d) should equal Fo	rm 990, Part X, columi	n (B), lı	ne 10(c).)			•		184	1,743,511
							Schedule	D (Fo	rm 9	90) 2010

Part VIII Investments—Other Securities. See F	orm 990, Part X, line 12		
(a) Description of security or category (including name of security)	(b) Book value		od of valuation f-year market value
(1)Financial derivatives		0001010110	, your market raide
(2)Closely-held equity interests			
(3)Other			
(A) US EQUITIES	9,622,937		F
(B) GLOBAL EX U S EQUITIES	26,186,390		F
(C) ABSOLUTE RETURN & LONG /SHORT	519,158,923		F
(D) PRIVATE EQUITY & REAL ASSETS	236,206,207		F
(E) OTHER	8,111,372		F
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)	799,285,829		
Part VIII Investments—Program Related. See			od of valuation
(a) Description of investment type	(b) Book value		f-year market value
Part IX Other Assets. See Form 990, Part X, col (B) line 13)	0.15		
(a) Description			(b) Book value
			. ,
Total. (Column (b) should equal Form 990, Part X, col.(B) line 15			
Part X Other Liabilities. See Form 990, Part X			
1 (a) Description of Liability	(b) A mount		
Federal Income Taxes	0 772 006		
ANNUITIES & DEFERRED GIVING AR ASSET RETIREMENT OBLIGATION	29,778,906 4,193,899		
BOND INTEREST RATE SWAP	6,750,517		
FUNDS FOR STUDENT ORGANIZATION	263,722		
PENSION & OTHER EMPLOYMENT RET	11,812,531		
Total. (Column (b) should equal Form 990, Part X, col (B) line 25)	52,799,575		
	, , -		

Pell	Reconciliation of Change in Net Assets from Form 990 to Financial Statemen	113	
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	94,471,790
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	98,336,389
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	-3,864,599
4	Net unrealized gains (losses) on investments	4	122,266,490
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	3,902,503
9	Total adjustments (net) Add lines 4 - 8	9	126,168,993
10	Excess or (deficit) for the year per financial statements. Combine lines 3 and 9	10	122,304,394
	t XII Reconciliation of Revenue per Audited Financial Statements With Revenue p		
1	Total revenue, gains, and other support per audited financial statements	1	217,384,261
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12	_	
a	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	124,017,453
3	Subtract line 2e from line 1	3	93,366,808
4	Amounts 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		
ь	Other (Describe in Part XIV)		
c	Add lines 4a and 4b	4c	1,104,982
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	94,471,790
Part	Reconciliation of Expenses per Audited Financial Statements With Expenses	per Re	
1	Total expenses and losses per audited financial statements	1	88,099,983
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities		
b	Prior year adjustments		
c	Other losses		
d	Other (Describe in Part XIV)		
e	Add lines 2a through 2d	2e	-9,482,250
3	Subtract line 2e from line 1	3	97,582,233
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)		
c	Add lines 4a and 4b	4c	754,156
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5	98,336,389
- D	t XIV Supplemental Information		

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								
Identifier	Return Reference	Explanation						
SCHEDULE D - SUPPLEMENTAL INFORMATION	FORM 990, SCHEDULE D, PART III, LINE 1A	THE ACADEMY'S COLLECTIONS INCLUDE WORKS OF ART, LITERARY WORKS, HISTORICAL TREASURES, AND ARTIFACTS THESE COLLECTIONS ARE PROTECTED AND PRESERVED FOR PUBLIC EXHIBITION, EDUCATION, RESEARCH, AND FURTHERANCE OF PUBLIC SERVICE THE COLLECTIONS, WHICH WERE ACQUIRED THROUGH PURCHASES AND CONTRIBUTIONS SINCE THE ACADEMY'S INCEPTION, ARE NOT RECOGNIZED AS ASSETS IN THE STATEMENT OF FINANCIAL POSITION						
FORM 990, SCHEDULE D, PART III, LINE 4		THE ACADEMY HAS BOOKS, PAINTINGS AND OTHER ITEMS WITH HISTORICAL SIGNIFICANCE THAT ARE HELD FOR STUDY AND OBSERVATION BY OUR STUDENTS AND FACULTY THESE OBJECTS ARE PRESERVED SO THAT THEY MAY PROVIDE EDUCATIONAL EXPERIENCE TO FUTURE GENERATIONS OF STUDENTS AND ADULTS IN THE CAMPUS COMMUNITY						
FORM 990, SCHEDULE D, PART V, LINE 4		PHILLIPS EXETER ACADEMY'S ENDOWED FUNDS ARE INVESTED INTO PERPETUITY AND THE INCOME IS USED TO FUND ACADEMY PROGRAMS THE FUNDS ARE INVESTED FOR LONG TERM GROWTH SO THAT CURRENT AND FUTURE GENERATIONS OF STUDENTS WILL RECEIVE BENEFIT FROM THE FUNDS						
FORM 990, SCHEDULE D, PART X - FIN 48		THE ACADEMY IS A TAX-EXEMPT ORGANIZATION ACCORDING TO THE INTERNAL REVENUE CODE SECTION 501(C)(3) THE ACADEMY FOLLOWS GUIDANCE FOR ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES UNDER THIS GUIDANCE, THE ACADEMY MAY RECOGNIZE ONLY THAT PORTION OF AN UNCERTAIN TAX POSITION THAT IS "MORE LIKELY THAN NOT" TO BE SUSTAINED UNDER EXAMINATION BY TAX AUTHORITIES						
FORM 990, SCHEDULE D, PART XI, LINE 8		OTHER CHANGES IN NET ASSETS CHANGE IN VALUE IN FUNDS HELD FOR DEFERRED GIVING \$3,310,442 PENSION RELATED CHARGES OTHER THAN NET PERIODIC PENSION COST \$4,434,433 INTEREST RATE SWAP ADJUSTMENT \$2,656,612 OP/NONOP TRANSFERS (\$6,985,891) MISCELLANEOUS \$486,907 TOTAL \$3,902,503						
FORM 990, SCHEDULE D, PART XII, LINE 2D	AMOUNTS INCLUDED ON LINE 1, BUT NOT FORM 990, PART VIII, LINE 12	OTHER INVESTMENT EXPENSES (\$ 2,391,203) COST OF SALES NETTED AGAINST GROSS REVENUE \$ 380,536 ASSET RETIREMENT OBLIGATION ADJUSTMENT \$ 75,763 CHANGE IN VALUE IN FUNDS HELD FOR DEFERRED GIVING \$ 3,310,442 PV ADJUSTMENTS FOR PHASED RETIREMENT PLAN \$ 375,425						
FORM 990, SCHEDULE D, PART XII, LINE 4B	AMOUNTS INCLUDED ON PART VIII, LINE 12, BUT NOT ON LINE 1	OTHER SUMMER FINANCIAL AID NETTED AGAINST TUITION \$ 1,104,982						
FORM 990, SCHEDULE D, PART XIII, LINE 2D	AMOUNTS INCLUDED ON LINE 1, BUT NOT ON FORM 990, PART IX,	PENSION RELATED CHARGES OTHER THAN NET PERIODIC PENSION COST (\$4,434,433) INTEREST RATE SWAP ADJUSTMENT (\$2,656,612) INVESTMENT EXPENSES (\$2,391,205) TOTAL (\$9,482,250)						
FORM 990, SCHEDULE D, PART XIII, LINE 4B		OTHER COST OF SALES FOR AUX ENTITIES \$ (380,536) SUMMER FINANCIAL AID NETTED AGAINST TUITION \$ 1,104,982 STUDENT LOAN, NET OF BAD DEBTS \$ 29,710						

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493135047542

OMB No 1545-0047

2010

Open to Public

SCHEDULE E

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service ►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.

Schools

Name of the organization PHILLIPS EXETER ACADEMY

Employer identification number

02-0222174

Pa	rt I		YES	NO
1	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?	1	Yes	
2	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	2	Yes	
3	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe If "No," please explain If you need more space use Part II	3	Yes	
		<u>-</u>		
4	Does the organization maintain the following?			
	Records indicating the racial composition of the student body, faculty, and administrative staff?	4a	Yes	
	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 Part II			
5 a	Does the organization discriminate by race in any way with respect to Students' rights or privileges?	5a		N o_
b	Admissions policies?	5b		No
c	Employment of faculty or administrative staff?	5c		No
d	Scholarships or other financial assistance?	5d		No
е	Educational policies?	5e		No
f	Use of facilities?	5f		No
g	Athletic programs?	5g		No
h	Other extracurricular activities? If you answered "Yes" to any of the above, please explain If you need more space, use Part II	5h		No
		-		
	Does the organization receive any financial aid or assistance from a governmental agency?	6a	Yes	
b	Has the organization's right to such aid ever been revoked or suspended?	6b		No
7	If you answered "Yes" to either line 6a or line 6b, explain on Part II Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05			
	of Rev Proc 75-50, 1975-2 C B 587, covering racial nondiscrimination? If "No," explain on Part II	7	Yes	

Part II Supplemental Information

Complete this part to provide the explanations required by Part I, lines 3, 4d, 5h, 6b, and 7, as applicable. Also complete this part to provide any other additional information (see instructions)

ldentifier	Return Reference	Explanation
RACIALLY NONDISCRIMINATORY POLICY	SCHEDULE E, PART I, LINE 3	THE POLICY IS EXPLAINED TO ALL CANDIDATES UPON APPLYING TO THE ACADEMY AND TO GUIDANCE COUNSELORS OF SCHOOLS THROUGHOUT THE COUNTRY BY MEANS OF THE ACADEMY APPLICATION FORM AND WEBSITE
FINANCIAL AID OR ASSISTANCE	SCHEDULE E, PART I, LINE 6A	PHILLIPS EXETER ACADEMY RECEIVES FEDERAL FUNDS THROUGH THE STATE OF NEW HAMPSHIRE DEPARTMENT OF EDUCATION, BUREAU OF NUTRITION FOR REIMBURSEMENTS FOR A PORTION OF OUR BREAKFAST AND LUNCH FOOD PROGRAM IN 2011, THE ACADEMY RECEIVED USDA FOOD COMMODITIES AND \$76,437 IN REIMBURSEMENTS

Schedule E (Form 990 or 990-EZ) 2010

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493135047542

OMB No 1545-0047

Open to Public

Inspection

SCHEDULE F (Form 990)

Department of the Treasury Internal Revenue Service

to Part I

c Totals (add lines 3a and 3b)

► Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16.

▶ Attach to Form 990. ▶ See separate instructions.

Statement of Activities Outside the United States

Name of the organization

Employer identification number

Ιİ	LIPS EXETER ACADEMY							
					02-0222174			
•	rt I General Informatio "Yes" to Form 990, Pa			he United States. C	omplete if the organ	ization answered		
For grantmakers. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?								
	For grantmakers. Describe in Pa United States	art V the organiz	zatıon's procedu	res for monitoring the us	e of grant funds outside	the		
	Activites per Region (Use Part	V ıf addıtıonal s	pace is needed)				
	(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region of independent contractors	(d) Activities conducted in region (by type) (e g ,	(e) If activity listed in (d) is program service, describe specific type of service(s) in region	a (f) Total expenditures for region/investments in region		
	Europe (Including Iceland and Greenland)	0	5	Program Services	STUDY PROGRAM			
	East Asia and the Pacific	0	0	Program Services	STUDY PROGRAM			
	Europe (Including Iceland and Greenland)	0	0	Program Services	STUDENT RECRUITING			
	East Asia and the Pacific	0	0	Program Services	STUDENT RECRUITING			
	Middle East and North Africa	0	0	Program Services	STUDENT RECRUITING			
	North America	0	0	Program Services	STUDENT RECRUITING			
	Russia and the Newly Independent States	0	0	Program Services	STUDENT RECRUITING			
	Europe (Including Iceland and Greenland)	0	0	Fundraising				
	East Asia and the Pacific	0	0	Fundraising				
	Europe (Including Iceland and Greenland)	0	0	Investments		15,350,11		
	Central America and the Caribbean	0	0	Investments		235,849,19		
	Sub-total	0	5			251,199,31		
٥	Total from continuation sheets							

251,199,310

Par	Part IV, I	line 15, for any					plete if the organiza received more thai		
	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
	_								
2	Enter total nur tax-exempt by	mber of recipie y the IRS, or fo	nt organizations lis or which the grante	ted above that are e or counsel has pro	recognized as chari ovided a section 50	ties by the foreign o 1(c)(3) equivalency	country, recognized letter	as . •	
3	Enter total nur	mber of other o	organizations or en	tities					(Form 990) 2010

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16. Use Part V if additional space is needed.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) A mount of cash grant	(e) Manner of cash disbursement	(f) A mount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
			1				
			i				
			1				
			 I		,		
					,		
,			·		,		
,			 I		1		
-			 I		,		
			ı		,		

Part IV Foreign Forms

1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926 (see instructions for Form 926)	굣	Yes	Г	Νo
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520 and/or Form 3520-A. (see instructions for Forms 3520 and 3520-A)	⊽	Yes	Γ	Νo
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with respect to Certain Foreign Corporations. (see instructions for Form 5471)	্	Yes	Г	No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see instructions for Form 8621)	দ	Yes	Г	No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with respect to Certain Foreign Partnerships. (see instructions for Form 8865)	দ	Yes	Г	No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see instructions for Form 5713).	Г	Yes	~	Νo

Schedule F (Form 990) 2010

Schedule F (Form 990) 2010

Page **5**

Part V Supplemental Information
Complete this part to provide the information (see instructions) required in Part I, line 2, and any additional information.

ldentifier	Return Reference	Explanation
SCHEDULE F, PART I, LINE 3, COLUMN (F)		THE ACADEMY DOES NOT CURRENTLY TRACK FOREIGN EXPENDITURES FOR EACH PROGRAM SEPARATELY THEREFORE, PURSUANT TO IRS GUIDANCE, DISCLOSURE IN THIS COLUMN IS NOT REQUIRED IN THE CURRENT YEAR

Schedule F (Form 990) 2010

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

OMB No 1545-0047

DLN: 93493135047542

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

Department of the Treasury Internal Revenue Service Name of the organization

Schedule I

(Form 990)

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

Inspection Employer identification number

PHILLIPS EXETER ACADEMY							
						02-0222174	
Part I General Information 1 Does the organization maintain the selection criteria used to available.	records to substanti ward the grants or as	ate the amount of the sistance?			the grants or assist	ance, and	F Yes □ I
2 Describe in Part IV the organiz		<u> </u>					
Part II Grants and Other A Form 990, Part IV, lin duplicated if additional	e 21 for any recip	ient that received r	nore than \$5,000. Ch	eck this box if no one	recipient receive	ed more than \$5,000	
1 (a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount 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 gra or assistance
2 Enter total number of section 5		_				· · · · · <u>*</u>	
3 Enter total number of other orga For Privacy Act and Paperwork Reductio				Cat No 50055P			lle I (Form 990) 2010

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
(1) REGULAR SESSION SCHOLARSHIP	534		16,751,930	FMV	TUITION/FEES ASSIST
(2) REGULAR SESSION OTHER AID	534	66,448	828,513	FMV	OTHER FIN ASSIST
(3) SUMMER PROGRAM SCHOLARSHIPS	248		1,121,982	FMV	TUITION/FEES ASSIST
(4) SUMMER PROGRAM - OTHER AID	46		7,262	FMV	OTHER FINANCIAL ASST

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

Identifier	Return Reference	Explanation
MONITORING GRANT FUNDS	SCHEDULE I, PART I, LINE 2	SCHOLARSHIPS AND MOST FINANCIAL ASSISTANCE CREDITS ARE NON CASH AND ARE APPLIED DIRECTLY TO STUDENT ACCOUNTS AT THE ACADEMY ON OCCASION FINANCIAL AID STUDENTS ARE REIMBURSED FOR NECESSARY EXPENSES SUCH AS TRANSPORTATION OR THE COST OF COMPUTER EQUIPMENT DOCUMENTATION EVIDENCING PAYMENT BY THE STUDENT IS REQUIRED BEFORE DISBURSEMENT OF CASH AID IS MADE PHILLIPS EXETER ACADEMY MAINTAINS EXTENSIVE RECORDS TO JUSTIFY BOTH AWARDS AND THE FINANCIAL NEED ELIGIBILITY OF THE RECIPIENTS

Schedule I (Form 990) 2010

Pariet Ouestions Regarding Compensation

DLN: 93493135047542

OMB No 1545-0047

Compensation Information

Schedule J (Form 990)

Department of the Treasury Internal Revenue Service

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

	F Attach to Form 990. F See separate instructions.		
Name of the organization		Employer ident if	ication number
PHILLIPS EXETER ACADEMY			
		02-0222174	

			Yes	Νo
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items			
	First-class or charter travel			
	▼ Travel for companions F Payments for business use of personal residence			
	Tax idemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement orprovision of all the expenses described above? If "No," complete Part III to explain	1b	Yes	
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	2	Yes	
3	Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director Check all that apply			
	Compensation committee			
	☑ Independent compensation consultant ☑ Compensation survey or study			
	Form 990 of other organizations Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organizer or a related organization	ation		
а	Receive a severance payment or change-of-control payment from the organization or a related organization?	4a	Yes	
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b	Yes	
c	Participate in, or receive payment from, an equity-based compensation arrangement?	4 c		Νo
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III			
	Only 501(c)(3) and 501(c)(4) organizations only must complete lines 5-9.			
5	For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of			
а	The organization?	5a		No
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, line $1a$, did the organization pay or accrue any compensation contingent on the net earnings of			
а	The organization?	6a		Νo
b	Any related organization?	6b		No
	If "Yes," to line 6a or 6b, describe in Part III			
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III	7		No
8	Were any amounts reported in Form 990, Part VII, paid or accured pursuant to a contract that was subject to the initial contract exception described in Regs section 53 4958-4(a)(3)? If "Yes," describe in Part III	8		No
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulation section 53 4958-6(c)?	s 9		

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

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

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

(A) Name		(B) Breakdown of	f W-2 and/or 1099-MIS	SC compensation			(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
(1) WILLIAM C DAVISON	(I) (II)	196,264 0	0	1	23,934	14,915	235,971)
(2) EDWARD W PROBERT	(1) (11)	171,124 0	0	690	19,664	49,553	241,031 0 0)
(3) THOMAS E HASSAN	(1) (11)	300,382	0	1,128	29,400	91,752 0	2 422,662 0 0)
(4) JAY H MARTIN	(1) (11)	145,926 0	0	1	18,135	16,964 0	4 181,883 0 0)
(5) JULIE QUINN	(1) (11)	141,573 0	0	1 -/	17,139 0 0	8,491 0	1 168,721 0 0)
(6) TYLER C TINGLEY	(1) (11)	0	0	300,400	25,694	10,310	336,404	300,40
(7) JOSEPH FELLOWS	(1) (11)	108,867 0	0	2,583	13,596	9,460 0	134,506)
(8) JAMES M THEISEN	(I) (II)	250,359 0	0	3,571	29,400	16,180 0	299,510	
(9)	<u> </u>		<u> </u>					
(10)		1	1					
(11)	+		1					
(12)			1					
(13)	+							
(14)	+						†	
(15)	+	 			+		+	
(16)	+	 			 			

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
	PART I, LINE	THE PRINCIPAL OF THE SCHOOL MAY, ON OCCASION, WHILE TRAVELING, BE ACCOMPANIED BY HIS SPOUSE FOR BUSINESS PURPOSES THE PRINCIPAL IS REQUIRED TO LIVE ON CAMPUS AS A CONDITION OF EMPLOYMENT AND FOR THE CONVENIENCE OF THE EMPLOYER, TO PARTICIPATE IN ACTIVITIES WITH THE STUDENTS AND TO CONDUCT BUSINESS OUTSIDE NORMAL BUSINESS HOURS
SCHEDULE J, PART I, LINE 4A		IN CONNECTION WITH HIS VACATING THE OFFICE OF PRINCIPAL EFFECTIVE JUNE 30, 2009, TYLER TINGLEY BECAME ELIGIBLE FOR A TERMINAL SABBATICAL UNDER THE TERMS OF THE SABBATICAL, HE RECEIVED CERTAIN PAYMENTS DURING THE PERIOD JULY 1, 2009 THROUGH JUNE 30, 2010 A PORTION OF THESE PAYMENTS TOTALING \$214,115 WERE PAID IN 2010 AND ARE REFLECTED IN COLUMN (B) (III) THESE PAYMENTS WERE PREVIOUSLY DISCLOSED ON FORM 990 AND HAVE BEEN INCLUDED IN COLUMN (F) FORMER PRINCIPAL TINGLEY IS ALSO ELIGIBLE FOR CERTAIN ADDITIONAL PAYMENTS AND BENEFITS IN CONNECTION WITH HIS SABBATICAL WHICH ARE REFLECTED IN COLUMNS (B)(III), (C) AND (D)
SCHEDULE J, PART I, LINE 4B		FORMER PRINCIPAL TINGLEY PARTICIPATED IN A SUPPLEMENTAL NONQUALIFIED RETIREMENT PLAN AS DESCRIBED IN IRC SECTION 457(F) EARNINGS ON THIS PLAN WERE PAID TO MR TINGLEY IN JANUARY 2010 THIS AMOUNT IS REPORTED IN COLUMN B (III) THIS AMOUNT WAS PREVIOUSLY DISCLOSED ON FORM 990 AND HAS BEEN INCLUDED IN COLUMN (F)

Schedule J (Form 990) 2010

Schedule K

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 O (Form 990).

► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047

2010

DLN: 93493135047542

Open to Public Inspection

Internal Revenue Service

Name of the organization

Department of the Treasury

(Form 990)

PHILLIPS EXETER ACADEMY

Employer identification number

02-0222174

	ZEIT G EXETEN NONDETT								0	2-022	2174					
Pa	art I Bond Issues															
	(a) Issuer Name	(b) Issuer EIN	(c) CUSIP #	(d) Date Issued	(e) Issue Prio	ce (f)) Description	scription of Purpose		ription of Purpose		feased	Beh	On alf of suer) Pool ancing
									Yes	No	Yes	No	Yes	No		
A	NH HEALTH & EDUCATION FACILITIES AUTHORITY	02-0279866	644614SZ3	09-19-2007	50,000,0		CAPITAL CONSTRUCTION PROJECTS/REFU			X		X		×		
		-	 										↓			
Pa	rt II Proceeds		<u></u>													
		-	-	-	А			В		С		D				
_1	A mount of bonds retired															
2	Amount of bonds legally defea	ased														
3	Total proceeds of issue	5	0,322,058	3												
4	Gross proceeds in reserve fur															
5	Capitalized interest from proceeds															
6	Proceeds in refunding escrow															
7	Issuance costs from proceeds					336,409										
8	Credit enhancement from prod															
9	Working capital expenditures															
10	Capital expenditures from pro	oceeds			2	24,946,437										
11	O ther spent proceeds				2	5,039,212	2									
12	O ther unspent proceeds															
13	Year of substantial completion	∍n			200	8	_									
					Yes	No	Yes	No	Yes		No	Yes	5	No		
14	Were the bonds issued as par				X								\perp			
15	Were the bonds issued as par	rt of an advance refu	unding issue?			Х										
16	Has the final allocation of pro	ceeds been made?			X											
17	Does the organization maintal allocation of proceeds?		and records to sup	port the final	x											
Par	rt IIII Private Business U	<u>Use</u>					1 .	_								
					Yes	No	Yes	B No	Yes	C	No	Yes	D s	No		
					103	110	103	140	1.03	_	.10	1	<u> </u>			

property financed by tax-exempt bonds?

financed property?

Was the organization a partner in a partnership, or a member of an LLC, which owned

Are there any lease arrangements that may result in private business use of bond-

Χ

Par	Private Business Use (Continued)								
			Α	1	В	С		ſ	D
		Yes	No	Yes	No	Yes	No	Yes	No
3a	Are there any management or service contracts that may result in private business use?		Х						
b	Are there any research agreements that may result in private business use of bond-financed property?		Х						
С	Does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts or research agreements relating to the financed property?	Х							
4	Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government		0 %						
5	Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government		0 522 %						
6	Total of lines 4 and 5		0 522 %						
7	Has the organization adopted management practices and procedures to ensure the post-issuance compliance of its tax-exempt bond liabilities?	Х							
D	Author a		-						

Pal	t IV Arbitrage									
		А		В		С		D		
		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?									
	bolid 135ue.		X							
2	Is the bond issue a variable rate issue?	X								
3a	Has the organization or the governmental issuer entered									
	into a hedge with respect to the bond issue?	.,								
		×								
ь	Name of provider	BNY MELLO	V		1					
С	Term of hedge		34 25							
d	Was the hedge superintegrated?									
е	Was a hedge terminated?									
4a	Were gross proceeds invested in a GIC?		X							
Ь	Name of provider									
С	Term of GIC									
d	Was the regulatory safe harbor for establishing the fair market									
	value of the GIC satisfied?									
<u> </u>	Ware and make and make a house deal and a supplicable to the second									
5	Were any gross proceeds invested beyond an available temporary period?		X							
	•									
6	Did the bond issue qualify for an exception to rebate?									
		X								

Part V Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule K (see instructions)

Identifier	Return Reference	Explanation
SEE SCHEDULE O		

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493135047542

Employer identification number

OMB No 1545-0047

Schedule L

(Form 990 or 990-EZ)

Name of the organization

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.

2010

Department of the Treasury Internal Revenue Service Open to Public Inspection

PHILLIPS EXETER ACADEMY							 2-02221	71		
Part I Excess Benefit Tra						organı	zations	only).	.n. 40h	
Complete if the organizat (a) Name of disq			res on Form 990, P	(b) Desc				Part V, I		(c)
1 (,				(b) Desc	. IIption (Yes	
2 Enter the amount of tax impos		ne organ						r .	•	·
section 4958		• 2, abov		e organızatıon .				·		
Part II Loans to and/or										
Complete if the organi		nswered oan to	Yes" on Form 990	, Part IV, line 26			(f)		<u>a</u>	
(a) Name of interested person and purpose	or fro	m the zation?	(c)Original principal amount	(d)Balance due	(e) I defau			(g)Written agreement?		
//	То	From			Yes	No	Yes	No	Yes	No
(1) JAMES M THEISEN HOME MORTGAGE LOAN		х	250,000	65,780		No	Yes		Yes	
Total				65,780		•		•		•
Part III Grants or Assistar Complete if the orga	nce Be Inizatio	nefitti on answ	i ng Interested F vered "Yes" on Fo	'ersons. rm 990, Part IV	, line 2	27.				
(a) Name of interested pers	on	(b	Relationship betwe and the org		son	(c) A m	nount of g	rant or ty	pe of assı	stance
(1)			•	•						21 125
										31,135
		1								

Part IV Business Transactions In Complete if the organization			ne 28a, 28b, or 28c.		
(a) Name of interested person	(b) Relationship between interested person and the	(c) A mount of transaction	(d) Description of transaction	(e) Sha organiz reven	atıon's
	organızatıon			Yes	No

Part V Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule L (see instructions)

Identifier	Return Reference	Explanation
------------	------------------	-------------

Schedule L (Form 990 or 990-EZ) 2010

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

DLN: 93493135047542

OMB No 1545-0047

Open to Public Inspection

SCHEDULE M (Form 990)

Department of the Treasury

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

NonCash Contributions

Internal Revenue Service Name of the organization PHILLIPS EXETER ACADEMY **Employer identification number**

					02-02221/4			
Pa	rt I Types of Property							
		(a) Check if applicable	(b) Number of Contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line	(d Method of determining of amounts		contribut	ion
1	Art—Works of art			19				
2	Art—Historical treasures							
3	Art—Fractional interests							
4	Books and publications	Х		0	N/A			
5	Clothing and household							
000	s							
6	Cars and other vehicles .							
7	Boats and planes							
	Intellectual property							
	Securities—Publicly traded	X	213	2,455,301	FMV			
L O	Securities—Closely held stock							
	Securities—Partnership, LLC, or trust interests .							
	Securities—Miscellaneous							
L3	Qualified conservation contribution—Historic structures							
L 4	Q ualified conservation contribution—O ther							
L 5	Real estate—Residential .							
L6	Real estate—Commercial							
L 7	Real estate—Other							
	Collectibles							
L 9	Food inventory							
20	Drugs and medical supplies							
	Taxidermy							
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts .							
	HOTEL							
	Other \blacktriangleright (RECEPTION)	X	1	0	N/A			
	O ther ►()							
	Other ►()							
	O ther ► ()			<u> </u>				
29	Number of Forms 8283 received by for which the organization complete				29			
			,	g			Yes	No
30a	During the year, did the organization	n receiv	e by contribution any prope	erty reported in Part I, lines	1-28 that it			
	must hold for at least three years f							
	for exempt purposes for the entire					30a		No
ь	If "Yes," describe the arrangement			· · ·	· ·	300		
31	Does the organization have a gift a			review of any non-standard	contributions?	31	Yes	
32a	Does the organization hire or use t	hırd partı	es or related organizations	to solicit, process, or sell	non-cash			
	contributions?					32a		No
b	If "Yes," describe in Part II							
33	If the organization did not report re	venues i	n column (c) for a type of p	roperty for which column (a) is checked,			
	describe in Part II		•	•	•			

Cat No 51227J

Schedule M (Form 990) 2010

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, PART I, LINE 33		THE ACADEMY DOES NOT RECOGNIZE REVENUES FOR GIFTS IN KIND OF THE TYPES LISTED IN PART I OF SCHEDULE M IN 2011, THE ACADEMY RECEIVED GIFTS OF BOOKS AND A HOTEL RECEPTION IN KOREA

Schedule M (Form 990) 2010

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493135047542

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

2010

Open to Public Inspection

Name of the organization
PHILLIPS EXETER ACADEMY

Employer identification number

02-0222174

ldentifier	Return Reference	Explanation
MISSION STATEMENT	FORM 990, PART I, LINE 1 AND PART III, LINE 1	PHILLIPS EXETER ACADEMY, AN INDEPENDENT SECONDARY SCHOOL, CONTINUES THE COMMITMENT TO UNITE GOODNESS AND KNOWLEDGE WITH A TOTAL ENROLLMENT OF MORE THAN 1,000 STUDENTS APPROXIMATELY 80 PERCENT OF WHOM ARE BOARDERS AND 20 PERCENT OF WHOM ARE DAY STUDENTS, THE SCHOOL SEEKS YOUNG PEOPLE WHO COMBINE PROVEN ACADEMIC ABILITY, INTELLECTUAL CURIOSITY, AND TENACITY WITH DECENCY AND GOOD CHARACTER AT THE ACADEMY, EXACTING INQUIRY AND THOUGHTFUL DISCOURSE FOSTER THE LIFE OF THE MIND, INSTRUCTION AND ACTIVITY PROMOTE FITNESS AND HEALTH, AND THE DAILY INTERACTIONS OF A RESIDENTIAL SCHOOL NURTURE INTEGRITY, EMPATHY, AND KINDNESS BECAUSE LEARNING AND GROWTH AT EXETER ARISE FROM EACH INDIVIDUAL'S ENGAGEMENT WITH OTHERS, THE RICHNESS OF EDUCATION REQUIRES DIVERSITY IN ALL ITS DIMENSIONS, STUDENTS AND FACULTY VALUE THE DIFFERENCES THEY BRING TO THE COMMUNITY THEY SHARE. THE CHALLENGES THAT STUDENTS MEET AT EXETER AND THE SUPPORT THEY RECEIVE HAVE A COMMON PURPOSE TO STIMULATE THEIR DEVELOPMENT AS INDIVIDUALS AND AS MEMBERS OF SOCIETY EXETER SEEKS TO GRADUATE YOUNG PEOPLE WHOSE CREATIVITY AND INDEPENDENCE OF THOUGHT SUSTAIN THEIR CONTINUING INQUIRY AND REFLECTION, WHOSE INTEREST IN OTHERS AND THE WORLD AROUND THEM SURPASSES THEIR SELF-CONCERN, AND WHOSE PASSION FOR LEARNING IMPELS THEM BEY OND WHAT THEY ALREADY KNOW

ldentifier	Return Reference	Explanation
PROGRAM SERVICE ACCOMPLISHMENTS	FORM 990, PART III, LINE 4A	PHILLIP EXETER ACADEMY'S PRIMARY PROGRAM SERVICE IS THE EDUCATION OF STUDENTS IN GRADES 9 THROUGH 12, IN A FULLY RESIDENTIAL BOARDING SCHOOL ENVIRONMENT ENROLLMENT FOR 2010-2011 WAS 1,062 THE FOUNDATION OF EXETER'S REGULAR SESSION CURRICULUM CONTINUES TO BE THE TEACHING METHOD MADE POSSIBLE IN 1931 BY THE GENEROSITY OF EDWARD HARKNESS DISCUSSION IN SMALL CLASSES MEETING AROUND SEMINAR TABLES WHERE MAXIMUM STUDENT INVOLVEMENT AND INTERCHANGE ARE BOTH ENCOURAGED AND REQUIRED SINCE 1931, THIS PROCESS HAS CONTINUED WHILE THE CONTENT OF THE CURRICULUM HAS UNDERGONE SEVERAL REVISIONS AS EXETTER HAS SOLIGHT TO BLIED ITS RESPECT FOR TRADITION WITH ITS COMMITMENT TO EDUCATE YOUNG PEOPLE FOR A RAPIDLY CHANGING WORLD THE CURRENT CURRICULUM IS BASED ON TWO FUNDAMENTAL ASSUMPTIONS ABOUT AN EXETTER EDUCATION FIRST, DUE TO INCREASING SPECIALIZATION AT THE COLLEGE LEVEL, EXETTER VIEWS ITS CHARGE AS THE PROVEDING STUDENTS WITH A BROAD, LIBERAL ARTS PROGRAM SECOND, THE ACADEMY BELEVES THE PROCESS OF EDUCATION IS AS IMPORTANT AS ITS CONTENT FACULTY EMPHASIZE NOT MERELY WHAT THEY WANT STUDENTS TO KNOW, BUT ALSO WHAT SORTS OF INDIVIDUALS THEY WANT THEM TO BECOME YOUNG FEORLE WHOSE PASSION FOR LEARNING EXCEEDS WHAT THEY ALREADY KNOW AND WHOSE INTEREST IN OTHERS AND IN THE WORLD SURPASSES THEIR SELF-CONCERN EXETERS SCHOOL YEAR CONSISTS OF THREE TERMS, WHICH ALLOWS EXPANDED ELECTIVE CHOICES AROOSS A RANGE OF DISCIPLINES TO BE COMBINED WITH A FOCUS ON DEPTH OF STUDY IN ADVANCED COURSES IN EACH DEPARTMENT STUDENTS NORMALLY ENROLL IN FIVE COURSES AND PARTICIPATE IN A SPORT EACH TERM THEM TO SECOND WHICH HAS BEEN IN OPERATION SINCE 1961 WELCOMES TO CAMPUS SOME 700 STUDENTS FOR FIVE WEEKS OF ACADEMY'S SUMMER SCHOOL EVERY SUMMER PHILLIPS EXETER ACADEMY'S SUMMER SCHOOL EVERY SUMMER PHILLIPS EXETER ACADEMY'S SUMMER SCHOOL EVERY SUMMER PHILLIPS EXETER ACADEMY'S THE ACADEMY'S SUMMER SCHOOL EVERY SUMMER PHILLIPS EXETER ACADEMY'S SUMMER SCHOOL WHICH HAS BEEN IN OPERATION SINCE 1961 WELCOMES TO ASSIST OF TREE TERMS, WHICH HAS BEEN IN OPERATION SIN

ldentifier	Return Reference	Explanation
GOVERNING BODY AND MANAGEMENT		THE GENERAL ALUMNIVAE ASSOCIATION (GAA) BOARD OF DIRECTORS CONSISTS OF 15 REGULAR MEMBERS THEY ELECT FOUR OFFICERS PRESIDENT, TWO VICE-PRESIDENTS AND A SECRETARY THE PRESIDENT AND TWO VICE-PRESIDENTS SERVE WITH THE ACADEMY'S BOARD OF TRUSTEES FOR THEIR TERMS AS GAA OFFICERS WHICH CAN BE A PERIOD FROM 1-6 YEARS

ldentifier	Return Reference	Explanation
REVIEW	VI, SECTION B, LINE 11	ONCE PHILLIPS EXETER'S FORM 990 IS COMPLETED, IT IS FIRST REVIEWED BY PHILLIPS EXETER ACADEMY'S INTERNAL MANAGEMENT FOLLOWING THAT REVIEW, PEA'S INTERNAL MANAGEMENT AND OUTSIDE ADVISORS PRESENT THE FORM 990 TO THE AUDIT COMMITTEE FOR REVIEW AND COMMENT THE COMPLETED FORM 990 IS PROVIDED TO ALL MEMBERS OF THE BOARD OF TRUSTEES PRIOR TO THE FORM BEING FILED WITH THE IRS

ldentifier	Return Reference	Explanation
CONFLICT OF INTEREST POLICY	FORM 990, PART VI, SECTION B, LINE 12A	PHILLIPS EXETER ACADEMY MAINTAINS A WRITTEN CONFLICT OF INTEREST POLICY REQUIRING DISCLOSURE OF RELEVANT FACTS THAT GIVE RISE TO A POTENTIAL CONFLICT OF INTEREST ANNUALLY, TRUSTEES, MEMBERS OF THE INVESTMENT COMMITTEE, ADMINISTRATORS, AND STAFF WITH PURCHASING RESPONSIBILITIES ARE REQUIRED TO ACKNOWLEDGE IN WRITING THAT THEY HAVE READ, UNDERSTAND AND SIGN A CONFLICT OF INTEREST ADDITIONALLY, EACH TRUSTEE, OFFICER AND/OR KEY EMPLOYEE IS PROVIDED WITH A QUESTIONNAIRE REQUIRING DISCLOSURE OF ANY CONFLICTS OF INTEREST

ldentifier	Return Reference	Explanation
PROCESS FOR DETERMINING COMPENSATION	FORM 990, PART VI, SECTION B, LINE 15	PHILLIPS EXETER ACADEMY MAINTAINS AN EXECUTIVE COMPENSATION PHILOSOPHY INTENDED TO COMPLY WITH IRC 4958 INTERMEDIATE SANCTIONS THAT REQUIRES PERIODIC REVIEW OF PEER INSTITUTIONS FOR COMPENSATION COMPARISONS AMONG EXECUTIVES DEEMED "DISQUALIFIED PERSONS" THE BOARD OF TRUSTEES APPROVES THEIR SALARIES ANNUALLY AND DOCUMENTS THEIR DETERMINATIONS IN MEETING MINUTES OTHER EXECUTIVE COMPENSATION IS BASED ON A REVIEW OF PEER SCHOOLS USING ABOPS AND OTHER SALARY SURVEY DATA AND IS APPROVED BY THE ADMINISTRATION

ldentifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION C, LINE 19	PHILLIPS EXETER ACADEMY'S GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS ARE AVAILABLE TO THE PUBLIC UPON REQUEST

ldentifier	Return Reference	Explanation
RECONCILIATION OF CHANGE IN NET ASSETS		NET UNREALIZED GAIN ON INVESTMENTS \$122,266,490 CHANGE IN VALUE IN FUNDS HELD FOR DEFERRED GIVING \$3,310,442 PENSION RELATED CHARGES OTHER THAN NET PERIODIC PENSION COST \$4,434,433 INTEREST RATE SWAP ADJUSTMENT \$2,656,612 OP/NONOP TRANSFERS (\$6,985,891) MISCELLANEOUS \$486,907

ldentifier	Return Reference	Explanation
SCHEDULE K, PART II, LINE 3		INCLUDES INTEREST EARNED OF \$322,058

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

DLN: 93493135047542

2010

OMB No 1545-0047

Open to Public Inspection

Schedule R (Form 990) 2010

SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

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

► Attach to Form 990. ► See separate instructions.

Department of the Treasury Internal Revenue Service

Name of the organization
PHILLIPS EXETER ACADEMY

Contract the organization number of the organization

							00 00000			
Part I Identification of Disregarded Entities (Con	nplete	ıf the organizatio	n a	answered "Yes"	on Form 9	90, Pai	rt IV, line 33.)			
(a) Name, address, and EIN of disregarded entity		(b) Primary activity		(c) Legal domicile (state or foreign country)	(d) Total ind	ome	(e) End-of-year assets	(f) Direct controlling entity		
Part II Identification of Related Tax-Exempt Orga or more related tax-exempt organizations during	nizat g the	t ions (Complete i tax year.)	f t	he organization	answered	"Yes" (on Form 990, Part	IV, line 34 becaus	e ıt had	one
(a) Name, address, and EIN of related organization		(b) Primary activity	Le	(c) egal domicile (state or foreign country)	(d) Exempt Code	section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	Section 5 cont	g) 12(b)(13 rolled ızatıon
(1) PEA RETIREE HEALTH CARE PLAN	4		L						Yes	No
20 MAIN STREET								PEA		
EXETER, NH 03833 02-0489993	VEBA			NH	501(C)(9)		ITLA	Yes	
(2) HEINZ EXETER SCHOLARSHIP FUND										
PO BOX 185	SCHO	SCHOLARSHIP		PA	501(C)(3)		PF	NA		No
PITTSBURG, PA 15201 25-1482044										
(3) MSSC TRUST FBO PHILLIPS EXETER ACADEMY										
PO BOX 748	SCHO	DLARSHIP		SC	501(C)(3)	11D, III-O	NA		No
SULLIVANS ISLAND, SC 29482 57-6114852										
			T							
	-		\vdash							

Cat No 50135Y

Part III Identifi because				treated as a partner											ie 34
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512- 514) (f) Share of tot		(f) of total income			(h) Disproprtionate allocations?		ce Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)		(j) General or managing partner?		(k) Percentage ownership
									Yes	No			Yes	No	
					-					<u> </u>					
Part IV Identifi	cation of Relat	ted Org	anizations Taxa ore related organiz	ble as a Corpora zations treated as a	i tion o a corpo	r Trust (Co	omple ust di	ete if the org uring the tax	anıza year	tion ar .)	nswered	"Yes" on	Form	990,	Part IV,
Name, address, and	(a) Name, address, and EIN of related organization		(b) Primary activity	(c) Legal domicile (state or foreign country)		(d) Direct controlling entity		(e) Type of entity (C corp, S corport trust)	y Share of t		of total income Shapend-		(g) Share of end-of-year assets		(h) Percentage ownership
(1) POOLED INCOME FUND	(2)		FUNDRAISING	NH				Т							
(2) CHARITABLE REMAINDE	ER TRUST (91)		FUNDRAISING					Т							

(4)

(5)

(6)

Schedule R (Form 990) 2010					Pag	je 3				
Part V Transactions With Related Organizations (Complete if the organization answered "You	es" on Form 990, Pa	rt IV, line 34, 35, 3	5A, or 36.)							
Note. Complete line 1 if any entity is listed in Parts II, III or IV				Y	/es	No				
1 During the tax year, did the orgranization engage in any of the following transactions with one or more related orga	anızatıons lısted ın Part	s II-IV?	Γ							
a Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity			1	.a		No				
b Gift, grant, or capital contribution to other organization(s)										
c Gift, grant, or capital contribution from other organization(s)										
d Loans or loan guarantees to or for other organization(s)										
e Loans or loan guarantees by other organization(s)										
f Sale of assets to other organization(s)			L	.f		No				
g Purchase of assets from other organization(s)			1	.g		No				
h Exchange of assets			1	.h		No				
i Lease of facilities, equipment, or other assets to other organization(s)										
j Lease of facilities, equipment, or other assets from other organization(s)										
k Performance of services or membership or fundraising solicitations for other organization(s)										
l Performance of services or membership or fundraising solicitations by other organization(s)			1	LI		No				
m Sharing of facilities, equipment, mailing lists, or other assets			1	.m		No				
n Sharing of paid employees			1	.n		No				
• Reimbursement paid to other organization for expenses			1	.о		No				
p Reimbursement paid by other organization for expenses			1	p Y	/es					
q Other transfer of cash or property to other organization(s)			1	.q		No				
r Other transfer of cash or property from other organization(s)						No				
2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line,	ıncludıng covered relat	nonships and transact	ion thresholds							
(a) Name of other organization	(b) Transaction type(a-r)	(c) Amount involved	(d Method of deten Invol	mining	g amoi	unt				
(1) MSSC TRUST FBO PHILLIPS EXETER ACADEMY	С	101,850	FMV							
(2) PEA RETIREMENT HEALTH CARE PLAN	Р	953,618	FMV							
(3)										

Part VI Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" on Form 990, Part IV, line 37.)

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships

(a) Name, address, and EIN of entity	(state or foreign partners country) section 501(c)(3) organizations?		(e) Share of end-of-year assets	(f) Disproprtionate allocations?		(g) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	mana part	(h) General or managing partner?		
			Yes	No		Yes	No		Yes	No
									+	\vdash
										1
							\vdash		+	\vdash
										T
									-	\vdash
										╁
									+	+

Part VII Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule R (see instructions)

Identifier	Return Reference	Explanation
PART IV, LINE (2), COLUMN (C)		CA, DE, FL, IA, IL, IRELAND, MA, MN, NC, NH, NJ, NY, OH, PA, RI, TX, VA, VT, WI

Schedule R (Form 990) 2010