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Department of the Treasury

Internal Revenue Service

Return of Organization Exempt From Income Tax

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

Open to Public

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

Inspection

OMB No 1545-0047

A F	or the	2010 calendar year, or tax year beginning $\mathrm{JUL}1$, 2010	ending J	UN 30, 2011	
	Check if ipplicable	C Name of organization TRINITY SCHOOL OF DURHAM		D Employer identifica	tion number
	Address				
F	Name change	Doing Business As		56-19	26923
F	Initial return	Number and street (or P 0 box if mail is not delivered to street address)	Room/suite	E Telephone number	
F	Termin-	4011 PICKETT ROAD	1100111/30110	(919)	402-8262
F	lated Amende			G Gross receipts \$	5,494,117.
F	⊥lretum ∏Applica				
_	⊥tión pending			H(a) Is this a group retu	Yes X No
		SAME AS C ABOVE		for affiliates?	
			507	H(b) Are all affiliates include	
		mpt status: X 501(c)(3) 501(c)() ((insert no.) 4947(a)(1) e: ► WWW.TRINITYSCHOOLNC.ORG	or 527	1	st. (see instructions)
			1. ٧	H(c) Group exemption of formation 1996 M s	
		M	L Year	of formation 1990 M	State of legal domicile. INC.
		Summary mur	MTCCTC	NI OF TOTNITTY	SCHOOL IS
es	1 6	Briefly describe the organization's mission or most significant activities: $\overline{ ext{THE}}$ TO EDUCATE STUDENTS IN TRANSITIONAL KIND	LDCVDU	DEM TO COADE	
Governance	-				
ler.	1	Check this box I if the organization discontinued its operations or dispo	sed of more	1 1	
é		Number of voting members of the governing body (Part VI, line 1a)		3	13
જ	1	Number of independent voting members of the governing body (Part VI, line 1b)		4	12
ies		otal number of individuals employed in calendar year 2010 (Part V, line 2a)		5	109
Activities &	1	otal number of volunteers (estimate if necessary)		6	246
Act	7a 1	otal unrelated business revenue from Part VIII, column (C), line 12		7a	0.
	1 d	Net unrelated business taxable income from Form Bolicia BVED		7b	0.
), (i)		Prior Year	Current Year
ě		Contributions and grants (Part VIII, line 1h) Program service revenue (Part VIII, line 2g) Program service revenue (Part VIII, line 2g)		578,898.	573,557.
en	9 F	Program service revenue (Part VIII, line 2g)		3,965,145.	4,332,936.
Revenue		nvestment income (Fart VIII, column (A), lines 5, 4, and 70)		35,094.	69,154.
	11 (Other revenue (Part VIII, column (A), lines 5 6d, 8c-9c5 1907 and 1 e)		63,865.	112,893.
	12	otal revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		4,643,002.	5,088,540.
	13 (Grants and similar amounts paid (Part IX, column (A), lines 1·3)	ļ	0.	0.
	14 [Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.
S	15 9	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	3,241,582.	3,541,386.	
Expenses	16a f	Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.
χ	b1	Fotal fundraising expenses (Part IX, column (D), line 25)	26.		
Ш	17 (Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)		1,631,309.	1,908,898.
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		4,872,891.	5,450,284.
	19 F	Revenue less expenses Subtract line 18 from line 12		-229,889.	-361,744.
t Assets or I			Ве	ginning of Current Year	End of Year
sets	20	Total assets (Part X, line 16)		15,646,661.	15,518,190.
t As	21	Total liabilities (Part X, line 26)		9,368,257.	9,355,879.
Ret		Net assets or fund balances Subtract line 21 from line 20		6,278,404.	6,162,311.
P	art II	Signature Block			
Und	ier penal	ties of perjury, I declare that I have examined this return, including accompanying schedule	s and statem	ents, and to the best of my l	mowledge and belief, it is
true	, correct	, and complete Declaration of preparer (other than officer) is based on all information of w	hich preparei	has any knowledge	
		the 1- Dor		Janan	, 30, ZOIZ
Sig	ın İ	Signature of officer		Date	
He	re	PETER T. DENTON JR., HEADMASTER			
		Type or print name and title			
		Print/Type preparer's name Preparer's signature (7	Date Check	PTIN
Pai	d	KRISTEN HOYLE, CPA		1130112 self-employed	
Pre	parer [Firm's name THOMAS, JUDY & TUCKER P. A.		Firm's EIN ▶	
Use	Only		450		
		RALEIGH, NC 27609		Phone no 91	9-571-7055
<u>Ma</u>	y the IF	S discuss this return with the preparer shown above? (see instructions)			X Yes No
0320	001 02-22	2-11 LHA For Paperwork Reduction Act Notice, see the separate instructi	ons.		Form 990 (2010)

Form 990 (2010)

	930 (2010)· AND CHAPEL HILL, INC.	56-1926923 Pag	ge 2
Par	rt III Statement of Program Service Accomplishments		
	Check If Schedule O contains a response to any question in this Part III	[Χ
1	Briefly describe the organization's mission		
	THE MISSION OF TRINITY SCHOOL IS TO EDUCATE STUDENTS IN		
	KINDERGARTEN TO GRADE TWELVE WITHIN THE FRAMEWORK OF CH		
	AND CONVICTIONTEACHING THE CLASSICAL TOOLS OF LEARNIN		
	RICH YET UNHURRIED CURRICULUM; AND COMMUNICATING TRUTH,	GOODNESS, AND	
2	Did the organization undertake any significant program services during the year which were not listed on		
	the prior Form 990 or 990-EZ?	Yes X	No
	If "Yes," describe these new services on Schedule O		
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services	γ Yes X	No
	If "Yes," describe these changes on Schedule O		
4	Describe the exempt purpose achievements for each of the organization's three largest program services by e	xpenses.	
	Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of	of grants and	
	allocations to others, the total expenses, and revenue, if any, for each program service reported		
4a		Revenue \$ 4,348,514	<u> </u>
	TRINITY SCHOOL SERVES APPROXIMATELY 447 STUDENTS IN TRA		
	KINDERGARTEN THROUGH TWELFTH GRADE IN THE VICINITY OF I	OURHAM AND CHAPE	<u>:L</u>
	HILL, NC.		
4b	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
			
4c	(Code) (Expenses \$ including grants of \$) (I	Revenue \$)
			
		····	
	Other program continue (Decembe in Cata-dula CA		
4d	Other program services. (Describe in Schedule O)	,	
4 :-	(Expenses \$ including grants of \$) (Revenue \$ Total program service expenses ▶ 3,796,405.)	
<u>4e</u>	Total program service expenses ► 3, 796, 405.		

			Yes	No
	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Х	
	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
•	public office? If "Yes," complete Schedule C, Part I	3		Х
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		Х
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		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8_		Х
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X; or provide			
	credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments?			
	If "Yes," complete Schedule D, Part V	10	X	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X			
	as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,	·	١	
	Part VI	11a	<u>X</u>	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			v
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total	44		Х
A	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in	11c		
u	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		Х
6	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	X	
	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	110		
•	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Х	
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	X	
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		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	Х	
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	and program service activities outside the United States? If "Yes," complete Schedule F, Parts I and IV	14b		X_
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization			.,
	or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15_		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals			v
	located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	47		X
40	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		_^_
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	Х	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	10	-11	
ים	complete Schedule G, Part III	19		Х
20a	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20a		X
	If "Yes" to line 20a, did the organization attach its audited financial statements to this return? Note. Some Form 990 filers that			<u></u> -
~	operate one or more hospitals must attach audited financial statements (see instructions)	20ь		
			000	

Form 950 (2010) AND CHAPEL HILL, I AND CHAPEL HILL, INC.

			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the			
	United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
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		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		X
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 through 24d and complete			İ
	Schedule K If "No", go to line 25	24a	Х	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		_X_
С	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		X
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		X
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a			١
	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
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			١
•	Schedule L, Part I	25b		X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified			.,
07	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete			l .
20	Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
_	instructions for applicable filing thresholds, conditions, and exceptions):			v
a b	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a	<u> </u>	X
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,	28ь		
·	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	202		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	28c 29	-	X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation	29	-	
00	contributions? If "Yes," complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations?	30_		 -
٠.	If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	<u> </u>		
	Schedule N. Part II	32		Х
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		Х
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		х
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	35		Х
а	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			
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		х
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		х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?			
	Note. All Form 990 filers are required to complete Schedule O	38	Х	
		Form	990 (2010)

TRINITY SCHOOL OF DURHAM

Form 90 (2010) AND CHAPEL HILL, INC.

Part V Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response to any question in this Part V										
			Yes	No							
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable										
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0										
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			ĺ							
	(gambling) winnings to prize winners?	1c	X	ĺ							
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,										
	filed for the calendar year ending with or within the year covered by this return 2a 109										
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X								
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)										
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		Х							
b	b If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O										
4a	4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a										
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?										
b	If "Yes," enter the name of the foreign country: ►			ĺ							
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts.			1							
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X							
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х							
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		<u> </u>							
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit										
	any contributions that were not tax deductible?	6a		X							
þ	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts										
_	were not tax deductible?	6b									
7	Organizations that may receive deductible contributions under section 170(c).	_		v							
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? If "Yes," did the organization notify the donor of the value of the goods or services provided?	7a		X							
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	7b									
٠	to file Form 8282?	7c		х							
ч	If "Yes," indicate the number of Forms 8282 filed during the year	-/-		^							
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e									
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f									
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		Ī							
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h									
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting										
	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8									
9	Sponsoring organizations maintaining donor advised funds.			į							
а	Did the organization make any taxable distributions under section 4966?	9a									
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b									
10	Section 501(c)(7) organizations. Enter.			İ							
	Initiation fees and capital contributions included on Part VIII, line 12			İ							
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			İ							
11	Section 501(c)(12) organizations. Enter			į							
	Gross income from members or shareholders Cross income from other courses (Do not not organized the extraction of the courses)										
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			İ							
192	amounts due or received from them) Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a									
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b	124									
13	Section 501(c)(29) qualified nonprofit health insurance issuers.										
	Is the organization licensed to issue qualified health plans in more than one state?	13a									
	Note. See the instructions for additional information the organization must report on Schedule O.	.56									
ь	Enter the amount of reserves the organization is required to maintain by the states in which the										
~	organization is licensed to issue qualified health plans										
С	Enter the amount of reserves on hand										
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х							
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b									

Form 990 (2010) *

AND CHAPEL HILL, INC. 56-1926923 Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions Check if Schedule O contains a response to any question in this Part VI Section A. Governing Body and Management Yes No 1a Enter the number of voting members of the governing body at the end of the tax year 12 b Enter the number of voting members included in line 1a, above, who are independent 1b Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other Х officer, director, trustee, or key employee? 2 Did the organization delegate control over management duties customarily performed by or under the direct supervision Х of officers, directors or trustees, or key employees to a management company or other person? 3 Х Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 Х 5 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 Х 6 Does the organization have members or stockholders? 6 7a Does the organization have members, stockholders, or other persons who may elect one or more members of the Х governing body? 7a Х b Are any decisions of the governing body subject to approval by members, stockholders, or other persons? 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following Х a The governing body? 8a Х b Each committee with authority to act on behalf of the governing body? 8ь Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) No Yes Х 10a Does the organization have local chapters, branches, or affiliates? 10a b If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization? 10b Х 11a Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form? 11a b Describe in Schedule O the process, if any, used by the organization to review this Form 990. Х 12a Does the organization have a written conflict of interest policy? If "No," go to line 13 12a b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise Х 12b c Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe Х in Schedule O how this is done 12c Х 13 Does the organization have a written whistleblower policy? 13 Х 14 Does the organization have a written document retention and destruction policy? 14 Did the process for determining compensation of the following persons include a review and approval by independent 15 persons, comparability data, and contemporaneous substantiation of the deliberation and decision? a The organization's CEO, Executive Director, or top management official 15a Х Х b Other officers or key employees of the organization 15b 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 Х taxable entity during the year? 16a b If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements? 16b Section C. Disclosure NONE List the states with which a copy of this Form 990 is required to be filed 17 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available Check all that apply Another's website X Upon request Own website Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial 19 statements available to the public. State the name, physical address, and telephone number of the person who possesses the books and records of the organization

BRENT CLARK - (919) 402-8262 4011 PICKETT ROAD, DURHAM, NC

27705-5335

Form 990 (2010)

AND CHAPEL HILL, INC.

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

Check if Schedule O contains a response to any question in this Part VII

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. 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 in	or any related	orga	ınıza	tion	cor	mper	nsat	ed any current officer, o	irector, or trustee.	
(A)	(B) (C)							(D)	(E)	(F)
Name and Title	Average	verage Position						Reportable	Reportable	Estimated
	hours per	(cl	neck	all	that	арр	ly)	compensation	compensation	amount of
	week	cto						from	from related	other
	(describe hours for	or dura				pa		the organization	organizations (W-2/1099-MISC)	compensation from the
	related	stee	uste	İ		ensa		(W-2/1099-MISC)	(***2/1099****150)	organization
	organizations	ם	onal t		afolo	S 8		(** 2 : 55555)		and related
	ın Schedule	ndividual trustee or director	nstitutional trustee	Officer	Key employee	Highest compensated employee	Former			organizations
	O)	드	드	5	素	Ξō	75			
BILL COBEY								_	_	_
CHAIR	1.00	Х		Х		_		0.	0.	0.
FRED BROOKS										
VICE-CHAIR	1.00	X	<u> </u>	Х				0.	0.	0.
PETER T. DENTON JR.									_	
HEADMASTER	40.00	X		Х	ļ			126,698.	0.	6,933.
JOHN HAND										
TREASURER	1.00	X	ļ	X				0.	0.	0.
DEB SYKES										
SECRETARY	1.00	X	ļ	X	ļ	<u> </u>		0.	0.	0.
JULIAN CULTON										
BOARD MEMBER	1.00	Х	<u> </u>	ļ	ļ	ļ		0.	0.	0.
HUBERT DAVIS										
BOARD MEMBER	1.00	Х		ļ	_	_		0.	0.	0.
PERRIANNE DAVIS	1									•
BOARD MEMBER	1.00	X	<u> </u>		-	-		0.	0.	0.
JENIFER HOFMANN	1									
BOARD MEMBER	1.00	Х			ļ	\vdash	<u> </u>	0.	0.	0.
SONYA HOVE	1 00	,								_
BOARD MEMBER	1.00	X		_	-	╄		0.	0.	0.
BILL JAMES	1 00	,,		1						
BOARD MEMBER	1.00	Х	ļ <u>.</u>	_	<u> </u>	-	_	0.	0.	0.
JEFF LLOYD	1 00	.,								^
BOARD MEMBER	1.00	X	├	ļ	Ͱ	-		0.	0.	0.
DAVID SPENCE	1 00	١,,			1			_		^
BOARD MEMBER	1.00	Х	<u> </u>	<u> </u>	-	-	<u> </u>	0.	0.	0.
	<u> </u>	├		-		 -				
	 	-	-		-	-				
		1								
	 				-	-	-			
		Ì								
	1			<u> </u>	1	<u> </u>	<u> </u>	<u> </u>	<u> </u>	

Par	Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)													
	(A)	(B)	(C)					(D)	(E)			(F)		
	Name and title	Average	١.,		Pos				Reportable	Reportable		Es	stimate	ed
		hours per	(c	heck	(all	that	арр	ly)	compensation	compensatio		ar	nount	of
		week (describe	ğ					ŀ	from	from related			other	
		hours for	dre				g gg		the organization	organization: (W-2/1099-MIS			pensarom th	
		related	Stee	trustee			Seusa	ŀ	(W-2/1099-MISC)	(11 Z) 1000 Mile	,,,		anızat	
		organizations	Jal tru	onalt		loyee	S 8					-	d relat	
		in Schedule	Individual trustee or director	Institutional	Officer	Key employee	Highest compensated employee	Former				orga	anızatı	ons
		O)	드	드	0	2	Ī 5	<u>ب</u>						
								ľ						
		ļ		-		-								
		<u> </u>		\vdash	-					······································				
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						ľ					1			
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_				L.,	<u> </u>	L.,				<u> </u>				
1b	Sub-total								126,698.		0.	,	6,9	
	Total from continuation sheets to Part V	II, Section A							0.		0.			0.
	Total (add lines 1b and 1c)						<u> </u>		126,698.		0.		6,9	33.
2	Total number of individuals (including but i	not limited to th	ose	liste	ed a	bov	e) wh	no re	eceived more than \$100	,000 in reportabl	е			1
	compensation from the organization	·											Yes	No
3	Did the organization list any former officer	director or tru	etoo	, ko	v 00	مامد	V00	or b	alabast companyated or	nalavaa aa	ſ		163	140
J	line 1a? If "Yes," complete Schedule J for s		SICC	, NO	y C II	ipio	усе,	OI I	ngriest compensated er	iipioyee oii	Ì	3	1	Х
4	For any individual listed on line 1a, is the s		le co	omo	ensa	atior	n and	to t	her compensation from	the organization	ŀ			
•	and related organizations greater than \$15									ine organization		4		х
5	Did any person listed on line 1a receive or			-						dual for services	Ì			
	rendered to the organization? If "Yes," con											5		Х
Sec	tion B. Independent Contractors													
1	Complete this table for your five highest co	ompensated in	depe	ende	ent c	ont	racto	ors t	hat received more than	\$100,000 of com	ipens	ation t	rom	
	the organization. NONE													
	(A)								(B)		_)	
	Name and business	address						_	Description of s	ervices	C	ompe	nsatio	n
										ļ				
								-						
										į				
		•					 -	\dashv	1.11.1					
2	Total number of independent contractors (includina but n	ot li	mite	d to	tho	se li	sted	above) who received m	ore than				
_	\$100,000 in compensation from the organi				0		0							
					•							_	200	2040

Page 9

Part VIII Statement of Revenue (D) Revenue (A) (B) (C) Total revenue Related or Unrelated excluded from exempt function business tax under sections 512, revenue revenue 513, or 514 1 a Federated campaigns 1a **b** Membership dues 16 c Fundraising events 1c 1d d Related organizations e Government grants (contributions) 1e f All other contributions, gifts, grants, and 573,557. similar amounts not included above 9 Noncash contributions included in lines 1a-1f \$_ 573,557. h Total. Add lines 1a-1f **Business Code** 2 a TUITION (NET OF AID) 900099 4,322,111.4,322,111. b FEES 900099 10,825. 10,825. f All other program service revenue 4,332,936. g Total. Add lines 2a-2f investment income (including dividends, interest, and 39,997. 39,997. other similar amounts) Income from investment of tax-exempt bond proceeds 5 Royalties (i) Real (II) Personal 4,855. 6 a Gross Rents b Less: rental expenses 4,855. c Rental income or (loss) 4,855. d Net rental income or (loss) 4,855. 7 a Gross amount from sales of (I) Securities (II) Other 403,949. assets other than inventory b Less: cost or other basis 374,792. and sales expenses 29,157. c Gain or (loss) \triangleright 29,157. 29,157. d Net gain or (loss) 8 a Gross income from fundraising events (not Other Revenue including \$ contributions reported on line 1c). See a 123,245 Part IV, line 18 30,785. b Less direct expenses 92,460. 92,460. c Net income or (loss) from fundraising events 9 a Gross income from gaming activities See Part IV, line 19 b Less direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less. cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue **Business Code** 11 a MISCELLANEOUS INCOME 900099 8,727. 8<u>,</u>727. ь TEACHER-PARENT ORGANIZ 900099 6,851. 6,851. d All other revenue 15,578. e Total. Add lines 11a-11d ▶ 5,088,540.4,348,514. 166,469. 12 Total revenue. See instructions 032009 12-21-10

Part IX Statement of Functional Expenses

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

	All other organizations must com	plete column (A) but are			
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21				
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22				
3	Grants and other assistance to governments,				······································
	organizations, and individuals outside the U.S.				
	See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	166,776.	105,100.	54,999.	6,677.
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	2,927,573.	1,844,915.	965,447.	117,211.
8	Pension plan contributions (include section 401(k)	41 000	05.050	12 522	1 (10
	and section 403(b) employer contributions)	41,033.	25,858.	13,532.	1,643. 5,981. 10,274.
9	Other employee benefits	149,379.	94,136.	49,262.	5,981.
10	Payroll taxes	256,625.	161,722.	84,629.	10,274.
11	Fees for services (non-employees)				
a	Management				
Ь	Legal	14 520		14 520	
	Accounting	14,528.		14,528.	
	Lobbying				
	Professional fundraising services See Part IV, line 17				
f	Investment management fees	4,347.		4,347.	
g 40	Other	78,282.		78,282.	
12	Advertising and promotion	70,202.		10,202.	
13 14	Office expenses Information technology	95,332.	87,692.	7,640.	
15	Royalties	337332.	017032.	7,010.	
16	Occupancy	298,095.	274,205.	23,890.	
17	Travel		2,1,200	20,0001	
18	Payments of travel or entertainment expenses		-		
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest	247,622.	227,777.	19,845.	
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	481,143.	442,584.	38,559.	
23	Insurance	57,918.	53,276.	4,642.	
24	Other expenses I temize 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 0) EDUCATIONAL SERVICES	229,054.	229,054.		
a b	GENERAL & ADMINISTRATIV	128,014.	44,805.	83,209.	
C	UTILITIES UTILITIES	127,953.	117,699.	10,254.	
d	PERSONNEL ADMINISTRATIO	59,895.	37,745.	19,752.	2,398.
u e	TELEPHONE	51,497.	47,370.	4,127.	2,370.
f	All other expenses	35,218.	2,467.	8,709.	24,042.
25	Total functional expenses Add lines 1 through 24f	5,450,284.	3,796,405.	1,485,653.	168,226.
26	Joint costs Check here Inf following SOP		-,, 200		
	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				

Form 990 (201.0) Part X Balance Sheet

Par	tΧ	Balance Sheet			
			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	1,208,173.	1	1,742,522.
	2	Savings and temporary cash investments	95,330.	2	187,898.
	3	Pledges and grants receivable, net	890 , 774.	3	575,897.
	4	Accounts receivable, net	126,183.	4	127,240.
	5	Receivables from current and former officers, directors, trustees, key			
		employees, and highest compensated employees Complete Part II			
		of Schedule L		5	-,
	6	Receivables from other disqualified persons (as defined under section			
		4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing			
		employers and sponsoring organizations of section 501(c)(9) voluntary			
s		employees' beneficiary organizations (see instructions)		6	
Assets	7	Notes and loans receivable, net		7	
As	8	Inventories for sale or use	F2 (F0	8	05 476
	9	Prepaid expenses and deferred charges	53,659.	9	25,476.
	10a	Land, buildings, and equipment: cost or other			
		basis. Complete Part VI of Schedule D Less: accumulated depreciation 10a 13,668,329. 10b 2,594,260.	11 224 222		11 074 060
		•	11,324,223. 998,244.		11,074,069. 1,180,898.
	11	Investments - publicly traded securities	990,244.	11	1,100,090.
	12 13	Investments - other securities. See Part IV, line 11 Investments - program-related See Part IV, line 11		12 13	
	14	Intangible assets	281,491.	14	264,168.
	15	Other assets. See Part IV, line 11	668,584.	15	340,022.
	16	Total assets. Add lines 1 through 15 (must equal line 34)	15,646,661.	16	15,518,190.
	17	Accounts payable and accrued expenses	173,663.	17	207,057.
	18	Grants payable	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	18	
	19	Deferred revenue	2,157,183.	19	2,477,321.
	20	Tax-exempt bond liabilities	6,000,000.	20	5,700,000.
S	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
Liabilities	22	Payables to current and former officers, directors, trustees, key employees,			
iabi		highest compensated employees, and disqualified persons. Complete Part II			
5		of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties	751,229.	23	751,229.
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities. Complete Part X of Schedule D	286,182.	25	220,272.
	26	Total liabilities. Add lines 17 through 25	9,368,257.	26	9,355,879.
		Organizations that follow SFAS 117, check here X and complete			
Ses	ł	lines 27 through 29, and lines 33 and 34.	4 100 252		4 405 516
auc	27	Unrestricted net assets	4,198,253.	27	4,405,516.
Bal	28	Temporarily restricted net assets	2,080,151.	28	1,756,795.
pu	29	Permanently restricted net assets		29	
Ę		Organizations that do not follow SFAS 117, check here and			
S O		complete lines 30 through 34.			
Net Assets or Fund Balances	30	Capital stock or trust principal, or current funds		30	
As	31	Paid in or capital surplus, or land, building, or equipment fund		31	
Net	32	Retained earnings, endowment, accumulated income, or other funds	6,278,404.	32	6,162,311.
	33	Total net assets or fund balances	15,646,661.	33	15,518,190.
	34	Total liabilities and net assets/fund balances	13,040,001.	34	10,010,190.

· . · · TRINITY SCHOOL OF DURHAM				
Form 990 (2010) AND CHAPEL HILL, INC.	56-	-1926923	Pag	ge 12
Part XI Reconciliation of Net Assets				
Check if Schedule O contains a response to any question in this Part XI				X
1 Total revenue (must equal Part VIII, column (A), line 12)	1	5,08		
2 Total expenses (must equal Part IX, column (A), line 25)	2	5,45	7,2	84.
3 Revenue less expenses Subtract line 2 from line 1	3	-36	l,7	44.
4 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	6,27	3,4	04.
5 Other changes in net assets or fund balances (explain in Schedule O)	5	24	5,6	51.
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	6,16	2,3	11.
Part XII Financial Statements and Reporting				
Check if Schedule O contains a response to any question in this Part XII				<u> </u>
1 Accounting method used to prepare the Form 990 Cash X Accrual Other			Yes	No
If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedul	e O.		- 1	v
2a Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	Х	<u>X</u>
b Were the organization's financial statements audited by an independent accountant?	1.4	2b	^	
c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of t	ne audit	'	x	
review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Sci	م ماريام د		^	<u> </u>
d If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issu-		<i>'</i> .		
separate basis, consolidated basis, or both	o on a			
X Separate basis Consolidated basis Both consolidated and separate basis				
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the S	nale Au	dit	- 1	
Act and OMB Circular A-133?	ingle Au	3a		x
b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits?	ured au			
or audits, explain why in Schedule O and describe any steps taken to undergo such audits.	00 00	3ь		
		Form	990 (2010)

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury 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.

OMB No 1545-0047

Open to Public Inspection

Name of the organization

TRINITY SCHOOL OF DURHAM AND CHAPEL HILL, INC.

Employer identification number 56–1926923

Pa	rt I	Reason	for Public Char	rity Status (All organiz	zatione mu	et comple	te this par	t) See inc	tructions				
								· · · · · · · · · · · · · · · · · · ·	tructions				
	organı			because it is (For lines	_		-	•					
1				es, or association of chur		ribed in se	ection 170)(b)(1)(A)(i).				
2	욕			70(b)(1)(A)(ii). (Attach Sc									
3		•	·	oital service organization									
4		A medical res	search organization	operated in conjunction	with a hos	pıtal desc	ribed in se	ection 170	(b)(1)(A)(i	ii). Enter th	ne hospita	l's nam	ie,
		city, and stat											
5				benefit of a college or u	niversity ov	wned or o	perated by	a govern	mental un	it describe	d in		
_			(b)(1)(A)(iv). (Comp	•									
6	님			nent or governmental uni				,, ,, ,					
7	Ш	An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II)											
8		A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.)											
9	一	·=		ceives: (1) more than 33		•	rom contri	ibutione n	nembereb	n food an	d arose ro	cointe	from
Ŭ				inctions - subject to certa									
				taxable income (less sec	-		•			• •	_		
					lion o i i ta	x) Iroili bu	isinesses a	acquireo c	by the orga	anization a	iter June .	30, 197	ა .
40			509(a)(2). (Complet	· · · · · · · · · · · · · · · · · · ·	-4 6		 .	. 500/ 1/	41				
10	님			perated exclusively to te								_	
11	ш			perated exclusively for the									or
				ations described in secti				2) See se e	ction 509(a)(3). Che	ck the box	that	
				g organization and compl		•							
	_	a Type I		• •	с 📖 Тур		-	~			Type III -		
е	Ш			at the organization is not									n
		foundation m	nanagers and other	than one or more publicl	y supporte	d organiza	ations des	cribed in s	ection 50	9(a)(1) or s	ection 509	3(a)(2)	
f		If the organiz	ation received a wri	itten determination from	the IRS tha	at it is a Ty	pe I, Type	II, or Type	e III				
		supporting or	rganization, check t	this box									
g		Since August	t 17, 2006, has the	organization accepted ai	ny gift or co	ontribution	from any	of the foll	owing per	sons?			
		(i) A person	n who directly or inc	directly controls, either al	lone or tog	ether with	persons o	described	ın (II) and ((III) below,		Yes	No
		the gove	erning body of the s	supported organization?							11g(i)		
		(ii) A family	member of a perso	on described in (i) above?	1						11g(ii)		
		(iii) A 35% d	controlled entity of	a person described in (i)	or (II) above	<u>-</u> ?					11g(iii)	1	
h		-	•	about the supported or								_ 	
					gz	(-)-							
(i)	Name	of supported	(II) EIN	(III) Type of	(IV) Is the o	rganization	(v) Did yo	u notify the	(vi) is		(vii) Ar	nount o	
١٠,		nization	\.,,	organization	in col (i) lis		organizat	tion in col	organizati (i) organiz			port	,
				(described on lines 1-9 above or IRC section	governing	document?	(i) of you	r support?	US	?	30,	port	
				(see instructions))	Yes	No	Yes	No	Yes	No			
									 	† · · · · · † ·			
•					 					 			
			1										
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Fota		!											

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule A (Form 990 or 990-EZ) 2010

	edule A (Form 990 or 990-EZ) 2010						Page 2
Pa	rt II Support Schedule for						
	(Complete only if you checked				on failed to qualify	under Part III. If the	e organization
_	fails to qualify under the tests	listed below, plea	ase complete Part	111)			
Se	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants ")						
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities			ļ			
	furnished by a governmental unit to						
	the organization without charge					ļ. <u></u>	
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)						
^	```						
	Public support. Subtract line 5 from line 4 ction B. Total Support		1	L	.1		
_		4-1 0000	41.0007	4 1 0000	1 1 2 2 2 2	1 1 2010	
	endar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
						-	
8	Gross income from interest,						
	dividends, payments received on securities loans, rents, royalties					1	
	and income from similar sources						
9	Net income from unrelated business	-	 				
3	activities, whether or not the						
	business is regularly carried on						
10							
. •	or loss from the sale of capital						
	assets (Explain in Part IV.)						
11	Total support. Add lines 7 through 10						
12	Gross receipts from related activities,	etc (see instruct	ions)		.1	12	
13	First five years. If the Form 990 is for	,		rd, fourth, or fifth t	ax vear as a section		
	organization, check this box and stop		,,	,	,	(-/(-/	▶ □
Se	ction C. Computation of Publ	ic Support Pe	ercentage				
14	Public support percentage for 2010 (l	ine 6, column (f) o	divided by line 11,	column (f))		14	%
15	Public support percentage from 2009					15	%
16	a 33 1/3% support test - 2010.If the o	rganization did no	ot check the box o	n line 13, and line	14 is 33 1/3% or n	nore, check this bo	x and
	stop here. The organization qualifies	as a publicly supp	ported organizatio	n			▶ □
ı	o 33 1/3% support test - 2009.If the o	rganization did no	ot check a box on	ine 13 or 16a, and	line 15 is 33 1/3%	6 or more, check th	is box
	and stop here. The organization qual	ifies as a publicly	supported organiz	ation			▶ □
17	a 10% -facts-and-circumstances tes	t - 2010.If the org	janization did not d	heck a box on line	e 13, 16a, or 16b, a	and line 14 is 10%	or more,
	and if the organization meets the "fac						
	meets the "facts-and-circumstances"	test. The organiza	ation qualifies as a	publicly supporte	d organization	_	▶
ı	o 10% -facts-and-circumstances tes	t - 2009.If the org	janization did not d	check a box on line	e 13, 16a, 16b, or	17a, and line 15 is	10% or
	more, and if the organization meets th						
	organization meets the "facts-and-circ	cumstances" test	. The organization	qualifies as a publi	icly supported ora	anization	▶□

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

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)

Sec	tion A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not						
	include any "unusual grants ")						
2	Gross receipts from admissions,						
	merchandise sold or services per-						
	formed, or facilities furnished in any activity that is related to the						
	organization's tax-exempt purpose						1
3	Gross receipts from activities that						
	are not an unrelated trade or bus-						
	iness under section 513						
4	Tax revenues levied for the organ-						
-	ization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities				<u> </u>		
	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
	Amounts included on lines 1, 2, and						
, a	3 received from disqualified persons						
h	Amounts included on lines 2 and 3 received						
	from other than disqualified persons that	ļ		•			
	exceed the greater of \$5,000 or 1% of the			1			
	amount on line 13 for the year						
	Add lines 7a and 7b			:			
	Public support (Subtract line 7c from line 6)	<u> </u>			<u> </u>	1	
	ction B. Total Support			1 110000	1,0000		
	ndar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
	Amounts from line 6				-		
10a	Gross income from interest, dividends, payments received on	1	1	1			
	securities loans, rents, royalties						
	and income from similar sources						
b	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975	<u></u>					
	: Add lines 10a and 10b						
11	Net income from unrelated business activities not included in line 10b.						
	whether or not the business is	1	1				
	regularly carried on						
12	Other income. Do not include gain			1			
	or loss from the sale of capital assets (Explain in Part IV)		ļ				
13	Total support (Add lines 9, 10c, 11, and 12)						
14	First five years. If the Form 990 is fo	r the organization'	s first, second, thi	rd, fourth, or fifth t	ax year as a secti	on 501(c)(3) or	ganızatıon,
	check this box and stop here						▶ □
Seg	ction C. Computation of Publ	ic Support Pe	rcentage				
15	Public support percentage for 2010 (line 8, column (f) d	livided by line 13,	column (f))		15	%
16	Public support percentage from 2009	Schedule A, Part	III, line 15			16	%
	ction D. Computation of Inve						
	Investment income percentage for 20					17	%
18	Investment income percentage from					18	%
	33 1/3% support tests - 2010. If the			on line 14. and lin	e 15 is more than	-	
	more than 33 1/3%, check this box a	=					▶
H	33 1/3% support tests - 2009. If the						
•	line 18 is not more than 33 1/3%, che	-					. \square
20	Private foundation. If the organization			•		-	
	Time to Touridation, if the Organization	AL GIG HOL CHECK A	DON OIT HITE 14, 13	a, or roo, check t	THE DON WHO SEE II	ion donons	

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047 Open to Public Inspection

Name of the organization

TRINITY SCHOOL OF DURHAM

AND CHAPEL HILL, INC.

Employer identification number 56-1926923

Par	t I Organizations Maintaining Donor Advise	d Funds or Other Similar Funds o	or Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, line	e 6.	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor advised	d funds
-	are the organization's property, subject to the organization's		Yes No
6	Did the organization inform all grantees, donors, and donor a		
•	for charitable purposes and not for the benefit of the donor of	- -	•
	impermissible private benefit?		Yes No
Par	***************************************	ganization answered "Yes" to Form 990. Par	
1	Purpose(s) of conservation easements held by the organizati	· · · · · · · · · · · · · · · · · · ·	
	Preservation of land for public use (e.g., recreation or e		orically important land area
	Protection of natural habitat	Preservation of a certific	
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualif	fied conservation contribution in the form of	a conservation easement on the last
	day of the tax year		
			Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
С	Number of conservation easements on a certified historic str	ructure included in (a)	2c
d	Number of conservation easements included in (c) acquired		
	listed in the National Register		2d
3	Number of conservation easements modified, transferred, re	leased, extinguished, or terminated by the o	organization during the tax
	year ►		-
4	Number of states where property subject to conservation ea	sement is located >	
5	Does the organization have a written policy regarding the per	riodic monitoring, inspection, handling of	
	violations, and enforcement of the conservation easements i	t holds?	Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,	and enforcing conservation easements duri	ing the year 🕨
7	Amount of expenses incurred in monitoring, inspecting, and	enforcing conservation easements during the	ne year ▶ \$
8	Does each conservation easement reported on line 2(d) above	ve satisfy the requirements of section 170(h))(4)(B)(i)
	and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIV, describe how the organization reports conservati	ion easements in its revenue and expense s	tatement, and balance sheet, and
	include, if applicable, the text of the footnote to the organiza	tion's financial statements that describes th	e organization's accounting for
	conservation easements		
Pai	rt III Organizations Maintaining Collections o	f Art, Historical Treasures, or Oth	ner Similar Assets.
	Complete if the organization answered "Yes" to Form	990, Part IV, line 8	
1a	If the organization elected, as permitted under SFAS 116 (AS	SC 958), not to report in its revenue stateme	ent and balance sheet works of art,
	historical treasures, or other similar assets held for public ext	hibition, education, or research in furtherand	ce of public service, provide, in Part XIV,
	the text of the footnote to its financial statements that descri	ibes these items	
b	If the organization elected, as permitted under SFAS 116 (AS	SC 958), to report in its revenue statement a	and balance sheet works of art, historical
	treasures, or other similar assets held for public exhibition, e	ducation, or research in furtherance of publi	ic service, provide the following amounts
	relating to these items		
	(i) Revenues included in Form 990, Part VIII, line 1		> \$
	(ii) Assets included in Form 990, Part X		▶ \$
2	If the organization received or held works of art, historical tre	asures, or other similar assets for financial g	gain, provide
	the following amounts required to be reported under SFAS 1	16 (ASC 958) relating to these items	
а	Revenues included in Form 990, Part VIII, line 1		> \$
b	Assets included in Form 990, Part X		> \$

		PEL HILL,				1926923 Page 2				
Par	t III Organizations Maintaining C	ollections of Ar	t, Historical Tre	easures, or Oth	ner Similar A	ssets (continued)				
3	Using the organization's acquisition, accessi	on, and other record	s, check any of the	following that are a	significant use o	fits collection items				
	(check all that apply)									
а	Public exhibition	d	Loan or excl	hange programs						
b	Scholarly research	е	Other							
С	Preservation for future generations									
4	Provide a description of the organization's co	ollections and explair	n how they further th	ne organization's ex	empt purpose in	Part XIV.				
5	During the year, did the organization solicit of	r receive donations o	of art, historical treas	sures, or other simil	lar assets					
	to be sold to raise funds rather than to be maintained as part of the organization's collection?									
Par	Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or									
	reported an amount on Form 990, Pa	rt X, line 21		-						
1a	Is the organization an agent, trustee, custod	an or other intermed	ary for contribution	s or other assets ne	ot included					
	on Form 990, Part X?					Yes No				
b	If "Yes," explain the arrangement in Part XIV	and complete the fol	lowing table:		_					
					L	Amount				
С	Beginning balance				1c					
d	Additions during the year				1d					
е	Distributions during the year				1e					
f	Ending balance				1f					
2a	Did the organization include an amount on F	orm 990, Part X, line	21?			Yes No				
<u>b</u>	If "Yes," explain the arrangement in Part XIV		. <u> </u>							
Par	t V Endowment Funds. Complete	f the organization an	swered "Yes" to Fo	rm 990, Part IV, line	10.					
		(a) Current year	(b) Prior year	(c) Two years back	(d) Three years b	ack (e) Four years back				
1a	Beginning of year balance	998,244.	789,555.	889,450						
b	Contributions	-49,300.	126,000.							
c	Net investment earnings, gains, and losses	243,055.	92,780.	-93,206						
d	Grants or scholarships									
е	Other expenditures for facilities									
	and programs									
f	Administrative expenses	11,101.	10,091.	6,689						
9	End of year balance	1,180,898.	998,244.	789,555						
2	Provide the estimated percentage of the year		s							
а	Board designated or quasi-endowment	100.00	_%							
b	Permanent endowment	%								
С	Term endowment ▶	%								
3a	Are there endowment funds not in the posse	ession of the organiza	ation that are held a	nd administered for	the organization					
	by					Yes No				
	(i) unrelated organizations					3a(i) X				
	(ii) related organizations					3a(ii) X				
b	If "Yes" to 3a(ii), are the related organization:	s listed as required o	n Schedule R?			3ь				
4	Describe in Part XIV the intended uses of the	e organization's endo	wment funds							
Pa	rt VI Land, Buildings, and Equipn	nent. See Form 990	, Part X, line 10							
	Description of investment	(a) Cost or of	ther (b) Cost	or other (c)	Accumulated	(d) Book value				
		basis (investri			epreciation					
1a	Land			5,346.		595,346.				
b	Buildings		11,04	5,364. 1,	,672,013.	9,373,351.				
С	Leasehold improvements									
d	Equipment			6,793.	358,950.	197,843.				
е	Other		1,47	0,826.	563,297.	907,529.				
Tota	I. Add lines 1a through 1e. (Column (d) must e	qual Form 990, Part	X, column (B), line 1	O(c))	>	11,074,069.				

Schedule D (Form 990) 2010

Part VII Investments - Other Securities. S	ee Form 990, Part X, Iir	ne 12.	
(a) Description of security or category (including name of security)	(b) Book value		Method of valuation: end-of-year market value
(1) Financial derivatives			
(2) Closely-held equity interests			
(3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
<u>(F)</u>			
(G)			
(H)			
(0)			
Total (Col (b) must equal Form 990, Part X, col (B) line 12) ▶			
Part VIII Investments - Program Related.	See Form 990, Part X, I		
(a) Description of investment type	(b) Book value		Method of valuation: end-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
(10)			
Total. (Col (b) must equal Form 990, Part X, col (B) line 13) ▶			
Part IX Other Assets. See Form 990, Part X, Im			
	n) Description		(b) Book value
(1)			
(2)			
(3)	 	·	
(4)	··· · · · · · · · · · · · · · · · · ·		
(5)			
(6)			
(7)			· · · · · · · · · · · · · · · · · · ·
(8)			
(9)			
(10)	15)		>
Total. (Column (b) must equal Form 990, Part X, col (B) In Part X Other Liabilities. See Form 990, Part >		:	
120	t, iii e 23	(b) Amount	
1. (a) Description of liability (1) Federal income taxes		(b) / tinodik	
(2) ACCRUED HOLDING LOSS ON	TNTEREST		
(3) RATE SWAP	INTEREDI	220,272.	
(4)		220,212.	
— · · · · · · · · · · · · · · · · · · ·			
<u>(5)</u> (6)			
(7)			
(8)			
(9)			
(10)			
(11)	05)	220 272	
Total. (Column (b) must equal Form 990, Part X, col (B) III FIN 48 (ASC 740) Footnote In Part XIV, provide the text of the footnote String 48 (ASC 740)	to the organization's financial s	statements that reports the organization	's liability for uncertain tax positions under

Part XIV Supplemental Information

Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)

c Add lines 4a and 4b

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, line 2, 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.

PART V, LINE 4: DAY TO DAY OPERATION OF THE SCHOOL.

PART X, LINE 2: EFFECTIVE JULY 1, 2009, THE SCHOOL IMPLEMENTED THE NEW

ACCOUNTING REQUIREMENTS ASSOCIATED WITH UNCERTAINTY IN INCOME TAXES USING
THE PROVISIONS OF FASB ASC 740, INCOME TAXES. USING THAT GUIDANCE, TAX

POSITIONS INITIALLY NEED TO BE RECOGNIZED IN THE FINANCIAL STATEMENTS WHEN
IT IS MORE-LIKELY-THAN-NOT THE POSITIONS WILL BE SUSTAINED UPON

EXAMINATION BY THE TAX AUTHORITIES. IT ALSO PROVIDES GUIDANCE FOR

4c

5

5,450

Part XIV Supplemental Information (continued)

DERECOGNITION, CLASSIFICATION, INTEREST AND PENALTIES, ACCOUNTING IN

INTERIM PERIODS, DISCLOSURE AND TRANSITION.

THE SCHOOL DOES NOT BELIEVE THERE ARE ANY MATERIAL UNCERTAIN TAX

POSITIONS AND, ACCORDINGLY, IT WILL NOT RECOGNIZE ANY LIABILITY FOR

UNRECOGNIZED TAX BENEFITS. THE SCHOOL IS SUBJECT TO ROUTINE AUDITS BY

TAXING JURISDICTIONS; HOWEVER, THERE ARE CURRENTLY NO AUDITS FOR ANY TAX

YEARS IN PROGRESS. THE SCHOOL BELIEVES IT IS NO LONGER SUBJECT TO INCOME

TAX EXAMINATIONS FOR THE YEARS PRIOR TO 2008. AS OF JUNE 30, 2011, THE

SCHOOL HAS NO UNCERTAIN TAX POSITIONS THAT QUALIFY FOR EITHER RECOGNITION

OR DISCLOSURE IN THE FINANCIAL STATEMENTS.

PART XI, LINE 8 - OTHER ADJUSTMENTS:

HOLDING GAIN ON INTEREST RATE SWAP 65,910.

PART XII, LINE 2D - OTHER ADJUSTMENTS:

SPECIAL EVENT EXPENSE 30,785.

HOLDING GAIN ON INTEREST RATE SWAP 65,910.

TOTAL TO SCHEDULE D, PART XII, LINE 2D 96,695.

PART XIII, LINE 2D - OTHER ADJUSTMENTS:

SPECIAL EVENT EXPENSE 30,785.

SCHEDULE E (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Schools

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

► Attach to Form 990 or Form 990-EZ.

OMB No 1545-0047

Open to Public Inspection

Name of the organization TRINITY SCHOOL OF DURHAM AND CHAPEL HILL, INC.

Employer identification number 56-1926923

Par	11			
			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	Х	
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	Х	
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	Х	
	TRINITY SCHOOL PUBLICIZES ITS RACIAL NONDISCRIMINATORY POLICY			
	THROUGH ITS NEWSPAPER ADS WHICH SOLICIT STUDENTS WHICH OCCURS			
	AT LEAST ANNUALLY.			
4	Does the organization maintain the following?			
а	Records indicating the racial composition of the student body, faculty, and administrative staff?	4a	X	
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	4b	X	ļ
С	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student			
	admissions, programs, and scholarships?	4c	X	<u> </u>
d	Copies of all material used by the organization or on its behalf to solicit contributions?	4d	X	ļ
	If you answered "No" to any of the above, please explain. If you need more space, use Part II			
5	Does the organization discriminate by race in any way with respect to:			
а	Students' rights or privileges?	5a		X
b		5b		Х
		5c		Х
d	Scholarships or other financial assistance?	5d		X
е	Educational policies?	5е		Х
f	Use of facilities?	5f		X
9	Athletic programs?	5g		X
h	Other extracurricular activities?	5h		X
	If you answered "Yes" to any of the above, please explain. If you need more space, use Part II.			
.=				1,,
6 a	,	6a		X
b	Has the organization's right to such aid ever been revoked or suspended?	6b	-	X
	If you answered "Yes" to either line 6a or line 6b, explain on Part II			
7	Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05 of			
	Rev. Proc 75-50, 1975-2 C B 587, covering racial nondiscrimination? If "No," explain on Part II	7	X	<u> </u>

<u>Schedule E</u>	(Form 990 or 990-EZ) (2010) AND CHAPEL HILL, INC.	56-1926923	Pa
Part II	Supplemental Information. Complete this part to provide the explanations required by Part I, III as applicable. Also complete this part to provide any other additional information.	nes 3, 4d, 5h, 6b, and 7,	
			
			
		···	
		, i di	
		·····	

SCHEDULE G (Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

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

2010

Den To Public

Name of the organization

Department of the Treasury

Internal Revenue Service

TRINITY SCHOOL OF DURHAM AND CHAPEL HILL, INC.

Inspection
Employer identification number

Schedule G (Form 990 or 990-EZ) 2010

, INC. 56-1926923

Fundraising Activities. required to complete this part	Complete if the organization answers.	ered "Y	'es" to	Form 990, Part IV, I	ine 17. Form 990-EZ	filers are not
 Indicate whether the organization rais a	e Solicitat f Solicitat g Special or oral agreement with any individual art VII) or entity in connection with p viduals or entities (fundraisers) pursi	ion of ion of fundra (includ	non-g gover using o ding o ional f	overnment grants nment grants events fficers, directors, trus undraising services?	stees or Yes	
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) fundr have cr or con contrib	aiser ustody trol of	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
			i 			
		<u> </u>				
otal 3 List all states in which the organizatio or licensing	n is registered or licensed to solicit o	contrib	utions	s or has been notified	d it is exempt from re	egistration
						·
		-				

LHA Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ

TRINITY SCHOOL OF DURHAM

Schedule G (Form 990 or 990 EZ) 2010 AND CHAPEL HILL, INC. Part II Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000

56-1926923 Page 2

		of fundraising event contributions and gr	oss income on Form 990)-EZ, lines 1 and 6b List (events with gross receip	ots greater than \$5,000
			(a) Event #1	(b) Event #2	(c) Other events NONE	(d) Total events (add col (a) through
			GALA	AUCTION		col (c))
e			(event type)	(event type)	(total number)	COI (C))
Revenue	1	Gross receipts	86,911.	36,334.		123,245.
	2	Less. Charitable contributions				
	3	Gross income (line 1 minus line 2)	86,911.	36,334.		123,245.
	4	Cash prizes				
ses	5	Noncash prizes		1,524.		1,524.
Direct Expenses	6	Rent/facility costs	2,294.	1,000.	· · · · · · · · · · · · · · · · · · ·	3,294.
Direct [7	Food and beverages	9,726.	7,511.		17,237.
	8	Entertainment	150.	50.		200
	9	Other direct expenses	150. 4,359.	4,171.		200. 8,530.
	10	•		-,		(30,785)
	11	Net income summary. Combine line 3, colum			.	92,460.
Pa	art		answered "Yes" to Form	990, Part IV, line 19, or r	eported more than	
	1	\$15,000 on Form 990·EZ, line 6a		T		
Revenue			(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col. (c))
<u>~</u>	1	Gross revenue				
ses	2	Cash prizes				
Direct Expenses	3	Noncash prizes				
Direct	4	Rent/facility costs				
	5	Other direct expenses				
			Yes %	☐ Yes%	Yes %	
	6	Volunteer labor	No No	□ No	□ No	
	7	Direct expense summary. Add lines 2 through	n 5 ın column (d)		>	(
	8	Net gaming income summary Combine line 1	L column d. and line 7		•	
			,,			<u> </u>
9	En	ter the state(s) in which the organization opera	tes gaming activities			
a	lst	he organization licensed to operate gaming ac	tivities in each of these :	states?		Yes No
t) If "	No," explain				
		ere any of the organization's gaming licenses re Yes," explain				Yes No
	_					
	92 0	1-13-11			Schodulo C /F	rm 000 or 000 F7) 0010
0320	02 U	1.10.11			ocneaule G (Fol	m 990 or 990-EZ) 2010

TRINITY SCHOOL OF DURHAM AND CHAPEL HILL, INC.

Sch	nedule G (Form 990 or 990 EZ) 2010 AND CHAPEL HILL, INC.	56-1926923 Page:	3
11	Does the organization operate gaming activities with nonmembers?	Yes No	<u> </u>
12	Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed		
	to administer charitable gaming?	Yes No	0
13	Indicate the percentage of gaming activity operated in		
á	a The organization's facility	13a	%
ŀ	b An outside facility	13b	%
14	Enter the name and address of the person who prepares the organization's gaming/special events books and reco	ords	
	Name ►		
			_
	Address		_
15	a Does the organization have a contract with a third party from whom the organization receives gaming revenue?	Yes No	0
I	b If "Yes," enter the amount of gaming revenue received by the organization 🕨 \$ and the amount	ount	
	of gaming revenue retained by the third party ►\$		
•	c If "Yes," enter name and address of the third party		
	Name		_
	Address ▶		_
16	Gaming manager information		
	Name		
	Gaming manager compensation ▶ \$		
	Description of services provided		_
			_
			_
	Director/officer Employee Independent contractor		
17	Mandatory distributions:		
	a is the organization required under state law to make charitable distributions from the gaming proceeds to		
	retain the state gaming license?	Yes N	0
	b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent	t in the	
_	organization's own exempt activities during the tax year ▶ \$		_
P	Supplemental Information. Complete this part to provide the explanations required by Part I, line 2b, column 20 20 to 40 to 45	• • • • • • • • • • • • • • • • • • • •	
_	lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provide any additional in	tormation (see instructions).	
_			_
			_
			_
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_			
_			_
_			
_			_

Schedule K (Form 990) 2010 (i) Pooled financing Yes Employer identification number × OMB No 1545-0047 2010 Open to Public ŝ ž Inspection (g) Defeased (h) On behalf 56-1926923 Yes No of Issuer ۵ Yes Yes × Yes No × ŝ ŝ K QF (f) Description of purpose ပ Yes ,300,000,CONSTRUCTION Yes 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 Part V.

► Attach to Form 990. FINANCE THE CONTINUATIONS ŝ ŝ m Yes Yes (e) Issue price (F) × × × × × ş ŝ SEE PART V FOR COLUMNS (A) AND 10/10/06 (d) Date Issued ⋖ Yes Yes 36 84-0896727|196458W33 02-02-11 LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. (c) CUSIP # Does the organization maintain adequate books and records to support the final allocation of proceeds? Are there any lease arrangements that may result in private business use of TRINITY SCHOOL OF DURHAM Was the organization a partner in a partnership, or a member of an LLC, INC. ▶ Attach to Form 990. (b) Issuer EIN Were the bonds issued as part of an advance refunding issue? Were the bonds issued as part of a current refunding issue? AND CHAPEL HILL, which owned property financed by tax-exempt bonds? Has the final allocation of proceeds been made? EDUCATIONAL AND A CULTURAL FACILITIES AUT Working capital expenditures from proceeds Capital expenditures from proceeds Credit enhancement from proceeds Amount of bonds legally defeased Capitalized interest from proceeds Gross proceeds in reserve funds Proceeds in refunding escrows Issuance costs from proceeds Year of substantial completion (a) Issuer name Private Business Use bond-financed property? Amount of bonds retired Other unspent proceeds Total proceeds of Issue Other spent proceeds Name of the organization **Bond Issues** COLORADO Proceeds Department of the Treasury Internal Revenue Service SCHEDULE K (Form 990) Part III Part II Part 6 9 œ 9 N 8 O ۵ 42 13 4 15 16

56-1926923

INC AND CHAPEL HILL,

Schedule K (Form 990) 2010

ŝ ŝ Yes Yes % % % ŝ ŝ Yes Yes % % % ŝ ŝ 8 α Supplemental Information. Complete this part to provide additional information for responses to questions on Schedule K. Yes Yes % % % ŝ £ × × × × × × Yes Yes × × × \blacktriangle entities other than a section 501(c)(3) organization or a state or local government Enter the percentage of financed property used in a private business use as a **b** Are there any research agreements that may result in private business use of Has a Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Enter the percentage of financed property used in a private business use by result of unrelated trade or business activity carried on by your organization, Were any gross proceeds invested beyond an available temporary period? d Was the regulatory safe harbor for establishing the fair market value of the Are there any management or service contracts that may result in private Has the organization adopted management practices and procedures to 3a Has the organization or the governmental issuer entered into a qualified ensure the post-issuance compliance of its tax-exempt bond liabilities? Does the organization routinely engage bond counsel or other outside another section 501(c)(3) organization, or a state or local government counsel to review any management or service contracts or research Arbitrage Rebate, been filed with respect to the bond issue? Did the bond issue qualify for an exception to rebate? agreements relating to the financed property? 4a Were gross proceeds invested in a GIC? business use of bond-financed property? Part III Private Business Use (Continued) Is the bond issue a variable rate issue? hedge with respect to the bond issue? d Was the hedge superintergrated? e Was the hedge terminated? bond-financed property? Total of lines 4 and 5 **b** Name of provider b Name of provider Part IV Arbitrage c Term of hedge GIC satisfied? c Term of GIC Part V 3a Q ß Ŋ 9 9

%

%

BOND ISSUES PART I, SCHEDULE K, ISSUER NAME: COLORADO EDUCATIONAL AND CULTURAL FACILITIES AUTHORITY DESCRIPTION OF PURPOSE: (A Ξ

FINANCE THE CONSTRUCTION OF A NEW SCHOOL BUILDING AND A STUDENT CENTER

Schedule K (Form 990) 2010

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

032211

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

2010
Open to Public Inspection

Name of the organization

TRINITY SCHOOL OF DURHAM AND CHAPEL HILL, INC.

Employer identification number 56-1926923

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
WITHIN THE FRAMEWORK OF CHRISTIAN FAITH AND CONVICTIONTEACHING THE
CLASSICAL TOOLS OF LEARNING; PROVIDING A RICH YET UNHURRIED CURRICULUM;
AND COMMUNICATING TRUTH, GOODNESS, AND BEAUTY.
FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
BEAUTY.
FORM 990, PART VI, SECTION B, LINE 11: THE FORM 990 IS REVIEWED BY THE
FINANCE COMMITTEE AND THE HEADMASTER PRIOR TO FILING.

FORM 990, PART VI, SECTION B, LINE 12C: MEMBERS OF THE BOARD OF TRUSTEES AND OFFICERS HAVE A CLEAR FIDUCIARY OBLIGATION TO THE SCHOOL IN CONNECTION WITH THEIR SERVICE IN SUCH CAPACITIES. AT ALL TIMES THEY SHALL ACT IN A MANNER CONSISTENT WITH THIS FIDUCIARY OBLIGATION AND SHALL EXERCISE PARTICULAR CARE THAT NO DETRIMENT TO THE INTERESTS OF THE SCHOOL MAY RESULT FROM A CONFLICT BETWEEN THOSE INTERESTS AND ANY PERSONAL INTERESTS WHICH THE INDIVIDUAL TRUSTEE OR OFFICER MAY HAVE. IF ONE OF THE COVERED PERSONS BELIEVES THAT HE OR SHE MAY HAVE A CONFLICT OF INTEREST WITH RESPECT TO ANY TRANSACTION OR DECISION, HE OR SHE SHALL PROMPTLY AND FULLY DISCLOSE THE POTENTIAL CONFLICT TO THE SECRETARY OF THE BOARD OF TRUSTEES DIRECTLY OR THROUGH THE HEADMASTER. NO BOARD MEMBER SHALL VOTE ON ANY MATTER, UNDER CONSIDERATION AT A BOARD OR COMMITTE MEETING, IN WHICH SUCH BOARD MEMBER HAS A CONFLICT OF INTEREST. BOARD MEMBERS SHOULD ABSTAIN FROM PARTICIPATING IN THE DISCUSSION OF THAT MATTER AT THE EARLIEST PRACTICABLE THE MINUTES OF SUCH MEETING SHALL REFLECT THAT A DISCLOSURE WAS MADE LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule O (Form 990 or 990-EZ) (2010)

Department of the Treasury Internal Revenue Service (99)

Depreciation and Amortization (Including Information on Listed Property)

► See separate instructions.

Attach to your tax return.

OMB No 1545-0172

Attachment

Name(s) shown on return

Business or activity to which this form relates

990

Identifying number

TRINITY SCHOOL OF DURH. AND CHAPEL HILL, INC.	AM		FOR	м 9	90 I	PAGE 10		56-1926923
Part Election To Expense Certain Property	Under Section 1	79 Note: If vo					V before v	
Maximum amount (see instructions)			a mare any ne	ιου μ.	о <u>рол (у)</u>	complete ran	1	500,000.
2 Total cost of section 179 property placed	t in service (see	inetriictione)					2	
3 Threshold cost of section 179 property b	•						3	2,000,000.
4 Reduction in limitation. Subtract line 3 fro			× -Ω-				4	2,000,000.
_							5	
5 Dollar limitation for tax year Subtract line 4 from line 1 (a) Description of prop		-0- If mamed file	ng separately, see (b) Cost (busin			(c) Elected		
6 (a) Description of prop	<u></u>		(b) cost (busin		Orliy)	(c) cleated		
								
-1								
7 Listed property. Enter the amount from li		. ,		_	7			
8 Total elected cost of section 179 propert	•	in column (c	c), lines 6 and	1			8	.,-
9 Tentative deduction Enter the smaller o							9	
10 Carryover of disallowed deduction from I	•				_		10	
11 Business income limitation. Enter the sm		•		•	ine 5		11	
12 Section 179 expense deduction Add line				ne 11			12	
13 Carryover of disallowed deduction to 20					13			
Note: Do not use Part II or Part III below for I		·						
Part II Special Depreciation Allowan		•	 		<u> </u>			
14 Special depreciation allowance for qualif	ied property (otł	ner than liste	d property) pl	aced ı	n servi	ce during		
the tax year							14	
15 Property subject to section 168(f)(1) elec	tion						15	460.000
16 Other depreciation (including ACRS)			····				16	463,383.
Part III MACRS Depreciation (Do not	include listed pi			<u>) </u>				
		Se	ection A					
17 MACRS deductions for assets placed in	service in tax ye	ears beginnin	ig before 2010	0			17	437.
18 If you are electing to group any assets placed in service]	
Section B - Assets F				Using	the Ge	neral Deprecia	tion Syst	em
(a) Classification of property	(b) Month and year placed in service	(business/ir	r depreciation nvestment use instructions)	(d)	Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property								
b 5-year property								
c 7-year property								
d 10-year property								
e 15-year property								
f 20-year property								
g 25-year property				2	5 yrs		S/L	
	1			27	7.5 yrs.	MM	S/L	
h Residential rental property	/			1	7.5 yrs.	MM	S/L	
	/			1	9 yrs	MM	S/L	
i Nonresidential real property	/					MM	S/L	
Section C - Assets Pla	aced in Service	During 2010	0 Tax Year U	sing ti	ne Alte		i	stem
20a Class life				T			S/L	
b 12-year				1	2 yrs		S/L	
c 40-year	,				0 yrs	ММ	S/L	
Part IV Summary (See Instructions.)	'	1	···	<u>, '</u>	_ ,	1	<u> </u>	<u> </u>
21 Listed property Enter amount from line	28	 					21	
22 Total. Add amounts from line 12, lines 1.		ee 10 and 00) in column to	hae (line 91			
Enter here and on the appropriate lines of	-						22	463,820.
23 For assets shown above and placed in s	-	•	•		550 113			100,020.
portion of the basis attributable to section	-	- contont yes	, 110		23			
portion of the basis attributable to seem	,							<u> </u>

Form 4562 (2010)

AND CHAPEL HILL, INC.

56-1926923 Page 2

Listed Property (Include automobiles, certain other vehicles, certain computers, and property used for entertainment, recreation, or Part V Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete only 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable Section A - Depreciation and Other Information (Caution: See the Instructions for limits for passenger automobiles) 24a Do you have evidence to support the business/investment use claimed? Yes No 24b If "Yes," is the evidence written? Yes No (c) (e) (a) (i) (a) (d) Date Business Basis for depreciation Elected Type of property Cost or Recovery Method/ Depreciation placed in investment section 179 (business/investment (list vehicles first) Convention deduction other basis period use percentage service use only) cost 25 Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use 25 26 Property used more than 50% in a qualified business use: % % 27 Property used 50% or less in a qualified business use % S/L -% S/L· % S/L· 28 Add amounts in column (h), lines 25 through 27. Enter here and on line 21, page 1 28 29 Add amounts in column (i), line 26 Enter here and on line 7, page 1 29 Section B - Information on Use of Vehicles Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles. (a) (b) (c) (d) **(f)** (e) 30 Total business/investment miles driven during the Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle year (do not include commuting miles) 31 Total commuting miles driven during the year 32 Total other personal (noncommuting) miles driven 33 Total miles driven during the year Add lines 30 through 32 34 Was the vehicle available for personal use Yes Νo Yes Yes No Yes Nο No Yes No Yes No during off-duty hours? 35 Was the vehicle used primarily by a more than 5% owner or related person? 36 Is another vehicle available for personal Section C - Questions for Employers Who Provide Vehicles for Use by Their Employees Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who are not more than 5% owners or related persons. 37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your No Yes employees? 38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners 39 Do you treat all use of vehicles by employees as personal use? 40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received? 41 Do you meet the requirements concerning qualified automobile demonstration use? Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," do not complete Section B for the covered vehicles Part VI Amortization (a) (b) (c) (d) (e) **(f)** Description of costs Amortization Amortization for this year begins period or percentage 42 Amortization of costs that begins during your 2010 tax year: 43 Amortization of costs that began before your 2010 tax year 43 17,32 44 44 Total. Add amounts in column (f) See the instructions for where to report