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Form **990**

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)

OMB No 1545-0047

Open to Public

Department of the Treasury Internal Revenue Service

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

<u> </u>	For the 2	011 calend	dar year, or tax y	ear beginn	ing Jul	1	, 201	1, and e	nding	Jun			012		
В	Check if applicable C Name of organization THE WARDLAW-HARTRIDGE SCHOOL										D Employer I	dentificat	tion Number		
	Address	s change	Doing Business A	∖ s							22-21	0961	0		
	Name o	change	Number and stree	et (or PO box	of mail is not	delivered to str	reet addr)	R	loom/si	uite	E Telephone	number			
	Initial re		1295 INMAN	AVENU	Ε						(908)	754	-1882		
	Termin		City, town or cou		-		Stat	e ZIP cod	de + 4		, ,		-		
	\vdash	ed return	EDISON				NJ	088	20	G Gross receipts \$ 13,822,286.					
	Ħ	ition pending		ss of orincipal	officer					H(a) Is this) is this a group return for affiliates? Yes X No				
		mon pending	ANDREW WEBSTER	, ,		E EDISO	N M	1J 088	20 1		affiliates include		Yes	No	
_	Tax-exem	int etatue	X 501(c)(3)	501(c) (nsert no)	4947(a)(1)			If 'No,'	attach a list (se	e instruct	tions)	_	
÷	Websit		W.WHSCHOOL		<u> </u>	noore no y	1 1017(4)(1)	9. 1 102		H(c) Group	exemption numb	er ►			
у		rganization	X Corporation	Trust	Association	Other ►		Year of F		on 197			domicile NJ		
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1 0	1 Brie		be the organization	nn's missio	n or most s	ignificant a	ctivities: F	DUCATI	ON -	COLLEGE	PREPARATO	RY INC	DEPENDENT S	CHOOL	
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Activities & Governance															
Ë															
ove	2 Che	eck this bo	ox ► If the o	rganization	discontinu	ed its opera	ations or disp	osed of	more	than 25	% of its net a	ssets			
Ğ	3 Nur	mber of vo	ting members of	the govern	ing body (F	art VI, line	1a)					3		19	
8			dependent voting									4		19	
į			of individuals en			ar 2011 (P	art V, line 2a	a)	•			5		216	
į			of volunteers (es			400 1	10				—	6		60	
⋖			ed business rever									7a 7b	.	<u>0.</u>	
	b Net	unrelated	business taxable	e income tr	om Form 9	90-1, line 3	34	•		T -		/ 	Current Yea		
			(Dort	. \	L \					ļ <u>-</u>	rior Year 479,81	- -	627,		
ā			and grants (Part							12	,156,34		13,067,		
ē	1	_	rice revenue (Par icome (Part VIII,			and 7d)				12	52,98			261.	
Revenue			e (Part VIII, colur				and 11e)					0.		0.	
_			e – add lines 8 th					ine 12)		12	,689,14		13,741,		
			ımılar amounts p							-	,498,20		3,676,		
	1	14 Benefits-paid to or for members (Part IX, column (A), line 4)										-,,			
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)							6	,145,12	5.	6,583,	268.			
es		16a Professional fundraising fees (Part IX; column (A), line 11e)													
Expenses	104110	otal [fundraising less (Part IX, column (D), line 25) ►							 2 0		23428	2 8 2 1 1 1 1 1		SawiK.	
ă	b 101	1034 "	•	1.7				002,03	39.						
_	17 Otr		es (Part.IX, colu								993,51	1	3,313,		
			es∝Add lines 13-				A), line 25)			12	2,636,84		13,573,		
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P 00	1		(D) \ () 16\								ng of Current Y		End of Yea		
Becom			(Part X, line 16)	= \							3,012,57 3,222,47		18,275, 3,390,		
Not Assets Fund Belen	L		es (Part X, line 26												
_			fund balances	Subtract lin	e 21 from I	ine 20	·.·			14	790,10	<u>p·1</u>	14,884,	829.	
			re Block												
Und	er penalties iplete Declar	of perjury, I d ration of prep	eclare that I have exar arer (other than officer	mined this return is based on a	ırn, including a all information	ccompanying s of which prepa	schedules and st arer has any kno	atements, a wledge	and to	the best of r	ny knowledge ar	id belief,	it is true, correct,	and	
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_			is return with the		_				<u>.</u>		·	2	X Yes	No	
BA	A For Pa	perwork F	Reduction Act No	tice, see th	ne separate	instruction	ns.		TE	EA0101 07	7/05/11		Form 990	(2011)	

Form	n 990 (2011) THE WARDLAW-HARTRIDGE SCHOOL	22-2109610	Page 2
Pai	rtबाद्धि Statement of Program Service Accomplishments		
	Check if Schedule O contains a response to any question in this Part III		
1	Briefly describe the organization's mission		
	EDUCATION - COLLEGE PREPARATORY INDEPENDENT SCHOOL		
2	Did the organization undertake any significant program services during the year which were not listed on		
	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 serv	ices? Yes	X No
	If 'Yes,' describe these changes on Schedule O.		
4	Describe the organization's program service accomplishments for each of its three largest program service Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the am	es, as measured by exp	oenses ations to
	others, the total expenses, and revenue, if any, for each program service reported	ount or grants and anoc	00000
48	a (Code:) (Expenses \$ 11,068,116. including grants of \$ 3,676,374.) (F	Revenue \$	0.)
	EDUCATION OF PRE-K TO GRADE 12 STUDENTS		
41	b (Code) (Expenses \$ including grants of \$) (F	Revenue \$	
•	, (code) (Expenses + minerally given to,		
	c (Code:) (Expenses \$ including grants of \$) (I	Revenue \$	<u> </u>
41	Code / (Expenses γ including grants of γ / (
	d Other program services. (Describe in Schedule O.)		
4	(Expenses \$ including grants of \$) (Revenue \$)
	e Total program service expenses ► 11,068,116.		
4	e i otal program Service expenses > 11,000,110.		m 000 (2011)

	•		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	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations Did the organization engage in lobbying activities, 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		<u> x</u>
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which 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 temporarily restricted endowments, permanent endowments, or quasi-endowments? If 'Yes,' complete Schedule D, Part V .	10	Х	
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.			-
á	a Did the organization report an amount for land, buildings and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI	11 a	Х	
ı	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	11 b		Х
(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	11 c		Х
	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	11 d		Х
	e Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X	11 e	Х	
1	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	11 f		Х
12	a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI, XII, and XIII	12a	х	
	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		х
	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13	X	 -
	a Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
ı	b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If 'Yes,' complete Schedule F, Parts I and IV	14b		х
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		х
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 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, column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I (see instructions)	17		х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II	18	х	
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		х
	a Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H	20		Х
1	b If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?	20 b	<u> </u>	<u> </u>

Form 990 (2011) THE WARDLAW-HARTRIDGE SCHOOL Part IV Checklist of Required Schedules (continued)

	•	T	Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the			
21	United States on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II	21		Х
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	х	
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? <i>If 'Yes,' complete Schedule J</i>	23	х	
24 2	a 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, and that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No,'go to line 25	24a		х
ŀ	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
(Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
•	Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		
25 a	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		Х
ŀ	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		X
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		х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If 'Yes,' complete Schedule L, Part III	27		Х
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)			
á	A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a	ļ	х
ŀ	A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28b		х
•	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		х
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M .	29	<u> </u>	Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		Х
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		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		x
35 a	a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
ı	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	35b		х
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	
BAA		Forn	n 990 i	(2011)

Form 990 (2011) THE WARDLAW-HARTRIDGE SCHOOL 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 . 1a	8		
b Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	0		
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1 c	x	
2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 2a	216		
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	
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		X
b If 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule O	3b		
4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		х
b If 'Yes,' enter the name of the foreign country			
See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			-
5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5 b		X
c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?	6a		х
b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6ь		
7 Organizations that may receive deductible contributions under section 170(c).			
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and			<u> </u>
services provided to the payor?	7a		Х
b If 'Yes,' did the organization notify the donor of the value of the goods or services provided?	7b	ļ	<u> </u>
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7 c	ļ	х
d if 'Yes,' indicate the number of Forms 8282 filed during the year 7d			
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7 f		X
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7 g		
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		x
9 Sponsoring organizations maintaining donor advised funds.			
a Did the organization make any taxable distributions under section 4966?	9a		х
b Did the organization make a distribution to a donor, donor advisor, or related person?	9 b		Х
10 Section 501(c)(7) organizations. Enter:			
a Initiation fees and capital contributions included on Part VIII, line 12			
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11 Section 501(c)(12) organizations. Enter:			
a Gross income from members or shareholders . 11a			
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year 12b			
13 Section 501(c)(29) qualified nonprofit health insurance issuers.		1	1
a is the organization licensed to issue qualified health plans in more than one state?	13a		L
Note. See the instructions for additional information the organization must report on Schedule O.			
b 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			
c Enter the amount of reserves on hand		L.	
14a Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х
b If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule O	14b		
ZAA TEEANINE OZINEUL		- 000	(2011)

Form 990 (2011) THE WARDLAW-HARTRIDGE SCHOOL 22-2109610 Page 6 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. X 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 19 1a If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O. b Enter the number of voting members included in line 1a, above, who are independent 19 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 Х Did the organization delegate control over management duties customarily performed by or under the direct supervision 3 X of officers, directors or trustees, or key employees to a management company or other person? Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 Х X Did the organization have members or stockholders? 6 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? 7 a Х b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or other persons other than the governing body? 7 b Х Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? 8 a b Each committee with authority to act on behalf of the governing body? 8b X Is there any officer, director or 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 9 Х Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No 10a Did the organization have local chapters, branches, or affiliates? 102 Х b if 'Yes.' did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10 b X 11 a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11 a b Describe in Schedule O the process, if any, used by the organization to review this Form 990 12a Did the organization have a written conflict of interest policy? If 'No,' go to line 13 12a Х b Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Х 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this is done 12c Х Did the organization have a written whistleblower policy? Х 13 14 Did the organization have a written document retention and destruction policy? 14 Х 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? a The organization's CEO, Executive Director, or top management official 15 a b Other officers of key employees of the organization 15b Х 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? 16 a b If 'Yes,' did the organization follow 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 List the states with which a copy of this Form 990 is required to be filed ▶ New Jersey Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply. Own website Another's website Upon request Describe in Schedule O whether (and if so, how) the organization makes its governing documents, conflict of interest policy, and financial statements available to the public during the tax year State the name, physical address, and telephone number of the person who possesses the books and records of the organization 1295 INMAN AVENUE EDISON (908) 754-1882

Partivil 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

- 1 a 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 nor any related organization compensated any current officer, director, or trustee

Check this box it fleither the organization	l Horarry	(C)			ii con	iperi	sated any current one	cer, director, or trustee	<u> </u>	
(A) Name and title	(B) Average hours per week	Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation
	(describe hours for related organiza- tions in Schedule O)	advidad folkee or director	mshluhoazi kustee	Officer	key employee	Higt est compensated employee	r orner	(W-2/1099-MISC)	(W-2/1099-MISC)	from the organization and related organizations
(1) PETER MINNIUM TRUSTEE	8.00	х						0.	0.	0.
(2) SHEELAGH CLARKE TRUSTEE	8.00	х						0.	0.	0.
(3) JEAN BADALAMENTI TRUSTEE	8.00	х						0.	0.	0.
(4) JEANNE BARBET TRUSTEE	8.00	х						0.	0.	0.
(5) FRANCES BESSETTE TRUSTEE	8.00	х						0.	0.	0.
(6) GREGORY CASAGRANDE TRUSTEE	8.00	X						0.	0.	0.
(7) ANTHONY D'AMORE TRUSTEE	8.00	х						0.	0.	0.
(8) SIMON LACK TRUSTEE	8.00	х						0.	0.	0.
(9) ERICA NEEDLE TRUSTEE	8.00	x						0.	0.	0.
(10) SURESH NICHANI TRUSTEE	8.00	х						0.	0.	0.
(11) OMOWUNMI OSINUBI TRUSTEE	8.00	х						0.	0.	0.
(12) RANDOLPH ROGERS TRUSTEE	8.00	х						0.	0.	0.
(13) RONALD STARNER TRUSTEE	8.00	х						0.	0.	0.
(14) LAURA STEVENS TRUSTEE	8.00	х						0.	0.	0.

Part VII Section A. Officers, Directors, Trust	ees, r	ley	Em	plo	ye	es,	and	Highest Com	pensated Emp	loyees (cont)
(A) Name and title	(B) Average hours	box,	not che unless er and	s per	tion more son	ıs bot	h an	(D) Reportable compensation from	(E) Reportable compensation from	(F) Estimated amount of other
	per week (describ e hours for related organi- zations in Sch O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(15) EDWARD ENGLISH TRUSTEE	8.00	х						0.	0.	0.
(16) HARRY OSBORNE PRESIDENT	8.00			x				0.	0	0.
(17) NOORALI SONAWALLA VICE PRESIDENT	8.00			x				0.	0	0.
(18) PAMELA HATTEM SECRETARY	8.00			x				0.	0	0.
(19) LOUIS RIZZO TREASURER	8.00			x				0.	0	
(20) SURESH MODY ASSISTANT SECRETARY/TREASURER	8.00			х				0.	0	
(21) ANDREW WEBSTER HEADMASTER	40.00				х			166,330.	0	31,760.
(22)										
(23)										
(24)										
(25)										
1 b Sub-total c Total from continuation sheets to Part VII, Section A	4						>	166,330.	0	
 d Total (add lines 1b and 1c) 2 Total number of individuals (including but not limited from the organization 1 	l to thos	se lis	ted a	bov	/e) \	who	rece	166,330. erved more than \$	0 100,000 of reportal	31,760. Die compensation
						•				Yes No
3 Did the organization list any former officer, director on line 1a? If 'Yes,' complete Schedule J for such in	dıvıdua	1	-	•	•		Ĭ	·	, ,	3 X
4 For any individual listed on line 1a, is the sum of rep the organization and related organizations greater th such individual	oortable ian \$15	0,00	npens 0? <i>If</i>	satio 'Ye	on a	and o omp	othei <i>lete</i>	r compensation fro Schedule J for 	om	4 X
5 Did any person listed on line 1a receive or accrue or for services rendered to the organization? If 'Yes,' or	ompens omplete	atior Sch	n fron nedul	n ar <i>e J</i>	ny u for	nrel suct	ated <i>per</i>	organization or inson	ndıvıdual	5 X
1 Complete this table for your five highest compensate compensation from the organization Report comper	ed indeposation	oend for ti	ent c	ontr	racte	ors t	hat end	received more tha	n \$100,000 of the organization's	tax year.
(A) Name and business addres								(8) Description)	(C) Compensation
AETNA 88218 EXPEDITE WAY CH				IL NJ				HEALTH INS		505,729. 166,305.
ENCON PO BOX 2293 3433 SUNSET AVENUE OC	EAN	TWE		ŊJ	()77	12	REPAIRS AND N	MAINTENANCE	146,262.
tion of the second seco	BURN NASQ			MA NJ				FOOD SERVI		207,642. 186,701.
2 Total number of independent contractors (including \$100,000 in compensation from the organization ►	but not	lımıt	ed to	tho	se	 liste	d ab	ove) who received	I more than	

	•		(A) Total revenue	(B) Related or exempt function	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections
	1.5.4	.		revenue		512, 513, or 514
STS	1a Federated campaigns 1a					
S S	b Membership dues 1b	00.006				
AN.	c Fundraising events 1 c	88,086.				
5₹	d Related organizations 1d					
SIS	e Government grants (contributions) 1 e					
CONTRIBUTIONS, GIFTS, GRANTS AND OTHER SIMILAR AMOUNTS	f All other contributions, gifts, grants, and similar amounts not included above	539,285.				
A S	g Noncash contributions included in Ins 1a-1f \$					
	h Total. Add lines 1a-1f	Business Code	627,371.			
PROGRAM SERVICE REVENUE	22 THITTON AND FEEC		 10 040 576	10 040 576		
₫	+	611600 611710		12,049,576.	0.	0.
8		900099	417,467.	417,467.	0.	0.
<u> </u>		531120	291,840.	291,840.	0.	0.
M SE	+	900099	197,110.	197,110.	0.	0.
¥.	f All other program service revenue	900099	111,906.	111,906.	0.	0.
ĕ	g Total. Add lines 2a-2f	•	12 067 000			
-			13,067,899.		<u></u>	
	3 Investment income (including dividends other similar amounts)	, interest and	46,261.	46,261.	ο.	о.
	4 Income from investment of tax-exempt	hond proceeds	10,201.	10/2011		_
	5 Royalties	▶				
ı	(i) Real	(II) Personal				
1	6a Gross rents					
	b Less rental expenses	1		*		ê
	c Rental income or (loss)					
	d Net rental income or (loss)	•				
	7a Gross amount from sales of assets other than inventory	(ii) Other				*
	b Less cost or other basis and sales expenses				:	
	c Gain or (loss)					
	d Net gain or (loss)					
OTHER REVENUE	8a Gross income from fundraising events (not including \$ 88,086.					
<u>ا</u> پت	of contributions reported on line 1c)					
8	•	a 80,755.				
Ӗ	a zooo an oot onponooo	b 80,755.	-			
_	c Net income or (loss) from fundraising e	vents -	0.		0.	0.
		a				
	= 2000. amost expenses	b			·	
	c Net income or (loss) from gaming activity	ıtı <u>es</u>				
		a				
	2 2000 0001 01 g0000 0010	b[
ļ	c Net income or (loss) from sales of inver					
ŀ	Miscellaneous Revenue	Business Code				
	11a					·
	b					
	d All other revenue				<u> </u>	
	e Total. Add lines 11a-11d					
	12 Total revenue. See instructions	•	13 7/1 521	13 114 160		
	12 Total revenue, See Histructions		13,741,531.	113,114,160.	0.	0.

Part IX | Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns
All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

	Check if Schedule O contains a re	esponse to any question	in this Part IX		
Do 6b,	not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1				governous and the second secon	SAPONISCE
2	Grants and other assistance to individuals in the United States. See Part IV, line 22	3,676,374.	3,676,374.		
3	Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16				
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees	166,330.	166,330.	0.	0.
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	5,325,822.	4,053,171.	1,173,392.	99,259.
8	Pension plan accruals and contributions (include section 401(k) and section 403(b)				
٥	employer contributions)	239,793.	184,228.	51,231.	4,334.
10		410,593. 440,730.	315,450.	87,723.	7,420.
10	Fees for services (non-employees).	440,730.	338,603.	94,161.	7,966.
	a Management				
	b Legal	13,395.	0.	13,395.	
	c Accounting	32,400.	0.	32,400.	0.
	d Lobbying .	32,400.		32,400.	0.
	e Professional fundraising services See Part IV, line 17		. 448.8 8	7 % 10 % % %	
	f Investment management fees	11,827.	0.	11,827.	0.
	g Other	11,027.		11,021.	<u></u>
	Advertising and promotion	83,412.	69,232.	13,046.	1,134.
13	Office expenses	274,911.	178,692.	82,473.	13,746.
14	Information technology	2,1,311.	110,032.	02/1/3.	13, 140.
15	Royalties				
16	Occupancy .				
17	Travel				
	Payments of travel or entertainment expenses for any federal, state, or local public officials				···
19	Conferences, conventions, and meetings	15,542.	12,667.	2,431.	444.
20	Interest .	90,314.	73,606.	14,125.	2,583.
21	Payments to affiliates				
22	Depreciation, depletion, and amortization .	585,727.	477,368.	91,608.	16,751.
23	Insurance	141,018.	114,930.	22,055.	4,033.
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)			÷	
:	a REPAIRS AND MAINTENANCE	435,200.	354,688.	68,065.	12,447.
١	ADMINISTRATIVE	311,935.	82,656.	184,621.	44,658.
•	CUTILITIES	297,394.	242,376.	46,512.	8,506.
(dATHLETIC	236,188.	236,188.	0.	0.
(e All other expenses	784,733.	491,557.	133,618.	159,558.
25	Total functional expenses. Add lines 1 through 24e	13,573,638.	11,068,116.	2,122,683.	382,839.
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here				
	SOP 98-2 (ASC 958-720)				
	•			<u> </u>	Form 900 (2011)

Pa	<u>rt X</u>	Balance Sheet			
		•	(A) Beginning of year		(B) End of year
	1	Cash – non-interest-bearing	350.	1	_350.
	•	Savings and temporary cash investments	1,901,875.	2	2,639,007.
		Pledges and grants receivable, net	46,400.	3	38,281.
ļ	4	Accounts receivable, net	134,923.	4	176,077.
	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 employees' beneficiary organizations (see instructions)		6	
A S E T S	7	Notes and loans receivable, net	48,800.	7	48,800.
Ē	8	Inventories for sale or use	35,508.	8	27,484.
s	9	Prepaid expenses and deferred charges	139,779.	9	117,717.
	10 a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a 23,202,680.			
	b	Less: accumulated depreciation 10b 9,568,351.	13,879,637.	10 c	13,634,329.
	11	Investments – publicly traded securities	1,810,923.	11_	1,569,350.
	12	Investments – other securities See Part IV, line 11		12	
	13	Investments - program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets See Part IV, line 11	14,383.	15	24,182.
	16	Total assets. Add lines 1 through 15 (must equal line 34)	18,012,578.	16	18,275,577.
	17	Accounts payable and accrued expenses	791,058.	17	723,743.
	18	Grants payable		18	
	19	Deferred revenue		19	<u> </u>
Ļ	20	Tax-exempt bond liabilities .		20	<u>.</u>
Å	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
AB-L-T	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L.		22	n selve
Ë	23	Secured mortgages and notes payable to unrelated third parties .	1,392,345.	23	1,322,609.
Š	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D.	1,039,069.	25	1,344,396.
	26	Total liabilities. Add lines 17 through 25	3,222,472.	26	3,390,748.
- FE		Organizations that follow SFAS 117, check here ► X and complete lines	,	1	
Ŧ		27 through 29 and lines 33 and 34.			
Ş	27	Unrestricted net assets .	12,714,288.	27	12,960,672.
くいろましん	28	Temporarily restricted net assets	1,143,869.	28	979,187.
	29	Permanently restricted net assets	931,949.	29	944,970.
Q R		Organizations that do not follow SFAS 117, check here ▶ ☐ and complete			
F.		lines 30 through 34.		_	_
FUZO	30	Capital stock or trust principal, or current funds		30	
	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
Ď					1
A L A	32			32	
BALAZCWS		Retained earnings, endowment, accumulated income, or other funds Total net assets or fund balances	14,790,106.	32	14,884,829.

BAA

Form 990 (2011)

Form 9	990 (2011) THE WARDLAW-HARTRIDGE SCHOOL 2	2-210961	LO	Pa	ige 12		
Part	XI Reconciliation of Net Assets						
	Check if Schedule O contains a response to any question in this Part XI				_x		
1 T	Total revenue (must equal Part VIII, column (A), line 12)	1	13,7	41,5	31.		
2 T	Total expenses (must equal Part IX, column (A), line 25)	. 2	13,5	73,6	38.		
3 F	Revenue less expenses Subtract line 2 from line 1	3	1	67,8	93.		
4 N	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	. 4	14,7	90,1	06.		
5 (Other changes in net assets or fund balances (explain in Schedule O)	5	_	73,1	70.		
6 N	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6	14,8	84.8	29.		
Part	XII Financial Statements and Reporting						
	Check if Schedule O contains a response to any question in this Part XII						
	<u> </u>			Yes	No		
1 <i>A</i>	Accounting method used to prepare the Form 990 🔲 Cash 🔃 Accrual 🔲 Other		_ *	, *	· ·		
11 11	f the organization changed its method of accounting from a prior year or checked 'Other,' explain n Schedule O			, t	\$ × .		
2a V	Vere the organization's financial statements compiled or reviewed by an independent accountant?	,	2a		X		
b V	Vere the organization's financial statements audited by an independent accountant?		2b	х			
c II	f 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of eview, or compilation of its financial statements and selection of an independent accountant?	f the audit,	2c	×			
li li	f the organization changed either its oversight process or selection process during the tax year, explain n Schedule O.			\$			
d I1	f 'Yes' to line 2a or 2b, check a box below to indicate whether the financial statements for the year were iss separate basis, consolidated basis, or both:	sued on a	> <	, .	!		
[X Separate basis Consolidated basis Both consolidated and separate basis				atrat management of		
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?							
b II	f 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the re or audits, explain why in Schedule O and describe any steps taken to undergo such audits	quired audit	3b		_		

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

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

OMB No 1545-0047

2011

Department of the Treasury Internal Revenue Service Name of the organization

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

Open to Public Inspection

Employer identification number

	_	ARDLAW-HARTRI	DGE SCHOOL						22-23	<u> 10961</u>	0	
Parl		Reason for Pub	lic Charity Status	(All organizations	must d	comple	te this	part.)	See i	nstruct	ions.	
The o	rga	nization is not a priva	te foundation because	it is: (For lines 1 through	gh 11, cl	heck onl	y one bo	ox)		-		
1	\Box	A church, convention	of churches or assoc	ation of churches desci	ribed in s	section	- 1 70(b)(1	χΑχί).				
2	$\overline{\mathbf{x}}$			(ii). (Attach Schedule E			, ,,					
3	П			organization described		ion 170	ΈΥ1ΥΑ)	(iii).				
4	П			in conjunction with a ho					Ι ΥΙΥΔΥ	'iii) Ente	er the hospital's	
•	ш	name, city, and state		ari ooriganiononi mara a ric	opiiai di	330504	5000	o (~X · X · X		i the hospitars	
5			ated for the benefit of	a college or university	owned o	r operat	ed by a	governn	nental u	nıt descr	ribed in section	
6		A federal, state, or lo	ocal government or go	vernmental unit describ	ed in se	ction 17	0(b)(1)(/	۹)(v).				
7												
8	\sqcup	A community trust de	escribed in section 17 0	0(b)(1)(A)(vi). (Complete	e Part II.)						
9		from activities related investment income a	d to its exempt function	more than 33-1/3% of ns — subject to certain taxable income (less s nplete Part III)	exceptio	ns, and	(2) no r	nore tha	ın 33-1/3	3% of its	support from gross	
10		An organization orga	nized and operated ex	clusively to test for pub	olic safet	y. See s	ection 5	509(a)(4)).			
11		more publicly suppor	ted organizations desc	cclusively for the benefit cribed in section 509(a) on and complete lines 1	(1) or se	ection 50)9(a)(2).	ions of, See se	or carry ction 50	out the 9(a)(3).	purposes of one or Check the box that	
		a Type I	b	c ☐ Type III	l – Func	tionally	ıntegrate	ed		d \square	Type III - Other	
е		By checking this box other than foundation section 509(a)(2).	, I certify that the orga n managers and other	nization is not controlle than one or more public	ed directly cly supp	y or indi orted or	rectly by ganization	one or	more d cribed in	squalifie section	ed persons 509(a)(1) or	
f		. , , ,	ceived a written deteri	mination from the IRS t	hat is a	Type I, T	Type II o	r Type I	II suppo	rtıng org	anization,	
g			06. has the organizatio	on accepted any gift or	contribu	tion from	n anv of	the follo	owina ni	ersons?		
9			,	accopton any gift of			,		og p	3.00113	Yes No	
		(i) A person who	directly or indirectly co	ntrols, either alone or to	oaether v	with per	sons des	scribed	ın (ıı) ar	d (III)	163 110	
		below, the gove	erning body of the sup	ported organization?		•			()	,	11 g (i)	
		(ii) A family memb	er of a person describ	ed ın (ı) above?							11 g (ii)	
		(iii) A 35% controlle	ed entity of a person d	escribed in (i) or (ii) ab	ove?						11 g (iii)	
h		Provide the following	information about the	supported organization	n(s)							
		(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	organiz column (your go	Is the sation in its listed in overning ment?	the organ	ou notify nization in n (i) of upport?	organiz colur	s the ation and (i) ed in the	(vii) Amount of support	
					Yes	No	Yes	No	Yes	No		
(A)												
							<u> </u>					
(B)					1							
					1						=-	
(C)					1							
		<u>.</u>										
(D)												
-,					 			-				
E)							1					
	_				 		 					
Fotal			1	:								
	For	Paperwork Reduction	n Act Notice, see the	Instructions for Form 9	990 or 99)0-EZ.		L	Schedul	e A (For	m 990 or 990-EZ) 2011	

Part II 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.)

Sec	tion A. Public Support			-			
Cale: begi:	ndar year (or fiscal year nning in) ►	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include 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)		٧	,			
6	Public support. Subtract line 5 from line 4						
Sec	tion B. Total Support				1		
Cale begi	ndar year (or fiscal year nning in) ►	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
7	Amounts from line 4						
8	Gross income from interest, 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 activ	ities, etc (see inst	tructions)			12	
	First five years. If the Form 990 organization, check this box and	stop here .		d, third, fourth, or	fifth tax year as a	section 501(c)(3) ▶ □
Sec	tion C. Computation of Pu						
14				e 11, column (f)) .	• • •	14	<u>%</u> %
15	Public support percentage from 2			,			
	33-1/3% support test – 2011. If t and stop here. The organization	qualifies as a pub	olicly supported or	ganization	•		- 1
	33-1/3% support test — 2010. If t and stop here. The organization	qualifies as a pub	olicly supported or	ganization	•	• • •	• 🗆
176	a 10%-facts-and-circumstances to or more, and if the organization in the organization meets the 'facts	meets the 'facts-a	nd-circumstances	i' test, check this t	oox and stop here	. Explain in Part	IV how
I	o 10%-facts-and-circumstances to or more, and if the organization organization meets the 'facts-and	meets the 'facts-a d-circumstances' f	ind-circumstances test. The organiza	s' test, check this b ition qualifies as a	oox and stop here publicly supporte	. Explain in Part d organization	IV how the
18	Private foundation. If the organiz	zation did not che	ck a box on line 1	3, 16a, 16b, 17a,			990 or 990-FZ) 2011

Schedule A (Form 990 or 990-EZ) 2011 THE WARDLAW-HARTRIDGE SCHOOL 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.)

Sect	tion A. Public Support						
	dar year (or fiscal yr beginning in)►	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
	Gifts, grants, contributions and membership fees received (Do not include any 'unusual grants')						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513						·
5	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						
7 a	Total. Add lines 1 through 5 Amounts included on lines 1, 2, and 3 received from disqualified persons						
	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year	,					
С	Add lines 7a and 7b						
	Public support (Subtract line 7c from line 6.)						
	tion B. Total Support						
Calend	lar year (or fiscal yr beginning in)►	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
10 a b	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
	Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13	Total support. (Add Ins 9, 10c, 11, and 12)						
	First five years. If the Form 990 organization, check this box and			i, third, fourth, or	fifth tax year as a	section 501(c)(3)	▶ □
	tion C. Computation of Pu						
	Public support percentage for 20	- ·	• • •	: 13, column (f))	•	15	
	Public support percentage from 2			··		16	ક
	tion D. Computation of Inv					y	
	Investment income percentage for	•	• •	•	n (f))	17	
	Investment income percentage fr					18	- 8
	33-1/3% support tests – 2011. If is not more than 33-1/3%, check	this box and stop	here. The organiz	zation qualifies as	a publicly suppor	ted organization	▶ [
	33-1/3% support tests — 2010. If line 18 is not more than 33-1/3%					_	1/3%, and zation ► □
20	Private foundation. If the organiz	ation did not ched	ck a box on line 14	1, 19a, or 19b, che	eck this box and s	ee instructions	<u> </u>

Schedule A	(Form 990 or 990-E2	Z) 2011 THE	WARDLAW-HA	ARTRIDGE SC	CHOOL	22-2109610	Page 4
Part IV	Supplemental Ir Part II, line 17a (See instruction	nformation. Co	omplete this part III, line 12	oart to provide 2. Also comple	e the explanation ete this part for	ns required by Part II, lir any additional informatio	ne 10; on.
							
							
							
							
				- -			
			_				
-							

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

Supplemental Financial Statements

► Complete if the organization answered 'Yes,' to Form 990, Part IV, lines 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ► Attach to Form 990. ► See separate instructions. OMB No 1545-0047

2011

Open to Public Inspection

Employer Identification number

THE	E WARDLAW-HARTRIDGE SCHOOL			2:	2-2109610	
Pái	Organizations Maintaining Dono the organization answered 'Yes'	or Advised Funds or Other to Form 990, Part IV, line	er Similar Fund e 6.	s or Accou	nts. Complete	e ıf
		(a) Donor advised	funds	(b) Fun	ds and other acco	ounts
1	Total number at end of year	(4)		(2) , 2	20 21.4 01.101 400.	
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 dor funds are the organization's property, subject	to the organization's exclusive	legal control?		Yes	☐ No
6	Did the organization inform all grantees, dono used only for charitable purposes and not for t purpose conferring impermissible private bene	the benefit of the donor or dono			Yes	□No
Par	t II Conservation Easements. Comp	lete if the organization a	nswered 'Yes' t	o Form 990	Part IV line	7
	Purpose(s) of conservation easements held by			5,,,, 2,00	,	
•	Preservation of land for public use (e.g., r	, ,	— · · · · ·	an historically	important land a	rea
	Protection of natural habitat		Preservation of	-	· ·	
	Preservation of open space					
2	Complete lines 2a through 2d if the organization last day of the tax year	on held a qualified conservation	contribution in the	form of a con	servation easeme	ent on the
				Hel	d at the End of th	e Tax Year
ā	Total number of conservation easements	•		2a		
t	Total acreage restricted by conservation easer	ments		2b		
•	Number of conservation easements on a certif	fied historic structure included i	n (a)	2c		
c	Number of conservation easements included in structure listed in the National Register	n (c) acquired after 8/17/06, an	d not on a historic	2d		
3	Number of conservation easements modified, tax year ►	transferred, released, extinguis	hed, or terminated	by the organiz	ation during the	
4	Number of states where property subject to co	onservation easement is located	! ►			
5	Does the organization have a written policy re and enforcement of the conservation easemer	garding the periodic monitoring	, inspection, handli	ng of violation	s, Yes	□No
6	Staff and volunteer hours devoted to monitoring					
7	Amount of expenses incurred in monitoring, in	nspecting, and enforcing conser	vation easements o	during the year		
8	Does each conservation easement reported or 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?	n line 2(d) above satisfy the rec	quirements of section	n	Yes	☐ No
9	In Part XIV, describe how the organization rep include, if applicable, the text of the footnote t conservation easements	ports conservation easements in to the organization's financial st	n its revenue and extatements that desc	xpense statem ribes the orga	ent, and balance nızatıon's accoun	sheet, and ting for
Pai	Complete if the organization ans	ections of Art, Historical swered 'Yes' to Form 990	Treasures, or 0 , Part IV, line 8	Other Simil	ar Assets.	
1 8	a If the organization elected, as permitted under art, historical treasures, or other similar asset in Part XIV, the text of the footnote to its finan	s held for public exhibition, edu	ication, or research	statement and in furtherance	d balance sheet very of public service	works of e, provide,
ŀ	o If the organization elected, as permitted under historical treasures, or other similar assets he following amounts relating to these items:	r SFAS 116 (ASC 958), to repoiled for public exhibition, educate	rt in its revenue sta on, or research in fi	tement and ba urtherance of p	ilance sheet work oublic service, pro	s of art, ovide the
	(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 a amounts required to be reported under SFAS	irt, historical treasures, or other 116 (ASC 958) relating to these	similar assets for t e items:	financial gain,	provide the follow	ving
ä	a Revenues included in Form 990, Part VIII, line	e 1 .			► \$	
	Assets included in Form 990, Part X.				► \$	

Tart III Organizations mainta	ming Conection	is of Art, mist	nica	rreasures, or	Other Similar ASS	et2 (c	onunu	leu)
3 Using the organization's acquisition items (check all that apply):	on, accession, and o	other records, che	ck any	of the following th	at are a significant use	of its c	ollectio	n
a Public exhibition		d Loan	or exc	hange programs				
b Scholarly research		e Other						
c Preservation for future genera	ations	_			-			
4 Provide a description of the organ Part XIV	nization's collections	and explain how	they f	urther the organiza	tion's exempt purpose	ın		
5 During the year, did the organizat assets to be sold to raise funds ra	ion solicit or receive other than to be mai	e donations of art, ntained as part of	histor the o	rical treasures, or o rganization's collec	ther similar tion?	Yes	Γ	No
Part IV Escrow and Custodia line 9, or reported an					wered 'Yes' to For	m 990), Parl	īV,
1 a Is the organization an agent, trust included on Form 990, Part X?	tee, custodian, or ot	her intermediary t	for cor	ntributions or other	assets not	Yes	٦	
b If 'Yes,' explain the arrangement	in Part XIV and com	plete the following	g table	e:	· · · · · · · · · · · · · · · · · · ·			
						Amoun	t	
c Beginning balance					1c			
d Additions during the year					1d			
e Distributions during the year					1e			
f Ending balance						_		
2a Did the organization include an ar		Part X, line 21?				Yes	L	No
b If 'Yes,' explain the arrangement		.,						
Part V Endowment Funds. Co								
	(a) Current year	(b) Prior yea		(c) Two years back	(d) Three years back	(e)	Four year	s back
1 a Beginning of year balance	2,202,183			1,993,147				
b Contributions	21,870	. 23,8	45.	86,462	. 175,395.	<u> </u>	,	
 c Net investment earnings, gains, and losses 	-27,153	. 204,4	11.	80,819	292,944.			· ,
d Grants or scholarships						<u></u>		. ~
 Other expenditures for facilities and programs 	53,331	. 375,3	04.	-205,881	. 248,528.		*	, l
f Administrative expenses	11,827	. 9,9	44.	7,134		* , *		
g End of year balance	2,131,742	. 2,202,1	.83.	2,359,175	. 1,993,147.			
2 Provide the estimated percentage	of the current year	end balance (line	1g, c	olumn (a)) held as:				
a Board designated or quasi-endow	ment ►1	.8.19 %						
b Permanent endowment	44.33 %							
c Temporarily restricted endowmen	t ►37.	48 %						
The percentages in lines 2a, 2b, a	and 2c should equal	100%.						
3a Are there endowment funds not in	the nossession of	the organization t	hat ar	e held and administ	ered for the	_		
organization by:	r the possession of	ine organization to	ilat ai	c neia ana aaniinis	icrea for the		Yes	No
(i) unrelated organizations						3a(i)		Х
(ii) related organizations						3a(ii)		Х
b If 'Yes' to 3a(II), are the related o	rganizations listed a	is required on Sch	nedule	R ²		3b		Х
4 Describe in Part XIV the intended	uses of the organiz	ation's endowmer	nt fund	ds				
Part VI Land, Buildings, and	Equipment. See	Form 990, Pa	art X	, line 10.				
Description of property	(a) Co	ost or other basis (investment)	(þ	Cost or other casis (other)	(c) Accumulated depreciation	(d)	Book va	alue
1 a Land		1,377,056.				1	,377	,056.
b Buildings .	1	8,880,386.		· 1	7,147,671.			,715.
c Leasehold improvements								
d Equipment		2,945,238.			2,420,680.		524	,558.
e Other .	—	, ,		<u> </u>				
Total. Add lines 1a through 1e. (Colum	n (d) must eaual Fo	rm 990, Part X. c	olumn	(B), line 10(c))	>	13	, 634	,329.
BAA	,,,	,, 0		, ,	Scher			90) 2011

Schedule	D (Form 990) 2011 THE WARDLAW-HARTR	IDGE SCHOOL	_		22-210	9610	Page 3
Part VII	Investments - Other Securities. See	Form 990, Part X,	line	12.		_	
	(a) Description of security or category (including name of security)	(b) Book value			(c) Method of valua Cost or end-of-year mar	tion: ket value	
(1) Financ	cial derivatives						
	y-held equity interests						
(3) Other						-	
<u> </u>							
<u>(B)</u>			<u> </u>				
(c)							
₾							
<u>(E)</u>							
<u> </u>			 				
<u>(G)</u>		····					
(H)							
_(l) Total _(Colu	ımn (b) must equal Form 990 Part X, column (B) line 12)						
	I Investments – Program Related. See	Form 990, Part X	line	13			<u>.</u>
	(a) Description of investment type	(b) Book value	<u> </u>	10.	(c) Method of valua	tion:	
(1)		-			Cost or end-of-year mar	ket value	
(2)							
(3)					-		
(4)		<u>-</u>					
(5)							
(6)					.,	·	
(7)							
(8)							
(9)		<u>-</u>	<u> </u>				
(10)							
Total. (Colui	mn (b) must equal Form 990, Part X, column (B) line 13.)	1 5	<u> </u>				
Part IX	Other Assets. See Form 990, Part X, I				 	43.5.4	
(1)	(a) De:	scription				(b) Book	value
(2)							
(3)							
(4)							
(5)							
(6)		- 					
(7)							
(8)							
(9)							
(10)							
Total. (Co	olumn (b) must equal Form 990, Part X, column (B,				>		
Part X	Other Liabilities. See Form 990, Part						
(1) F. d.	(a) Description of liability	(b) Book value	\dashv				
	eral income taxes ITION PAID IN ADVANCE	1 225 20	.				
	PITAL LEASE OBLIGATION	1,325,22					
(4)	FITAL LEASE OBLIGATION	19,10	''				
(5)			\dashv				
(6)			\dashv				
(7)		<u> </u>	\dashv				
(8)			\dashv				
(9)			\neg				
(10)			\neg				

Total. (Column (b) must equal Form 990, Part X, column (B) line 25)

2 FIN 48 (ASC 740) Footnote. In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740).

(11)

Schedule D (Form 990) 2011 THE WARDLAW-HARTRIDGE SCHOOL	22	-2109610	Page 4
Partix Reconciliation of Change in Net Assets from Form 990 to Audited Financi	ial Statements		
1 Total revenue (Form 990, Part VIII, column (A), line 12)		13	3,741,531.
2 Total expenses (Form 990, Part IX, column (A), line 25)			3,573,638.
3 Excess or (deficit) for the year Subtract line 2 from line 1			167,893.
4 Net unrealized gains (losses) on investments	·		101/0331
5 Donated services and use of facilities		 	
		1	
6 Investment expenses			
7 Prior period adjustments			
8 Other (Describe in Part XIV.)			
9 Total adjustments (net). Add lines 4 through 8			1.67 000
10 Excess or (deficit) for the year per audited financial statements. Combine lines 3 a			167,893.
Reconciliation of Revenue per Audited Financial Statement	s With Revenue per Re		
1 Total revenue, gains, and other support per audited financial statements		1 13	3,668,361.
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12			
a Net unrealized gains on investments	2a		
b Donated services and use of facilities	2b		
c Recoveries of prior year grants	2c		
d Other (Describe in Part XIV)	2d		
e Add lines 2a through 2d	- Alice - Inc.	2 e	
3 Subtract line 2e from line 1			3,668,361.
l de la companya de	 		3,000,301.
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
a Investment expenses not included on Form 990, Part VIII, line 7b	4a = = = = = = = = = = = = = = = = = = =	14.0	
b Other (Describe in Part XIV)	4b 73,170.	100 A 22.7	
c Add lines 4a and 4b	•	4c	73,170.
5 Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			3,741,531.
Part XIII Reconciliation of Expenses per Audited Financial Statemen	nts With Expenses per	Return	
1 Total expenses and losses per audited financial statements .		1 1 13	3,573,638.
2 Amounts included on line 1 but not on Form 990, Part IX, line 25		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
a Donated services and use of facilities	2a	[T	
b Prior year adjustments	2b		
c Other losses	2c	* ! ·	
d Other (Describe in Part XIV.)	2 d		
·		2 e	
e Add lines 2a through 2d			3,573,638.
3 Subtract line 2e from line 1	I I	3 1.	3,373,030.
4 Amounts included on Form 990, Part IX, line 25, but not on line 1:	اما		
a Investment expenses not included on Form 990, Part VIII, line 7b.	4a		
b Other (Describe in Part XIV)		439	
	• •	4c 1:	3,573,638.
5 Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)		. .	3,373,030.
Part XIV Supplemental Information			
Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part Part V, line 4; Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b, and Part XIII, lines any additional information. Pt XII Line 4b NET UNREALIZED AND REALIZED LOSSES	s 2d and 4b Also complete ti	nes 16 and 20	o, ovide
		,-	
			.
		=	
BAA TEEA3304 05/25/11		Schedule D	(Form 990) 2011

Schedule b (Form 990) 2011 THE WARDLAW-HARTRIDGE SCHOOL	22-2109610	Page 5
Part XIV Supplemental Information (continued)		
•		
•		
		
		
		

SCHEDULE E (Form 990 or 990-EZ)

Schools

OMB No 1545-0047

2011

Open to Public Inspection

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.

Name of the organization

Employer identification number

THE WARDLAW-HARTRIDGE SCHOOL
Part |

22-2109610

			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	X	
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 had no solicitation program, in a way that makes	2		
	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	×	i
	ADVERTISED IN INFORMATION PROVIDED BY NJ ASSOC OF INDEPENDENT SCHOOLS	,		
			:	
	Does the organization maintain the following?			* 3
4	Records indicating the racial composition of the student body, faculty, and administrative staff?	4a	X	
	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	4b		
c	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	4c	х	
c	Copies of all material used by the organization or on its behalf to solicit contributions?	4d	Х	
	If you answered 'No' to any of the above, please explain If you need more space, use Part II	3 1	3 N x	1

		1 . ` *	٩ž	
5 a	Does the organization discriminate by race in any way with respect to: Students' rights or privileges?	5a		X
Ŀ	Admissions policies?	5b		х
c	Employment of faculty or administrative staff?	5c		х
c	Scholarships or other financial assistance?	5 d		х
6	Educational policies?	5 e		х
f	Use of facilities?	5 f		х
ç	Athletic programs?	5 g		х
ŀ	Other extracurricular activities?	5h		х
	If you answered 'Yes' to any of the above, please explain. If you need more space, use Part II		,	
]		
]		
6 a	a Does the organization receive any financial aid or assistance from a governmental agency?	6a		X
	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	<u>-</u>	Į.	-

SCHEDULE G (Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

Open to Public ... Inspection

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

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.

Name of the organization	า		**		<u> </u>		Employer identifica	stion number	
THE WARDLAW	-HARTRIDGE SC	HOOL				1	22-210961	0	
			zation and	swered 'Ye	es' to Form 990, Part IV	/, line 17			
					wing activities. Check a		ply.		
a Mail solid	-		,	e	Solicitation of non-	•	. ,		
\blacksquare	and email solicitations			f	Solicitation of gove	-	-		
—	olicitations			•	Special fundraising	_	jiants		
. H				g	Special fullulaising	events			
	n solicitations nization have a written	or oral agreem	ent with a	ny individi	ual (including officers, o	tirectors	trustees or key		
employees li	sted in Form 990, Part	VII) or entity in	connection	on with pro	ofessional fundraising s	ervices?	il distees of Key	Yes	No
b If 'Yes,' list the compensated	ne ten highest paid inc f at least \$5,000 by the	lividuals or entit e organization	ties (fundr	aisers) pui	rsuant to agreements u	nder whic	ch the fundraise	r is to be	_
	ddress of individual	(ii) Activity	(III) Did	fundraiser	(iv) Gross receipts	(v) An	nount paid to	(vi) Amount p	aid to
or entity	(fundraiser)	``		dy or control	from activity	or r	etained by)	or retained	l by)
			or contr	ibutions?			aiser listed in olumn (i)	organizati	оп
· · · · · · · · · · · · · · · · · · ·			Yes	No		 			
			103	-110					
1									
2						 			
3	<u>. </u>								
						ļ			
4									
5									
6									
7	-								
8									
9									
••	 	<u> </u>				 			
10									
Total				•					
3 List all states or licensing.	in which the organiza	ition is registere	ed or licen	sed to solu	cit contributions or has	been not	lified it is exemp	ot from registrat	ion
		-					- 		-
				-					
						- -			
	- 								
							. 		
							_		
						• <u></u>			
				_ _					
									

Schedule G (Form 990 or 990-EZ) 2011 THE WARDLAW-HARTRIDGE SCHOOL 22-2109610 Part II Fundraising Events. Complete if the organization answered 'Yes' to Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000. (a) Event #1 (d) Total events (add column (a) through column (c)) (b) Event #2 (c) Other events Spring Gala 3 Fall Fair REVENDE (event type) (total number) (event type) 1 Gross receipts 92,893. 51,432. 17,262. 161,587. 2 Less Charitable contributions 56,495 16,457. 8,736. 81,688. 3 Gross income (line 1 minus line 2) 36,398 34,975. 8,526 79,899. 4 Cash prizes 6,223. 6,223. 5 Noncash prizes 6,211 6,211. 6 Rent/facility costs 20,336 20,336. 7 Food and beverages EXPENSES 8 Entertainment 5,400 6,462. 11,862. 9 Other direct expenses 4,451 22,290 8,526. 35,267. 10 Direct expense summary. Add lines 4 through 9 in column (d) 79,899. Net income summary Combine line 3, column (d), and line 10 Part III Gaming. Complete if the organization answered 'Yes' to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a. (a) Bingo (b) Pull tabs/Instant (c) Other gaming (d) Total gaming REVENUE bingo/progressive (add column (a) through column (c)) bingo 1 Gross revenue 2 Cash prizes EXPENSES 3 Non-cash prizes 4 Rent/facility costs 5 Other direct expenses Yes Yes 용 Yes 6 Volunteer labor . No No No 7 Direct expense summary. Add lines 2 through 5 in column (d) 8 Net gaming income summary. Combine lines 1, column (d) and line 7 9 Enter the state(s) in which the organization operates gaming activities: a is the organization licensed to operate gaming activities in each of these states? **b** If 'No,' explain: 10 a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? **b** If 'Yes,' explain:

2CU6	edule G (Form 990 or 990-EZ) 2011 THE WARDLAW-HARTRIDGE SCHOOL	22-210	9610	Page 3
11	Does the organization operate gaming activities with nonmembers?		Yes	No
12	Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity fo administer charitable gaming?	med to	Yes	No
13	Indicate the percentage of gaming activity operated in	1 1		
á	a The organization's facility	13a		8
ŀ	An outside facility	13b		8
14	Enter the name and address of the person who prepares the organization's gaming/special events books and	d records.		
	Name •			
	Address ►			
	a Does the organization have a contact with a third party from whom the organization receives gaming revenu		Yes	No
ŀ	o If 'Yes,' enter the amount of gaming revenue received by the organization 🕨 💲	the amou	int	_
	of gaming revenue retained by the third party ► \$			
•	If 'Yes,' enter name and address of the third party:			
	Name •			
	Address ►			i I
16	Gaming manager information:			
	Name •			
	Gaming manager compensation ► \$			
	Description of services provided			
	□ Director/officer □ Employee □ Independent contractor			
17	Mandatory distributions			
á	a Is the organization required under state law to make charitable distributions from the gaming proceeds to ref state gaming license?	ain the	. Nes	□No
ŀ	Enter the amount of distributions required under state law to be distributed to other exempt organizations or		لسا	
	organization's own exempt activities during the tax year ► \$			
Pai	Supplemental Information. Complete this part to provide the explanations require columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as appetitive part to provide any additional information (see instructions).	ed by Pa licable.	art I, line Also com	2b, plete
				
				
BAA	TEEA3703 05/20/11 Sched	ule G (For	m 990 or 99	0-EZ) 2011

SCHEDULE I

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

Complete if the organization answered 'Yes' to Form 990, Part IV, lines 21 or 22. ► Attatch to Form 990.

OMB No 1545-0047

201

Open to Public Inspection

≗ □ (h) Purpose of grant or assistance **Employer identification number** Form 990, Part IV, line 21 for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. X Yes Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered 'Yes' to 22-2109610 (g) Description of non-cash assistance 1 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? (f) Method of valuation (book, FMV, appraisal, other) (e) Amount of non-cash assistance 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. (d) Amount of cash grant Enter total number of section 501(c)(3) and government organizations listed in the line 1 table (c) IRC section if applicable Part II can be duplicated if additional space is needed 3 Enter total number of other organizations listed in the line 1 table Part I | General Information on Grants and Assistance (P) EIN THE WARDLAW-HARTRIDGE SCHOOL (a) Name and address of organization or government 1111 Department of the Treasury Internal Revenue Service Name of the organization 1 ı 1 1 1 5 ଫ୍ର ଟ୍ର e প্র ଷ ଞ୍ଚ

Schedule I (Form 990) (2011)

TEEA3901 06/01/11

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

Page 2 SCHOLARSHIPS/FINANCIAL ASSISTANCE (f) Description of non-cash assistance, Grants and Other Assistance to Individuals in the United States. Complete of the organization answered 'Yes' to Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed. Part IV | Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information. THE SCHOOL'S ADMISSION DEPARTMENT, BUSINESS OFFICE AND HEADS OFFICE REVIEW AND AWARD 22-2109610 THE SCHOOL HAS A COMMITTEE THAT REVIEWS AND AWARDS SCHOLARSHIPS TO STUDENTS. (e) Method of valuation (book, FMV, appraisal, other) 3, 676, 374. FMV (d) Amount of non-cash assistance FINANCIAL ASSISTANCE TO STUDENTS THAT ARE ELIGIBLE. (c) Amount of cash grant THE WARDLAW-HARTRIDGE SCHOOL (b) Number of recipients (a) Type of grant or assistance Schedule I (Form 990) (2011) 1 FINANCIAL AID Pt_I Line_2 Part III

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Schedule I (Form 990) (2011)

SCHEDULE J (Form 990)

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

THE WARDLAW-HARTRIDGE SCHOOI

► Complete if the organization answered 'Yes' to Form 990, Part IV, line 23. ► Attach to Form 990. ► See separate instructions.

Open to Public Inspection

Employer Identification number

22-2109610

Part | Questions Regarding Compensation No Yes 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 Housing allowance or residence for personal use Payments for business use of personal residence Travel for companions Health or social club dues or initiation fees Tax indemnification and gross-up payments Discretionary spending account Personal services (e.g., maid, chauffeur, chef) b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If 'No,' complete Part III to explain 1 b Х Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, 2 X trustees, and the CEO/Executive Director, regarding the items checked in line 1a? Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director. Explain in Part III À Compensation committee Written employment contract Independent compensation consultant Compensation survey or study Form 990 of other organizations Approval by the board or compensation committee During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization. a Receive a severance payment or change-of-control payment? b Participate in, or receive payment from, a supplemental nonqualified retirement plan? 4b X 4 c c Participate in, or receive payment from, an equity-based compensation arrangement? If 'Yes' to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III. Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9. 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: Х a The organization? 5 a b Any related organization? 5b X If 'Yes' to line 5a or 5b, describe in Part III. For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of 6a X a The organization? **b** Any related organization? 6b X If 'Yes' to line 6a or 6b, describe in Part III. For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not 7 Х described in lines 5 and 6? If 'Yes,' describe in Part III Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53 4958-4(a)(3)? If 'Yes,' describe in Part III 8 Х If 'Yes' to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

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

Schedule J (Form 990) 2011

Page 2

Schedule J (Form 990) 2011 THE WARDLAW-HARTRIDGE SCHOOL Released 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) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable columns (D) and (E) amounts for that individual.

		(B) Breakdown o	(B) Breakdown of W-2 and/or 1099-MISC compensation	C compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name		(I) Base compensation	(ii) Bonus and incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(D)-(I)(B)	reported as deferred in prior Form 990
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ВАА				TEEA4102 01	01/24/12		Sche	Schedule J (Form 990) 2011

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

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

► Attach to Form 990 or 990-EZ.

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Employer identification number

THE WARDLAW-HARTE	RIDGE SCHOOL	22-2109610
Pt_VI,_Line_19	THE SCHOOL'S FINANCIAL STATEMENTS AND GOVERNING DOCUMENTS ARE MADE A	VAILABLE TO THE PUBLIC UPON REQUEST.
Pt_VI,_Line_11a_	THE SCHOOL'S FINANCE MANAGER AND TREASURER REVIEW	THE 990 BEFORE IT IS FILED.
Pt XI	NET REALIZED AND UNREALIZED LOSSES ON INVESTME	NTS.
Pt_VI,_Line_12c	THE FINANCE OFFICE MONITORS THE CONFLICT OF INTER	EST POLICY AND INFORMS THE
	HEAD OF SCHOOL AND BOARD FINANCE COMMITTEE OF	ANY POTENTIAL CONFLICTS.
Pt_VI,_Line_15	THE TREASURER OF THE BOARD RESEARCHES COMPARAE	LE POSITIONS IN OTHER
	ORGANIZATIONS AND MAKES RECOMMENDATIONS TO THE BOA	ARD WHICH ARE THEN VOTED ON.