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DLN: 93493043001293

Department of the Treasury

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

▶ The organization may have to use a copy of this return to satisfy state reporting requirements Internal Revenue Service Inspection calendar year, or tax year beginning 07-01-2011 and ending 06-30-2012 A For the 2011 D Employer identification number **B** Check if applicable KENT DENVER COUNTRY DAY SCHOOL Address change 84-0242810 Doing Business As KENT DENVER SCHOOL E Telephone number Name change (303)770-7660 ☐ Initial return Number and street (or P O box if mail is not delivered to street address) Room/suite **G** Gross receipts \$ 26,018,951 Terminated City or town, state or country, and ZIP + 4 ENGLEWOOD, CO 80113 Amended return Application pending Name and address of principal officer Is this a group return for JERRY WALKER 4000 E QUINCY AVENUE ENGLEWOOD, CO 80113 H(b) Are all affiliates included? Yes No If "No," attach a list (see instructions) **▽** 501(c)(3) **□** 501(c) () **◄** (insert no) ☐ 4947(a)(1) or ☐ 527 Group exemption number Website: ► WWW KENTDENVER ORG K Form of organization Corporation Trust Association L Year of formation 1940 M State of legal domicile CO Summary Part I Briefly describe the organization's mission or most significant activities EXCELLENCE IN SCHOLARSHIP AND CHARACTER IS THE GOAL OF A KENT DENVER EDUCATION Activities & Governance Check this box 🔰 if the organization discontinued its operations or disposed of more than 25% of its net assets Number of voting members of the governing body (Part VI, line 1a) . 29 Number of independent voting members of the governing body (Part VI, line 1b) . 28 4 5 250 Total number of individuals employed in calendar year 2011 (Part V, line 2a) . Total number of volunteers (estimate if necessary) 6 100 **7a** Total unrelated business revenue from Part VIII, column (C), line 12 7a 3,096 **b** Net unrelated business taxable income from Form 990-T, line 34 **7**b 391 **Prior Year Current Year** 8 Contributions and grants (Part VIII, line 1h) . 3,592,123 4,055,974 9 Program service revenue (Part VIII, line 2g) . 14,427,603 15,182,605 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 863,117 1,127,465 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) -39,252 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12 18,878,279 20,326,792 13 1.819.917 1,882,060 Grants and similar amounts paid (Part IX, column (A), lines 1-3) . . . Benefits paid to or for members (Part IX, column (A), line 4) 0 Salaries, other compensation, employee benefits (Part IX, column (A), lines 15 9.474.003 9,674,017 16a Professional fundraising fees (Part IX, column (A), line 11e) . 0 b Total fundraising expenses (Part IX, column (D), line 25) \blacktriangleright 831,738 8,320,504 7,818,240 **17** Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) 19,614,424 19,374,317 19 Revenue less expenses Subtract line 18 from line 12 . -736,145 952,475 (Assets or delatables) **Beginning of Current End of Year** Year 78,569,402 78,628,614 20 Total assets (Part X, line 16) . Met./ 21 Total liabilities (Part X, line 26) . . 13,484,225 13,270,465 65,085,177 22 Net assets or fund balances Subtract line 21 from line 20 65,358,149 Part II Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. ***** 2013-02-08 Signature of officer Sign Here JERRY WALKER ASSOCIATE HEAD OF SCHOOL Type or print name and title Date Check if Preparer's taxpayer identification number Preparer's 2013-02-08 KIM C HUNWARDSEN CPA (see instructions) P00484560 Paid employed 🕨 🧧 Preparer's EIDE BAILLY LLP Firm's name (or yours EIN 45-0250958 if self-employed), address, and ZIP + 4

440 INDIANA ST STE 200

GOLDEN, CO 804015021

May the IRS discuss this return with the preparer shown above? (see instructions) .

Use Only

Phone no (303) 986-2454

Par	t III	Statement of Program S Check if Schedule O contains a				৮
1	Briefl	ly describe the organization's mi	ssion			
AR	ING, D	CE IN SCHOLARSHIP AND CHA IVERSE COMMUNITY OF RESF ORY CURRICULUM AND SETS	ONSIBLE CITIZENS TO	THAT END, THE S		
2		ne organization undertake any si 10r Form 990 or 990-EZ?				Yes ▼ No
	If "Ye	s," describe these new services	on Schedule O			
3	servio	ne organization cease conducting ces?				Yes 🔽 No
	If "Ye	s," describe these changes on S	chedule O			
4	expen	ribe the organization's program s nses Section 501(c)(3) and 501 s and allocations to others, the t	(c)(4) organizations and s	ection 4947(a)(1) t	rusts are required to repor	
4a	(Code	e) (Expenses \$	15,337,009 ınclud	ing grants of \$	1,882,060) (Revenue \$	15,182,605)
	ENVIF CURI THRO 2012) WHIC APPR	DENVER SCHOOL IS AN INDEPENDENT RONMENT THAT NURTURES THEIR SOCIOSITY, INDEPENDENT THINKING, AND NUGHOUT LIFE THE SCHOOL PROVIDED IN THE SCHOOL PROVIDED FINANCIAL AS HIT OFFERS RIGOROUS ACADEMIC CUOXIMATELY 150 MIDDLE SCHOOL STUDE SCHOOL AND COLLEGE STUDENTS	AL AND EMOTIONAL GROWTH T MORAL DEVELOPMENT IN STUDE EDUCATIONAL INSTRUCTION FO SISTANCE TO STUDENTS TOTAL RRICULUM FOR MOTIVATED DE	HE SCHOOL'S OBJECTIVI NTS, AND TO ESTABLISH OR APPROXIMATELY 673 ING \$1,882,060 THE SC NVER PUBLIC SCHOOL S	E IS TO WORK WITH FAMILIES TO A FOUNDATION FOR LEARNING STUDENTS DURING THE MOST I HOOL ALSO CONDUCTS THE "BR TUDENTS AT NO COST TO THE S	D ENCOURAGE INTELLECTUAL IN COLLEGE AND RECENT SCHOOL YEAR (2011 - EAKTHROUGH PROGRAM" FUDENTS OR THEIR FAMILIES
4b	(Code	e) (Expenses \$	ıncludıı	ng grants of \$) (Revenue \$)
4c	(Code	e) (Expenses \$	ıncludıı	ng grants of \$) (Revenue \$)
	-					
4d		er program services (Describe ii	·	,) (Daylamus d	•
_		enses \$	including grants of \$) (Revenue \$)
4e	Tota	I program service expenses►\$	15,337,009			

	·		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 🔁	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If</i> "Yes," complete Schedule C, Part II	4		No
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		No
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 1	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		No
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV.	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>	10	Yes	
11	If the organization's answer to any of the following questions is 'Yes,' then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line10? If "Yes," complete Schedule D, Part VI.	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.	11b	Yes	
C	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.	11c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.	11d		No
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.	11e		No
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12a	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	Yes	
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Νo
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, Part I	14b		No
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the U S? If "Yes," complete Schedule F, Part II and IV.	15		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the U S ? If "Yes," complete Schedule F, Part III and IV	16		No
17	Did the organization report a total of more than \$15,000, of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	Yes	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach its audited financial statement to this return? Note. All Form 990 filers that operated one or more hospitals must attach audited financial statements	20b		

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		No
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer questions 24b-24d and complete Schedule K. If "No," go to line 25	24a	Yes	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		No
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		No
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		No
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		N o
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? <i>If "Yes," complete Schedule L, Part III </i>	27	Yes	
28	Was the organization a party to a business transaction with one of the following parties? (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
С	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 owner? If "Yes," complete Schedule L, Part IV	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule Ma	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
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? <i>If</i> "Yes," complete Schedule R, Part I	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		No
35a	Is any related organization a controlled entity of the filing organization within the meaning of section $512(b)(13)$?	35a		No
b	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		No
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If</i> "Yes," complete Schedule R, Part V, line 2	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	<u> </u>
		F	orm 990	(2011)

Form 990 (2011)

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 56			
L	Enter the number of Forms W. 2C included in line 1s. Enter O if not applicable			
D	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
_	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			
	gaming (gambling) winnings to prize winners?	1c	Yes	
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			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?			
		2b	Yes	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
За	Did the organization have unrelated business gross income of \$1,000 or more during the			
	year?	3a	Yes	
b	If "Yes," has it filed a Form 990-T for this year? <i>If "No," provide an explanation in Schedule O</i>	3b	Yes	
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 or securities	4-		
	account)?	4a		N o
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		Νo
ь	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Νο
		JU		
С	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	6a		
Ja	organization solicit any contributions that were not tax deductible?	va		140
h	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).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and	7a		Νo
u	services provided to the payor?	/u		110
ь	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to			
	file Form 8282?	7c		Νo
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d			
_				
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit			
	contract?	7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Νo
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as			
	required?	7g		
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	ı		
	business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a		
ь	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter			_
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
D	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			
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		
	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.			
а	Is the organization licensed to issue qualified health plans in more than one state?			
	Note. All 501(c)(29) organizations must list in Schedule O each state in which they are licensed to issue			
	qualified health plans, the amount of reserves required by each state, and the amount of reserves the organization	13a		
	allocated to each state	TOG		
b	Enter the aggregate amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans.			
	the states in which the organization is needsed to issue qualified health plans			
С	Enter the aggregate amount of reserves on hand 13c			
142	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
∡-7 0	If "Ves " has it filed a Form 720 to report these payments? If "No " provide an explanation in Schedule O	1.44		110

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

Se	ection 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									
b	Enter the number of voting members included in line 1a, above, who are independent									
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No						
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?.	3		No						
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No						
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		No						
6	Did the organization have members or stockholders?	6		No						
7a	7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one of more members of the governing body?									
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		No						
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following									
а	The governing body?	8a	Yes							
b	Each committee with authority to act on behalf of the governing body?	8b	Yes							
9	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									
	ection B. Policies (This Section B requests information about policies not required by the Internal									
Re	venue Code.)		Yes	No						
10a	Did the organization have local chapters, branches, or affiliates?	10a	res	No						
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,	100		NO						
	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b								
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes							
b	Describe in Schedule O the process, if any, used by the organization to review the Form 990									
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes							
b	Were officers, directors or trustees, and key employees required to disclose annually interests that could give	12b	Yes							
c	rise to conflicts?	120	res							
·	ın Schedule O how this was done	12c	Yes							
13	Did the organization have a written whistleblower policy?	13	Yes							
14	Did the organization have a written document retention and destruction policy?	14	Yes							
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?									
а	The organization's CEO, Executive Director, or top management official	15a	Yes							
b	Other officers or key employees of the organization	15b	Yes							
	If "Yes," to line 15a or 15b, describe the process in Schedule O (see instructions)									
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No						
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 take steps to safeguard the organization's exempt status with respect to such arrangements?	16b								
Se	ection C. Disclosure									
17										
10	Section 6104 requires an organization to make its Form 1022 (or 1024 if applicable) 990, and 990 T (501/c)									

Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply

Own website Another's website V Upon request

- 19 Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public See Additional Data Table
- 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization DIANE MONSON
 4000 E QUINCY AVENUE

ENGLEWOOD, CO 80113 (303) 770-7660

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

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

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

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

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

Check this box if neither the or	ganization nor any re	lated o	rgan	ızatı	ons	compe	ensat	ted any current or fo	rmer officer, direc	tor, or trustee
(A) Name and Title	(B) A verage hours per week (describe	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the organization and
	hours for related organizations in Schedule O)	Individual trustae or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former		MISC)	related organizations
See Additional Data Table										
				\vdash			_			

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

(A) Name and Title		(B) A verage hours per week (describe	Average hours more than one box, compensation comper unless person is both week an officer and a director/trustee) Position (do not check Reportable Reportable compensation compensation with from the from the organization (Worgan 2/1099-MISC) (Worgan 2/1099-MISC)								(E) Reportable compensation from related organizations (W- 2/1099-	Reportable Estima amount o compens from to compens from to 2/1099-		
		for related organizations in Schedule O)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former			MISC)		relat organiza	
See A	ddıtıonal Data Table													
												+		
												+		
												_		
												+		
												+		
												_		
1b	Sub-Total			<u> </u>	<u> </u>			<u> </u> ►				1		
С	Total from continuation sheets	to Part VII, Sec	tion A					P						
d 2	Total (add lines 1b and 1c) . Total number of individuals (inclusion), 100,000 of reportable compens	_				• ted	above) who	receive	773,963 d more tha		0		197,916
													Yes	No
3	Did the organization list any forr on line 1a? <i>If</i> "Yes," complete Sch								or highes • • •	t compens • •	ated employee	3		No
4	For any individual listed on line 1 organization and related organization.											4	Yes	
5	Did any person listed on line 1a services rendered to the organiz						•		_		or individual for	5		No
Se	ction B. Independent Con	tractors												
1	Complete this table for your five \$100,000 of compensation from or within the organization's tax y	the organizatio												
		(A) ne and business add	tress							Desci	(B) ription of services		(C Comper	
PO BO	(O CAMPUS SERVICES X 43283 NGELES, CA 90088									MAINTENANO	CE SERVICES		1	,390,470
4000	KO FOOD SERVICES E QUINCY AVENUE EWOOD, CO 80113									FOOD SERVI	CES			593,570
3735	EL & COMPANY CONSTRUCTION 5 BROADWAY 5 WOOD, CO 80113									CONSTRUCT	ION			203,808
												7		
	Total number of independent conti \$100,000 of compensation from t			ot lin	nited	to	those	liste	d above)	who receiv	ed more than			

Form 99								Page 9
Part \	/111	Statement o	<u>f Revenue</u>		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512,513,or 514
nts ots	1a	Federated camp	paigns 1a					
e ja	b	Membership due	es 1b					
S, Ç	C	Fundraising eve	ents 1c	357,810				
<u>a</u> j∰	d	Related organız	ations 1d					
ĘĘ,	e	Government grants	(contributions) 1e					
Contributions, gifts, grants and other similar amounts	f g	sımılar amounts no	butions included in	3,698,164				
20.0	h	Total. Add lines	1a-1f	▶	4,055,974			
				Business Code				
in in	2a	TUITION REVENUE		611600	14,375,740	14,375,740		
Program Serwce Revenue	ь	ACTIVITY FEES		611600	451,821	451,821		
e.	c	SUMMER SCHOOL F	REVENUE	611600	355,044	355,044		
ž.	d	-			· · ·	·		
Ř	e							
E C	f	All other progra	m service revenue					
ွို	-	_						
	g		2a-2f		15,182,605			
	3		ome (including dividen		587,052		3,096	583,956
	١.		ar amounts) tment of tax-exempt bond	-	367,032		3,090	363,930
	4 5			proceeds				
	•	Royalties	(ı) Real	(II) Personal				
	6a	Gross rents	(I) Keal	(II) Personal				
	Ь	Less rental						
	_c	expenses Rental income						
	`	or (loss)						
	d	Net rental incor	me or (loss)					
	7a	Gross amount from sales of assets other than inventory	(ı) Securities	(II) Other 6,153,131				
	ь	Less cost or other basis and sales expenses		5,612,718				
	C	Gain or (loss)		540,413	540,440			540,440
	d	Net gain or (los		,▶	540,413			540,413
Revenue	8a	Gross income frevents (not incl \$ 357, of contributions See Part IV, line	uding 810 reported on line 1c) e 18					
<u> </u>	 	المسال حمما	a	40,189				
Other Revenue	b c		penses b loss) from fundraising	79,441	-39,252			-39,252
J	9a		om gaming activities		·			
	b c		penses b loss) from gaming acti					
	10a	Gross sales of I returns and allo						
	b c	Less cost of go		entory . ►				
		Miscellaneous	Revenue	Business Code				
	11a							
	ь							
	С							
	d	All other revenu	ie					
	e	Total. Add lines	11a-11d					
	12	Total revenue.	See Instructions .	•	20,326,792	15,182,605	3,096	1,085,117

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 response to any question in this Part IX

	ot include amounts reported on lines 6b, o, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States See Part IV, line 21				· · ·
2	Grants and other assistance to individuals in the United States See Part IV, line 22	1,882,060	1,882,060		
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	529,285	52,929	345,609	130,747
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	7,003,948	5,888,882	810,866	304,200
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	466,353		23,006	40,933
9	Other employee benefits	1,146,933	816,087	250,399	80,447
10	Payroll taxes	527,498	511,674	7,912	7,912
11	Fees for services (non-employees)	, , , , , , , , , , , , , , , , , , ,	<u> </u>	·	·
а	Management	1,403,215	1,280,714	85,456	37,045
b	Legal	90,560	, ,	90,560	·
c	Accounting	65,650		65,650	
d	Lobbying	,			
e	Professional fundraising See Part IV, line 17				
f	Investment management fees	339,756		339,756	
g	Other	29,617	1,179	16,512	11,926
12	Advertising and promotion	32,144		32,144	
13	Office expenses	273,616	84,338	128,559	60,719
14	Information technology	257,971	133,467	118,274	6,230
15	Royalties				
16	Occupancy	719,824	668,469	35,825	15,530
17	Travel	63,380	23,446	39,934	
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	70,881		9,165	61,716
20	Interest	464,882	424,298	28,311	12,273
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	1,189,910	1,083,785	74,776	31,349
23	Insurance	207,945	189,791	12,664	5,490
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24f If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O)				
a	EDUCATIONAL ACTIVITIES	1,460,303	1,399,873	49,180	11,250
b	BAD DEBT	615,149		615,149	
c	BUS SERVICES	217,940	216,610	928	402
d	EXTRACURRICULAR ACTIVIT	184,510	184,510		
e					
f	All other expenses	130,987	92,483	24,935	13,569
25	Total functional expenses. Add lines 1 through 24f	19,374,317	15,337,009	3,205,570	831,738
26	Joint costs. Check here ► ☐ If following SOP 98-2 (ASC 958-720) Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				rm 990 (2011)

Part X **Balance Sheet** (A) (B) Beginning of year End of year 1,618,533 1,211,793 1 1 3.549.852 5.924.692 2 2 3 2.080.571 1,270,483 3 346.556 4 387.200 4 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)) and persons described in section 4958(c)(3)(B) Complete Part II of 6 7 11.256 8 15.855 9 324.003 354.049 Prepaid expenses and deferred charges 45,925,940 10a Land, buildings, and equipment cost or other basis *Complete* Part VI of Schedule D 10a 10b 15,709,483 b Less accumulated depreciation 30,436,210 **10c** 30,216,457 13,928,816 11,537,400 11 11 26,040,510 27,485,733 12 12 Investments—other securities See Part IV, line 11 13 13 Investments—program-related See Part IV, line 11 . . 233,095 224,952 14 Intangible assets 14 15 15 78,569,402 78,628,614 16 Total assets. Add lines 1 through 15 (must equal line 34) . . . 16 967,221 884,956 17 17 Accounts payable and accrued expenses . 18 18 19 2,550,121 19 2,604,216 20 9.966.883 20 9.781.293 21 21 Escrow or custodial account liability Complete Part IV of Schedule D . . Liabilities 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L \ldots . \ldots . \ldots 22 23 Secured mortgages and notes payable to unrelated third parties . . . 23 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 25 D 26 13,484,225 26 13,270,465 **Total liabilities.** Add lines 17 through 25 Organizations that follow SFAS 117, check here ▶ 🔽 and complete lines 27 Balances through 29, and lines 33 and 34. 27 36,492,844 36,170,153 Unrestricted net assets 11,311,139 28 10,343,556 28 Temporarily restricted net assets Fund 29 17,281,194 29 18,844,440 Permanently restricted net assets Organizations that do not follow SFAS 117, check here ▶ ☐ and complete lines 30 through 34. ö 30 Capital stock or trust principal, or current funds 30 Assets 31 31 Paid-in or capital surplus, or land, building or equipment fund 32 32 Retained earnings, endowment, accumulated income, or other funds ¥ 33 Total net assets or fund balances 65.085.177 33 65.358.149 78.569,402 34 Total liabilities and net assets/fund balances 34 78.628.614

Pal	Check if Schedule O contains a response to any question in this Part XI			. [~	
1	Total revenue (must equal Part VIII, column (A), line 12)	1		20,3	326,79
2	Total expenses (must equal Part IX, column (A), line 25)	2			
3	Revenue less expenses Subtract line 2 from line 1	3		ç	952,47
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		65,0	085,17
5	Other changes in net assets or fund balances (explain in Schedule O)	5		-6	579,50
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		65,3	358,149
Pai	TEXII Financial Statements and Reporting Check if Schedule O contains a response to any question in this Part XII			୮	
1	Accounting method used to prepare the Form 990 Cash Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O			Yes	No
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
b	Were the organization's financial statements audited by an independent accountant?	[2b	Yes	
c	If "Yes," to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O		2c	Yes	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were is on a separate basis, consolidated basis, or both	ssued			
	Separate basis Consolidated basis Both consolidated and separated basis				
	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?		За		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the reaudit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	equired	3b		

OMB No 1545-0047

2011

Open to Public

SCHEDULE A

(Form 990 or 990EZ)

Name of the organization KENT DENVER COUNTRY DAY SCHOOL

Department of the Treasury Internal Revenue Service Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

Public Charity Status and Public Support

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

ns. Inspection
Employer identification number

0.4.00.400.40

		I Reason for Public Charity Status (All organizations must complete this part.) See instructions												
Par								•	<u> </u>	nstructio	ns			
he o	rganız			te foundation becaus										
1		A churc	ch, convent	ion of churches, or as	ssociation o	fchurches	section 170(b)(1)(A)(i)).					
2	굣	A scho	ol describe	d in section 170(b)(1	.)(A)(ii). (A	ttach Sche	dule E)							
3	Γ	A hosp	ital or a coc	perative hospital se	rvice organi	zatıon desc	rıbed ın secti	on 170(b)(1)(A)(iii).					
4	Γ			h organızatıon operat ıty, and state	ted in conjur	nction with	a hospital des	scribed in s	ection 170(b)	(1)(A)(iii)). Enter t	he		
5	Γ	=	•	erated for the benefit (A)(iv). (Complete P	_	e or univers	sity owned or	operated by	a governmer	ntal unit de	escribed	ın		
6	$\overline{}$			r local government or governmental unit described in section 170(b)(1)(A)(v).										
7	<u>'</u>		•	at normally receives	_					from the a	anaral ni	ıblıc		
•	'	describ	ed in	(A)(vi) (Complete P		ai pait oi it	s support non	ii a goveriiii	iental unit of	nom the g	eneral po	IDIIC		
8	Γ	A comr	nunity trust	: described in section	170(b)(1)((A)(vi) (Co	mplete Part 1	ΙΙ)						
9				at normally receives					ributions, mer	nbership f	ees, and	aros	SS	
_	•			rities related to its ex										
				oss investment inco										
				ganızatıon after June						cux, nom	busines	505		
.0	_			ganized and operated										
1	<u>'</u>			ganized and operated ganized and operated						to carry o	ut tha nu	rnoc	oc of	
•	'	one or i	more public	ly supported organizations the type of supported by Type II	ations desci orting orgar	ribed in sec ni <u>za</u> tion and	tion 509(a)(1	l) or sectio es 11e thro	n 509(a)(2) S ugh 11h	See sectio		(3).	Check	
e f g	1	other the section If the ocheck the Since A	nan foundat 509(a)(2) rganization his box ugust 17, 2	ox, I certify that the ion managers and other received a written do 2006, has the organi	her than one	or more pu	ıblıcly suppor RS that ıt ıs a	ted organiz	ations describ	bed in sec	tion 509	(a)(1	l) or	
			g persons?		antrala aith	ar alana an	togothorwith	narcana di	naarihad in (ii)	١		,	NI-	
				rectly or indirectly c			_	i persons u	escribed iii (ii	_		'es	No	
				governing body of th			Zationi			⊢	l1g(i)			
			•	er of a person descri	٠,						.1g(ii)			
_				lled entity of a perso						<u> </u>	1g(iii)			
h		Provide	the followi	ng information about	the support	ed organiza	ation(s)							
s	(i) Name uppor ganıza	ted	(ii) EIN	(iii) Type of organization (described on lines 1 - 9 above or IRC section (see	(iv) Is th organizat col (i) lis your gove docume	e lion in ted in erning	(v) Did you no organiza col (i) o suppo	otify the tion in f your	(vi Is th organiza col (i) ord in the l	he tion in ganized			ii) unt of ort?	
				instructions))	Yes	No	Yes	No	Yes	No				
										1				
										1				
										1				
						1				\top				
										1				
otal							1			1				

instructions

Sch	edule A (Form 990 or 99	90-EZ)2011						Page 2
	(Complet	e only if you	checked the	box on line 5,	7, or 8 of Part	(b)(1)(A)(iv) I or if the orgar	nızatıon faıle	d to qualify
			<u>organızatıon f</u>	fails to qualify ι	<u>under the tests</u>	listed below, pl	<u>lease comple</u>	ete Part III.)
	ection A. Public Su			1		Т	1	
Cal	endar year (or fiscal ye in)	ar beginning	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1	Gifts, grants, contribut	ions, and						
	membership fees recei							
	ınclude any "unusual							
_	grants ") Tax revenues levied fo	rtho						
2	organization's benefit a							
	paid to or expended on							
	behalf							
3	The value of services of							
	furnished by a governme the organization withou							
4	Total. Add lines 1 thro	_						
5	The portion of total cor	-						
-	by each person (other	than a						
	governmental unit or p	•						
	supported organization line 1 that exceeds 2%							
	amount shown on line 1							
	(f)	21,0014						
6	Public Support. Subtractine 4	ct line 5 from						
S	ection B. Total Sup	port						
Cal	endar year (or fiscal yea	r beginning	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
_	ın)	_	(4) 2007	(2) 2000	(4) 2005	(4) 2020	(0) 2022	(1) 1 3 4 4
7 8	A mounts from line 4 Gross income from inte	rost –						
0	dividends, payments re							
	securities loans, rents							
	and income from simila	ır						
_	sources							
9	Net income from unrela business activities, wh							
	not the business is reg							
	carried on							
10	Other income (Explain							
	IV) Do not include gai from the sale of capital							
11	Total support (Add line							
	through 10)							
12	Gross receipts from re	lated activities	s, etc (See inst	ructions)			12	
13	First Five Years If the		r the organizati	on's first, second	l, thırd, fourth, or	fıfth tax year as a	501(c)(3) or	
	check this box and sto	p here						▶ □
S	ection C. Computat	ion of Publ	ic Support F	Percentage				
14	Public Support Percen	tage for 2011	(line 6 column	(f) dıvıded by lıne	11 column (f))		14	
15	Public Support Percen	tage for 2010	Schedule A , Pa	rt II, line 14			15	
16a	33 1/3% support test-					line 14 is 33 1/3%	% or more, che	
h	and stop here. The org 33 1/3% support test					6a and line 15 is	33 1/20% or m	ore check this
D	box and stop here. The					oa, and inte 15 IS	1/3%0 UI M	ore, check this
17a	10%-facts-and-circum	-	•		-	ne 13, 16a, or 16	b and line 14	٠,
	ıs 10% or more, and ıf							
	in Part IV how the orga	anızatıon meet	s the "facts and	d circumstances"	test The organiz	zatıon qualıfıes as	a publicly su	
b	organization 10%-facts-and-circum	stances test—	2010. If the ora	anization did not	check a hov on li	ne 13, 16a 16b	or 17a and lin	▶
,	15 is 10% or more, an							-
	Explain in Part IV how	the organizati						
10	supported organization Private Foundation If t		n did not chools	a hov on line 12	16a 16h 17a a	or 17h chack this	hov and coc	► □

▶□

Schedule A (Form 990 or 990-EZ) 2011 Page 3 Part III Support Schedule for Organizations Described in IRC 509(a)(2) (Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.) Section A. Public Support Calendar year (or fiscal year beginning (a) 2007 **(b)** 2008 (c) 2009 (d) 2010 (e) 2011 (f) Total ın) Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants ") Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose Gross receipts from activities that are not an unrelated trade or business under section 513 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 5 7a Amounts included on lines 1, 2, and 3 received from disqualified 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 c Add lines 7a and 7b Public Support (Subtract line 7c from line 6) Section B. Total Support Calendar year (or fiscal year beginning (a) 2007 **(b)** 2008 (c) 2009 (d) 2010 (e) 2011 (f) Total ın) Amounts from line 6 Gross income from interest, 10a dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b C Net income from unrelated 11 business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support (Add lines 9, 10c, 13 11 and 12) First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage Public Support Percentage for 2011 (line 8 column (f) divided by line 13 column (f)) 15 15 Public support percentage from 2010 Schedule A, Part III, line 15 16 16 Section D. Computation of Investment Income Percentage

Investment income percentage for 2011 (line 10c column (f) divided by line 13 column (f))

19a 33 1/3% support tests—2011. If the organization did not check the box on line 14, and line 15 is more than 33 1/3% and line 17 is not

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

33 1/3% support tests-2010. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line

more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

Investment income percentage from 2010 Schedule A, Part III, line 17

17

18

17

18

▶[

Part IV	Supplemental Information. Supplemental Information. Complete this part to provide the explanation required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Also complete this part for any additional information. (See instructions).
	Facts And Circumstances Test
	Explanation

Schedule A (Form 990 or 990-EZ) 2011

DLN: 93493043001293

OMB No 1545-0047

SCHEDULE D (Form 990)

Department of the Treasury

Supplemental Financial Statements

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b ► Attach to Form 990. ► See separate instructions.

Open to Public Inspection

Internal Revenue Service		► Attach to Fe	Inspection		
Name of the organ			Employer identifica	tion number	
KE	NT DENVER COUNTR	RY DAY SCHOOL		84-0242810	
Pa	rt I Organ	nizations Maintaining Donor Ac	dvised Funds or Other Similar Fi		. Complete if the
	organi	zation answered "Yes" to Form 99	,	1 45	
	T - + -		(a) Donor advised funds	(b) Funds and o	ther accounts
1 2	Total number a	tributions to (during year)			
3		nts from (during year)			
4		ue at end of year			
5		•	L sors in writing that the assets held in don	l or advised	
	funds are the c	organization's property, subject to the	organization's exclusive legal control?		☐ Yes ☐ No
6	used only for c		donor advisors in writing that grant funds efit of the donor or donor advisor, or for a		┌ Yes ┌ No
Pa	rt III Conse	ervation Easements. Complete	ıf the organization answered "Yes" t	o Form 990, Part IV	/, line 7.
2	Preservat Protection Preservat Complete lines	conservation easements held by the or tion of land for public use (e g , recreating to of natural habitat tion of open space s 2a-2d if the organization held a qualithe last day of the tax year	on or pleasure)	certified historic struc	· ·
		,		Held at the	End of the Year
а	Total number o	of conservation easements		2a	
b	Total acreage	restricted by conservation easements		2b	
C		iservation easements on a certified his	• • • • • • • • • • • • • • • • • • • •	2c	
d	Number of con	servation easements included in (c) a	cquired after 8/17/06	2d	
3		servation easements modified, transfe ar 🛌	rred, released, extinguished, or terminate	ed by the organization	during
4	Number of stat	tes where property subject to conserva	ation easement is located ►		
5		nization have a written policy regarding f the conservation easements it holds?	g the periodic monitoring, inspection, hand	dling of violations, and	│ │ Yes
6	Staff and volur	nteer hours devoted to monitoring, insp	pecting and enforcing conservation easem	nents during the year 🖡	-
7	A mount of exp ► \$		ng, and enforcing conservation easements	s during the year	
8	Does each cor		(d) above satisfy the requirements of sec	tion	┌ Yes ┌ No
9	balance sheet,		onservation easements in its revenue and the footnote to the organization's financial nents		
Pai	t IIII Organ	nizations Maintaining Collectio	ns of Art, Historical Treasures, 'Yes" to Form 990, Part IV, line 8.	or Other Similar	Assets.
1a	art, historical t	treasures, or other similar assets held	116, not to report in its revenue stateme for public exhibition, education or researd ancial statements that describes these it	ch in furtherance of pu	
b	historical treas		116, to report in its revenue statement a public exhibition, education, or research ii s		
	(i) Revenues i	ıncluded ın Form 990, Part VIII, lıne 1		► \$	
	(ii) Assets inc	luded in Form 990, Part X		► \$	
2		ition received or held works of art, histounts required to be reported under SFA	orıcal treasures, or other sımılar assets fo S 116 relatıng to these ıtems	· -	
а	Revenues incli	uded in Form 990. Part VIII. line 1		⊳ - \$	

b Assets included in Form 990, Part X

Par	TIPE Organizations Maintaining Colle	ctions of Art, H	ISTO	ric	<u>cai ireas</u>	ures, or Otn	<u>er Similar</u>	ASS	ets (co	<u>intinued)</u>
3	Using the organization's accession and other relatems (check all that apply)	cords, check any of	the f	foll	owing that a	ire a significant	use of its co	llectio	n	
а	Public exhibition	d	Г	_	Loan or ex	change progran	ns			
b	Scholarly research	e	. 「	-	Other					
С	Preservation for future generations									
4	Provide a description of the organization's colle	ctions and explain h	ow th	hey	further the	organization's	exempt purpo	se in		
5	During the year, did the organization solicit or r						mılar	_	• • •	-
Par	t IV Escrow and Custodial Arrangen Part IV, line 9, or reported an amount	nents. Complete	ıf th	e d	organizatio		'Yes" to For		Yes 0,	No
1a	Is the organization an agent, trustee, custodiar included on Form 990, Part X?	•				or other asset	s not	Г	Yes	┌ No
b	If "Yes," explain the arrangement in Part XIV a	nd complete the follo	owing	g ta	ble					
_						-		Amo	unt	
c d	Beginning balance					10				
u e	Additions during the year					16	+			
f	Distributions during the year					1f	+			
2-	Ending balance	000 Dant V line 3:							Yes	
2a	Did the organization include an amount on Form	1990, Part X, line 21	L					,	res	│ No
	If "Yes," explain the arrangement in Part XIV rt V Endowment Funds. Complete if t	he organization ai	new		d "Vas" to	Form 990 D	art IV line	10		
ΓŒ	· · · · · · · · · · · · · · · · · · ·		(b) Pri				(d)Three Years		e) Four Y	ears Back
1a	Beginning of year balance	43,646,448		38,	836,737	35,492,827	40,84	6,876		
b	Contributions	2,178,285			819,579	1,076,195	1,38	5,278		
C	Investment earnings or losses	-251,152		5,	900,762	3,941,145	-5,40	9,690		
d	Grants or scholarships	344,359			393,975	1,673,430	1,32	9,637		
е	Other expenditures for facilities and programs	1,477,965		1,	274,333					
f	Administrative expenses				242,322					
g	End of year balance	43,751,257		43,	646,448	38,836,737	35,49	2,827		
2	Provide the estimated percentage of the year e	nd balance held as								
а	Board designated or quasi-endowment 🕨 3	3 980 %								
b	Permanent endowment ► 43 080 %									
С	Term endowment ► 22 940 %									
3a	Are there endowment funds not in the possessi	on of the organizatio	n tha	ıt a	re held and	administered fo	r the			
	organization by (i) unrelated organizations						Γ	3a(i)	Yes	No No
	(ii) related organizations		•	•			`	3a(ii)		No
b	If "Yes" to 3a(II), are the related organizations							3b	1	
4	Describe in Part XIV the intended uses of the o						L			
Par	t VI Land, Buildings, and Equipment	See Form 990, I	Part	Χ,	lıne 10.		_			
	Description of property				Cost or other (investment)	(b)Cost or othe basis (other)	(c) Accumu depreciati		(d) Boo	ok value
1a	Land					3,305,01	4			3,305,014
b	Buildings					34,313,25	1 9,58	7,013	2.	4,726,238
c	Leasehold improvements					2,758,75	3 2,35	1,648		407,105
d	Equipment					5,124,31	2 3,77	0,822		1,353,490
_е	Other					424,61	0			424,610
	I. Add lines 1a-1e <i>(Column (d) should equal Form</i>	990, Part X, column ((B), lı	ne	10(c).) .				30	0,216,457

Part VII Investments—Other Securities. See	Form 990, Part X, line 12.	
(a) Description of security or category (including name of security)	(b)Book value	(c) Method of valuation Cost or end-of-year market value
(1)Financial derivatives		·
(2)Closely-held equity interests		
(3)Other (A) DOMESTIC HEDGED EQUITY	1,672,145	F
(B) INTERNATIONAL HEDGED EQUITY	2,175,178	F
(C) VENTURE CAPITAL/PRIVATE EQUITY	3,615,811	F
(D) REAL ASSETS	3,921,514	F
(E) ABSOLUTE RETURN FUNDS	10,280,604	F
(F) INTERNATIONAL EQUITY	5,820,481	F
(F) INTERNATIONAL EQUITY	5,020,401	Г
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)	▶ 27,485,733	
Part VIII Investments—Program Related. Se		
(a) Description of investment type	(b) Book value	(c) Method of valuation
(a) Beschption of investment type	(2) Book value	Cost or end-of-year market value
Total. (Column (b) should equal Form 990, Part X, col (B) line 13)	F	
Part IX Other Assets. See Form 990, Part X, I		
(a) Descr	ription	(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line		
Part X Other Liabilities. See Form 990, Part 1 (a) Description of Liability	1	
<u> </u>	(b) A mount	
Federal Income Taxes		
Total. (Column (b) should equal Form 990, Part X, col (B) line 25)		

Par	TEXT Reconciliation of Change in Net Assets from Form 990 to Financial Statemen	าts	
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	20,326,792
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	19,374,317
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	952,475
4	Net unrealized gains (losses) on investments	4	-661,846
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	-17,657
9	Total adjustments (net) Add lines 4 - 8	9	-679,503
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	272,972
Par	t XII Reconciliation of Revenue per Audited Financial Statements With Revenue p	er R	
1	Total revenue, gains, and other support per audited financial statements	1	16,839,116
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments		
b	Donated services and use of facilities		
c	Recoveries of prior year grants		
d	Other (Describe in Part XIV)		
e	Add lines 2a through 2d	2e	-3,165,511
3	Subtract line 2e from line 1	3	20,004,627
4	A mounts included on Form 990, Part VIII, line 12, but not on line 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a 339,756		
b	Other (Describe in Part XIV)	ı	
c	Add lines 4a and 4b	4 c	322,165
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	20,326,792
	Reconciliation of Expenses per Audited Financial Statements With Expenses	per	
1	Total expenses and losses per audited financial statements	1	16,566,144
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities		
b	Prior year adjustments		
C	Other losses		
d	Other (Describe in Part XIV)		
е	Add lines 2a through 2d	2e	55,248
3	Subtract line 2e from line 1	3	16,510,896
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a 339,756		
b	Other (Describe in Part XIV)		
C	Add lines 4a and 4b	4c	2,863,421
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5	19,374,317

Part XIV Supplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part 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

additional information		
Identifier	Return Reference	Explanation
DESCRIPTION OF INTENDED USE OF ENDOWMENT FUNDS	PART V, LINE 4	THE SCHOOL'S ENDOWMENT IS COMPRISED OF APPROXIMATELY 90 INDIVIDUAL FUNDS ESTABLISHED BY DONORS TO PROVIDE ANNUAL FUNDING FOR SPECIFIC ACTIVITIES AND FOR THE GENERAL OPERATION OF THE SCHOOL THE ENDOWMENT ALSO INCLUDES CERTAIN UNRESTRICTED NET ASSETS DESIGNATED FOR ENDOWMENT BY THE SCHOOL'S BOARD OF TRUSTEES AS REQUIRED BY GAAP, NET ASSETS ASSOCIATED WITH ENDOWMENT FUNDS, INCLUDING FUNDS DESIGNATED BY THE BOARD OF TRUSTEES, ARE CLASSIFIED AND REPORTED BASED ON THE EXISTENCE OR ABSENCE OF DONOR-IMPOSED RESTRICTIONS
DESCRIPTION OF UNCERTAIN TAX POSITIONS UNDER FIN 48	PART X	MANAGEMENT PERFORMS AN ANNUAL ANALYSIS OF THE SCHOOL'S VARIOUS TAX POSITIONS, ASSESSING THE LIKELIHOOD OF THOSE POSITIONS BEING UPHELD UPON EXAMINATION BY RELEVANT TAX AUTHORITIES MANAGEMENT BELIEVES THE SCHOOL HAS CONDUCTED ITS OPERATIONS IN ACCORDANCE WITH, AND HAS PROPERLY MAINTAINED ITS TAX-EXEMPT STATUS, AND HAS TAKEN NO MATERIAL UNCERTAIN TAX POSITIONS THAT QUALIFY FOR RECOGNITION OR DISCLOSURE IN THE FINANCIAL STATEMENTS THE SCHOOL IS NO LONGER SUBJECT TO U S FEDERAL, STATE AND LOCAL, OR NON-U S INCOME TAX EXAMINATIONS BY TAX AUTHORITIES FOR YEARS BEFORE 2008
PART XI, LINE 8 - OTHER ADJUSTMENTS		MISCELLANEOUS NONCASH ITEMS NOT RECORDED ON FINANCIAL STATEMENTS -17,657
		PART XII, LINE 2D - OTHER ADJUSTMENTS (\$1,882,060) - SCHOLARSHIP GRANTS NETTED WITH INCOME ON FINANCIALS (\$434,243) - BAD DEBT ON PLEDGES NETTED WITH INCOME ON FINANCIALS (\$207,362) - OTHER EXPENSES NETTED WITH INCOME ON FINANCIALS PART XII, LINE 4B - OTHER ADJUSTMENTS \$17,657 - MISCELLANEOUS NONCASH DONATIONS NOT RECORED ON FINANCIALS (\$35,248) - OTHER EXPENSES NETTED WITH INCOME ON FORM 990 PART XIII, LINE 2D - OTHER ADJUSTMENTS \$35,248 - OTHER EXPENSES NETTED WITH INCOME ON FORM 990 PART XIII, LINE 4B - OTHER ADJUSTMENTS \$1,882,060 - SCHOLARSHIP GRANTS NETTED WITH INCOME ON FINANCIALS \$434,243 - BAD DEBT ON PLEDGES NETTED WITH INCOME ON FINANCIALS \$207,362 - OTHER EXPENSES NETTED WITH INCOME ON FINANCIALS

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DLN: 93493043001293

OMB No 1545-0047

Schools

(Form 990 or 990-EZ) Department of the Treasury

Internal Revenue Service

Name of the organization

SCHEDULE E

▶ 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.

Employer identification number

KENT DENVER COUNTRY DAY SCHOOL 84-0242810 Part I YES NO Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body? 1 Yes Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships? 2 Yes Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe If "No," please explain If you need more space use Part II 3 Yes Does the organization maintain the following? a Records indicating the racial composition of the student body, faculty, and administrative staff? 4a Yes b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory 4b Yes c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships? 4c Yes 4d Yes d Copies of all material used by the organization or on its behalf to solicit contributions? If you answered "No" to any of the above, please explain If you need more space, use Part II Does the organization discriminate by race in any way with respect to a Students' rights or privileges? Νo 5a **b** Admissions policies? 5b Νo c Employment of faculty or administrative staff? Νo d Scholarships or other financial assistance? 5d Νo e Educational policies? 5e Νo f Use of facilities? 5f Νo g Athletic programs? 5g Νo 5h Νo h Other extracurricular activities? If you answered "Yes" to any of the above, please explain If you need more space, use Part II 6a Νo 6a Does the organization receive any financial aid or assistance from a governmental agency? b Has the organization's right to such aid ever been revoked or suspended? Νo 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

Yes

Part II Supplemental Information

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

ldentifier	Return Reference	Explanation
EXPLANATION OF NONDISCRIMINATORY POLICY PUBLICATION	SCHEDULE E, PART I, LINE 3	THE SCHOOL'S "NOTICE OF NONDISCRIMINATORY POLICY AS TO STUDENTS" IS PUBLISHED WITH THE DENVER NEWSPAPER AGENCY AS PART OF THE ASSOCIATION OF COLORADO INDEPENDENT SCHOOLS EACH YEAR THE NOTICE WAS MOST RECENTLY PUBLISHED ON APRIL 4, 2012 THE POLICY LISTS SEVERAL SCHOOLS, INCLUDING KENT DENVER SCHOOL, AND READS "THE ABOVE SCHOOLS ADMIT STUDENTS OF ANY RACE, COLOR, NATIONAL, OR ETHNIC ORIGIN TO ALL THE RIGHTS, PRIVILEGES, PROGRAMS, AND ACTIVITIES GENERALLY ACCORDED OR MADE AVAILABLE TO STUDENTS AT THE SCHOOLS THEY DO NOT DISCRIMINATE ON THE BASIS OF RACE, COLOR, NATIONAL OR ETHNIC ORIGIN IN THE ADMINISTRATION OF THEIR EDUCATIONAL POLICIES, ADMISSION POLICIES, SCHOLARSHIP AND LOAN PROGRAMS, AND ATHLETIC AND OTHER SCHOOL ADMINISTERED PROGRAMS"

Schedule E (Form 990 or 990-EZ) 2011

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DLN: 93493043001293

OMB No 1545-0047

2011

Open to Public

Inspection

Employer identification number

SCHEDULE G (Form 990 or 990-EZ)

Fundraising or Gaming Activities

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

Department of the Treasury
Internal Revenue Service

Name of the organization

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.

Supplemental Information Regarding

ENT DENVER COUNTRY DAY	SCHOOL					84-0242810		
Part I Fundraising Ac	tivities. Complete	e if the orga	nization ans	wered "Yes"	to Form	990, Part IV	, line 17.	
Indicate whether the organ	nızatıon raısed funds	through any o	the followin	g activities Ch	eck all th	at apply		
a Mail solicitations			e	licitation of no	n-governr	ment grants		
b Internet and e-mail so	☐ Internet and e-mail solicitations f ☐ Solicitation of government grants							
c Phone solicitations			g ┌ Sp	ecıal fundraısı	ng events			
d In-person solicitation	S				_			
Did the organization have or key employees listed in							┌ Yes 「	_ No
b If "Yes," list the ten higher to be compensated at leas								
(i) Name and address of Individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser h custody o control o contribution Yes N	r s?	ross receipts n activity	(or re fundrai	nount paid to stained by) ser listed in sol (i)	(vi) A mount pa (or retained b organization	y)
		163 14						
otal		>						
List all states in which the licensing	organization is regis	tered or licen	sed to solicit	funds or has b	een notifie	ed it is exempt	from registration	or

Pai	rt II	Fundraising Events. Com more than \$15,000 on Form				
			(a) Event #1	(b) Event #2	(c) Other Events	(d) Total Events (Add col (a) through
			PA AUCTION	BREAKTHROUGH PARTY	(total number)	col (c))
			(event type)	(event type)	(total number)	
Жe	1	Gross receipts	279,952	54,097	63,950	397,999
Revenue	2	Less Charitable contributions	257,982	50,566	49,262	357,810
	3	Gross income (line 1 minus line 2)	21,970	3,531	14,688	40,189
	4	Cash prizes				
မွာ	5	Non-cash prizes			778	778
euse	6	Rent/facility costs	2,473		800	3,273
Expenses	7	Food and beverages	12,247	5,658	13,354	31,259
Direct	8	Entertainment	2,250	300	450	3,000
ឨ	9	Other direct expenses .	17,186	6,708	17,237	41,131
	10	Direct expense summary Add lin	es 4 through 9 ın column	(d)		(79,441)
	11	Net income summary Combine III	nes 3 and 10 ın column (d)	•	-39,252
Par	t III	Gaming. Complete if the or \$15,000 on Form 990-EZ, lir		"Yes" to Form 990, Pa	rt IV, line 19, or repo	
Revenue			(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (Add col (a) through col (c))
	1	Gross revenue				
ses	2	Cash prizes				
pen	3	Non-cash prizes				
Direct Expenses	4	Rent/facility costs				
즈	5	Other direct expenses				
	6	Volunteer labor	Г Yes Г No	Г Yes Г No	┌ Yes	
	7	Direct expense summary Add lines	s 2 through 5 ın column (d)		()
	8	Net gaming income summary Com	bine lines 1 and 7 in colu	ımn (d)		
9 a b	Ent Is t	er the state(s) in which the organiza the organization licensed to operate No," Explain	ition operates gaming act	tivities		
U	11 1					
10a b	Wer	re any of the organization's gaming l Yes," Explain	icenses revoked, susper	ided or terminated during	the tax year?	· · Fyes Fno

Sche	dule G (Form 990 or 990-EZ) 20	11			Page 3
11	Does the organization operate ga	aming activities with nonmembers? .		Г _{Yes} Г	- No
12	Is the organization a grantor, be	neficiary or trustee of a trust or a mem	per of a partnership or other entity		
	formed to administer charitable (gamıng?		· · · · F Yes F	- No
13	Indicate the percentage of gamii	ag activity operated in		1 1	
a				13a	
b					
14		f the person who prepares the organiza		<u> </u>	
	Name ►				
	Address ►				
	revenue?	ntract with a third party from whom the			- No
		ed by the third party 🟲 \$			
С	If "Yes," enter name and address	S			
	Name 🟲				
	Address ►				
16	Gaming manager information				
	Name 🟲				
	Gaming manager compensation I	\$ \$			
	Description of services provided	>			
17 a		Employee er state law to make charitable distribu		· · ·	- No
b	Enter the amount of distributions	required under state law distributed to	o other exempt organizations or sp		-
_		activities during the tax year > \$		hadala C /	
Par	t IV Complete this part to property instructions.)	provide additional information for	responses to quuestion on Sc	nedule G (see	
	Identifier	ReturnReference	Explana	tion	
		•	•		

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Schedule I

(Form 990)

Department of the Treasury

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

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

Attach to Form 990

OMB No 1545-0047

2011

DLN: 93493043001293

Open to Public Inspection

Internal Revenue Service Name of the organization Employer identification number KENT DENVER COUNTRY DAY SCHOOL 84-0242810 Part I General Information on Grants and Assistance Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to 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. Use (a) Name and address of **(b)** EIN (c) IRC Code (d) Amount of cash (f) Method of (a) Description of (h) Purpose of grant (e) A mount of nonorganization section grant valuation non-cash assistance or assistance cash ıf applicable (book, FMV, or government assistance appraisal, other)

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

(a)Type of grant or assistance	(b) Number of recipients	(c)A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book FMV, appraisal, other)	, (f) Description of non-cash assistance
(1) FINANCIAL GRANT TO WARD TUITION	90	1,817,720	64,340		BOOKS, CLASS FEES, AND SCHOOL RELATED TRIPS

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

Identifier	Return Reference	Explanation
PROCEDURE FOR MONITORING GRANTS IN THE U S	PART I, LINE 2	SCHEDULE I, PART I, LINE 2 GRANT FUNDS ARE APPLIED DIRECTLY TO STUDENTS' TUITION ACCOUNTS, SO THEY ARE AUTOMATICALLY APPLIED TO TUITION, FEES AND/OR OTHER SCHOOL RELATED EXPENSES THERE IS NO OPPORTUNITY FOR GRANT FUNDS TO BE USED FOR OTHER PURPOSES
		FINANCIAL AID APPLICANTS COMPLETE AN APPLICATION WITH SSS (SCHOOL AND SCHOLASTIC SERVICES), WHICH PREPARES A REPORT, WHICH IS REVIEWED ALONG WITH TAX RETURNS AND SUPPLEMENTAL INFORMATION ALONG WITH W-2S, BANK ACCOUNT BALANCES, AND A PERSONAL STATEMENT OF NEED RECEIPIENTS ARE NOTIFIED OF THEIR FINANCIAL AID AWARD WHEN OFFERED AN ENROLLMENT CONTRACT FOR THE FOLLOWING SCHOOL YEAR THE SCHOOL REQUIRES APPLICANTS TO SIGN AN IRS FORM 4506 WHICH ALLOWS THE SCHOOL TO OBTAIN A COPY OF THE APPLICANT FAMILY'S INCOME TAX RETURN

DLN: 93493043001293

OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury Internal Revenue Service

Compensation Information

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

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

Open to Public

terrai Neveriae Service	Attach to Form 990. Fisee separate instructions.	Inspection
Name of the organization		Employer identification number
KENT DENVER COUNTRY DAY SCHOOL		
		84-0242810

Pa	rt I Questions Regarding Compensation							
			Yes	Νo				
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form							
	990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items							
	First-class or charter travel Housing allowance or residence for personal use							
	Travel for companions Payments for business use of personal residence							
	Tax idemnification and gross-up payments Health or social club dues or initiation fees							
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)							
b	If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement orprovision of all the expenses described above? If "No," complete Part III to explain		,					
2		1b	Yes					
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	2	Yes					
			103					
3	Indicate which, if any, of the following the organization uses to establish the compensation of the							
	organization's CEO/Executive Director Check all that apply							
	Compensation committee Written employment contract							
	Independent compensation consultant Compensation survey or study							
	Form 990 of other organizations A pproval by the board or compensation committee							
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization							
а	a Receive a severance payment or change-of-control payment?							
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		Νo				
c	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		Νo				
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III							
	Only 501(c)(3) and 501(c)(4) organizations only must complete lines 5-9.							
5	For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of							
а	The organization?	5a		Νo				
b	····, ································	5b		Νo				
	If "Yes," to line 5a or 5b, describe in Part III							
6	For persons listed in form 990 , Part VII, Section A, line $1a$, did the organization pay or accrue any compensation contingent on the net earnings of							
а	The organization?	6a		No				
b	Any related organization?	6b		Νo				
	If "Yes," to line 6a or 6b, describe in Part III							
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III	7		No				
8	Were any amounts reported in Form 990, Part VII, paid or accured pursuant to a contract that was subject to the initial contract exception described in Regs section 53 4958-4(a)(3)? If "Yes," describe in Part III	6		N.o.				
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?	9		No				

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

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

Note. The sum of columns (B)(1)-(III) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, columns (D) and (E) for that individual

(A) Name		(B) Breakdown of W-2 and/or 1099-MIS (i) Base (ii) Bonus & Incentive (iii) Bonus & Incentive (iii) Bonus & Incentive (iii) Bonus & Incentive (iii) Bonus & Incentive (iiii) Bonus & Incentive (iiiii) Bonus & Incentive (iiiii) Bonus & Incentive (iiiii) Bonus & Incentive (iiiii) Bonus & Incentive (iiiiiiii) Bonus & Incentive (iiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiii		SC compensation (iii) Other reportable compensation	(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(ı)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ		
(1) TODD HORN	(1) (11)	234,903			24,216	50,106 0	327,015	0 0		
(2) JERRY WALKER	(I) (II)	138,097 0	37,043 0	20,848	15,545 0	22,244	233,777 0	0		
	_									
			_							
			_							
			_							
			_							
			_							

Schedule J (Form 990) 2011 Page **3**

Part III Supplemental Information

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

Identifier	Return Reference	Explanation
	· '	AS PART OF THE EMPLOYMENT CONTRACT THE HEAD OF SCHOOL IS PROVIDED THE USE OF A HOUSE ON CAMPUS AND HOUSE-CLEANING SERVICES THE BENEFITS PROVIDED ARE NOT TREATED AS TAXABLE COMPENSATION TO THE INDIVIDUAL

Schedule J (Form 990) 2011

Supplemental Information on Tax Exempt Bonds

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

OMB No 1545-0047

2011

DLN: 93493043001293

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Schedule K

(Form 990)

KENT DENVER COUNTRY DAY SCHOOL

Employer identification number

84-0242810

									8	4-0242	2810			
Pa	art I Bond Issues													
	(a) Issuer Name	(b) Issuer EIN	(c) CUSIP #	(d) Date Issued	(e) Issue Pric	e (f) Description	of Purpose	(g) Defease		(h) (feased Beha Issu			Pool
									Yes	No	Yes	No	Yes	No
Α	COLORADO EDUCATIONAL AND CULTURAL FACILITIES AUTHORITY	84-0896727	19645DAU6	02-17-2010	10,147,6	PAY	EFUND 05 SERIES BONDS, AY ISSUANCE COSTS, INANCE TERMINATION EES			х		Х		х
Pa	rt III Proceeds				_		,					1		
	^				Α			3		С			D	
	A mount of bonds retired			365,000)									
	A mount of bonds defeased						1							
3	Total proceeds of issue		10	,147,694	<u> </u>									
4	Gross proceeds in reserve fund													
5	Capitalized interest from proce													
6	Proceeds in refunding escrow													
7	Issuance costs from proceeds					202,600)							
8	Credit enhancement from proc	eeds												
9	Working capital expenditures f	from proceeds												
10	Capital expenditures from proc	ceeds												
11	Other spent proceeds		-		9	,945,094								
12	Other unspent proceeds													
13	Year of substantial completion	n					•					•		
					Yes	No	Yes	No	Yes		No	Yes		No
14	Were the bonds issued as part	t of a current refund	ing issue?		X									
15	Were the bonds issued as part	t of an advance refu	nding issue?			Х								
16	Has the final allocation of proc	ceeds been made?			Х									
17	Does the organization maintain allocation of proceeds?		nd records to supp	port the final	×									
Par	rt IIII Private Business U	lse					T							
					-	A B			С		ļ .,	D		
_	Man bland and a man and a			1.Ch.ah.a	Yes	No	Yes	No	Yes		No	Yes	+	No
1	Was the organization a partner	.LC, which owned		Χ										

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

property financed by tax-exempt bonds?

financed property?

Sche	edule K (Form 990) 2011								Page 2
Par	t III Private Business Use (Continued)								•
			Α	В		С			D
		Yes	No	Yes	No	Yes	No	Yes	No
За	Are there any management or service contracts that may result in private busine use?	ess	Х						
b	If 'Yes' to line 3a, does the organization routinely engage bond counsel or other of counsel to review any management or service contracts relating to the financed property?	outside							
С	Are there any research agreements that may result in private business use of bo financed property?	nd-	x						
d	If 'Yes' to line 3c, does the organization routinely engage bond counsel or other counsel to review any research agreements relating to the financed property?	outside							
4	Enter the percentage of financed property used in a private business use by entitother than a section 501(c)(3) organization or a state or local government	ties	0 %						•
5	Enter the percentage of financed property used in a private business use as a resunrelated trade or business activity carried on by your organization, another section (c)(3) organization, or a state or local government		0 %						
6	Total of lines 4 and 5		0 %						
7 Has the organization adopted management practices and procedures to ensure the post-issuance compliance of its tax-exempt bond liabilities?			Х						
Pa	rt IV Arbitrage			-					
		Α		В		С		D	

FGI	GIV Arbitrage								
		Α		В		С		D	
		Yes	No	Yes	No	Yes	No	Yes	No
1	Has a Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate, been filed with respect to the bond issue?		х						
2	Is the bond issue a variable rate issue?		X						
3a	Has the organization or the governmental issuer entered								
	into a hedge with respect to the bond issue?		V						
			Х						
b	Name of provider								
С	Term of hedge								
d	Was the hedge superintegrated?								
е	Was a hedge terminated?								
4a	Were gross proceeds invested in a GIC?		Х						
ь	Name of provider								
С	Term of GIC								
d	Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?								
5	Were any gross proceeds invested beyond an available temporary period?		Х						
6	Did the bond issue qualify for an exception to rebate?		×						

Part V Procedures To Undertake Corrective Action

Part VI Supplemental Information

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

Identifier	Return Reference	Explanation
SCHEDULE K,		THE AMOUNT REPORTED ON PART II, LINE 11 IS THE AMOUNT OF BOND PROCEEDS USED IN 2010 TO REFUND THE SERIES 2005 BONDS
PART II,		
PROCEEDS		

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493043001293

Schedule L

(Form 990 or 990-EZ)

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

OMB No 1545-0047

Open to Public **Inspection**

Department of the Treasury Internal Revenue Service

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

	the organization VER COUNTRY DAY SCHOOL		Employer identification number 84-0242810										
Part I	Excess Benefit Trar Complete if the organizat	nsacti	ons (s	section 501	(c)(3) a	and section 501	(c)(4)	organi	zations (only).	ine 40h		
1	(a) Name of disqu					(b) Description of transaction Corr							
							Yes	No					
2 Enter the amount of tax imposed on the organization 4958				ested Pers d "Yes" on F	sons. orm 990	e organization .		 m 990-l	(f) Approved by board or		a (g)Writ		
		То	From	1			Yes	No	Yes	No	Yes	No	
Total .					▶ \$								
Part III	Grants or Assistar Complete if the orga						/, lıne	27.					
(a	a) Name of interested pers	on	(-	•	en interested per ganization	(c)A mount of grant or type of assistance						
(1) BRANNON JONES FAMILY MEMB					BER OF TRUSTEE					5,070 5,070			

FAMILY MEMBER OF AN OFFICER

(3) ABIGAIL WALKER

19,070

Part IV Business Transactions I Complete if the organization			ne 28a, 28b, or 28c.			
(a) Name of interested person	(b) Relationship between interested person and the	(c) A mount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?		
	organization			Yes	No	

Part V Supplemental Information

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

Identifier	Return Reference	Explanation
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Schedule L (Form 990 or 990-EZ) 2011

DLN: 93493043001293

OMB No 1545-0047

Open to Public Inspection

SCHEDULE M (Form 990)

Department of the Treasury Internal Revenue Service

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

NonCash Contributions

Name of the organization KENT DENVER COUNTRY DAY SCHOOL **Employer identification number**

					84-0242810			
Pa	rt I Types of Property			<u> </u>	.			
		(a) Check If applicable	(b) Number of Contributions or items contributed	(c) Contribution amounts reported on Form 990, Part VIII, line 1g	(d Method of d contribution	etermı		
	Art—Works of art							
2	Art—Historical treasures .							
3	Art—Fractional Interests							
4	Books and publications							
5	Clothing and household	l x		1,866	COST			
-	goods			2,000	C051			
7	Boats and planes							
	Intellectual property Securities—Publicly traded .	X	17	07.000	CELLING DDICE			
	Securities—Publicity traded . Securities—Closely held stock .		17	07,002	SELLING PRICE			
	Securities—Partnership, LLC, or trust interests							
12	Securities—Miscellaneous							
	Qualified conservation contribution—Historic structures							
14	Qualified conservation contribution—Other							
15	Real estate—Residential .							
16	Real estate—Commercial							
17	Real estate—Other							
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies .							
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts							
	CAMERA & PHOTOGRAPHY							
25	Other ► (EQUIPMENT)	X	4	2,187	COST			
	TICKETS &			_,				
	GIFT							
26	Other ► (CERTIFICATES)	Х	21	11,697	COST			
27	TRIPS/MISC		2	1,400	COST			
27	Other►(<u>GIVEAWAYS</u>) FOOD	X		1,400				
28	Other ► (DONATIONS)	X	8	507	COST			
29	Number of Forms 8283 received	by the org	anization during the tax yea	ar for contributions				
	for which the organization compl	eted Form 8	3283, Part IV, Donee Ackr	owledgement	29			
							Yes	No
30a	During the year, did the organiza							
	must hold for at least three year			on, and which is not require	d to be used			
	for exempt purposes for the enti	re holding p	period?			30a		No
b	If "Yes," describe the arrangeme	ent in Part 1	II					
31	Does the organization have a gif	t acceptan	ce policy that requires the i	review of any non-standard	contributions?	31	Yes	
32a	Does the organization hire or us contributions?	e third part • • •	es or related organizations	to solicit, process, or sell i	non-cash	32a		No
h	If "Yes," describe in Part II							,
33	If the organization did not report describe in Part II	revenues i	n column (c) for a type of p	roperty for which column (a) is checked,			

Page 2

Part II

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

Identifier Return Reference Explanation

Schedule M (Form 990) 2011

DLN: 93493043001293

OMB No 1545-0047

Inspection

SCHEDULE 0 (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

Name of the organization KENT DENVER COUNTRY DAY SCHOOL

Employer identification number

84-0242810

ldentifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION A, LINE 1	DURING SUCH TIME AS THE BOARD OF TRUSTEES SHALL NOT BE IN SESSION, THE MANAGEMENT AND CONTROL OF KENT DENVER SHALL BE VESTED IN AN EXECUTIVE COMMITTEE CONSISTING OF NOT LESS THAN SEVEN NOR MORE THAN TEN VOTING TRUSTEES OF THE BOARD, ONE OF WHOM SHALL BE THE PRESIDENT THE EXECUTIVE COMMITTEE SHALL HAVE ALL THE POWERS AND AUTHORITY POSSESSED BY THE BOARD OF TRUSTEES EXCEPT THOSE RESERVED TO SAID BOARD BY LAW THE EXECUTIVE COMMITTEE MAY NOT (A) AUTHORIZE DISTRIBUTIONS, (B) ELECT, APPOINT, OR REMOVE ANY TRUSTEE, (C) AMEND THE ARTICLES OF INCORPORATION, (D)ADOPT, AMEND, OR REPEAL THE BYLWAS, (E) APPROVE A PLAN OF MERGER, OR (F) APPROVE A SALE, LEASE, EXCHANGE, OR OTHER DISPOSITION OF ALL, OR SUBSTANTIALLY ALL, OF THE CORPORATION'S PROPERTY THE MEMBERS OF THE EXECUTIVE COMMITTEE SHALL BE ELECTED ANNUALLY IMMEDIATELY FOLLOWING THE ELECTION OF OFFICERS AT EACH ANNUAL MEETING, AND SHALL HOLD OFFICE AT THE PLEASURE OF THE BOARD UNTIL NEXT ANNUAL MEETING
	FORM 990, PART VI, SECTION B, LINE 11	THE FORM 990 IS REVIEWED INTERNALLY BY THE ORGANIZATION'S MANAGEMENT AND THEN REVIEWED BY THE BOARD OF TRUSTEES BEFORE IT IS FILED
	FORM 990, PART VI, SECTION B, LINE 12C	IN THE EVENT ANY TRUSTEE HAS A CONFLICT OF INTEREST THAT MIGHT PROPERLY LIMIT SUCH TRUSTEE'S FAIR AND IMPARTIAL PARTICIPATION IN BOARD DELIBERATIONS OR DECISIONS, SUCH TRUSTEE SHALL INFORM THE BOARD AS TO THE CIRCUMSTANCES OF SUCH CONFLICT IF THOSE CIRCUMSTANCES REQUIRE THE NONPARTICIPATION OF THE AFFECTED TRUSTEE, THE BOARD MAY NONETHELESS REQUEST FROM THE TRUSTEE ANY APPROPRIATE NON-CONFIDENTIAL INFORMATION, WHICH MIGHT INFORM ITS DECISIONS "CONFLICT OF INTEREST", AS REFERRED TO HEREIN, SHALL INCLUDE BUT SHALL NOT BE LIMITED TO, ANY TRANSACTION BY OR WITH THE CORPORATION IN WHICH A TRUSTEE (OR ANY AFFILIATE OF THE TRUSTEE) HAS A DIRECT OR INDIRECT PERSONAL INTEREST, OR ANY TRANSACTION IN WHICH A TRUSTEE IS UNABLE TO EXERCISE IMPARTIAL JUDGMENT OR OTHERWISE ACT IN THE BEST INTEREST OF THE CORPORATION NO TRUSTEE SHALL CAST A VOTE, NOR TAKE PART IN THE FINAL DELIBERATION IN ANY MATTER IN WHICH HE OR SHE, MEMBERS OF HIS OR HER IMMEDIATE FAMILY, OR ANY ORGANIZATION TO WHICH TRUSTEE HAS A ALLEGIANCE, HAS A PERSONAL INTEREST THAT MAY BE SEEN AS COMPETING WITH THE INTEREST OF KENT DENVER ANY TRUSTEE WHO BELIEVES HE OR SHE MAY HAVE SUCH A CONFLICT OF INTEREST SHALL NOTIFY THE BOARD PRIOR TO DELIBERATION ON THE MATTER IN QUESTION, AND THE DISINTERESTED VOTING TRUSTEE SHALL MAKE THE FINAL DETERMINATION AS TO WHETHER ANY TRUSTEE HAS A CONFLICT OF INTEREST IN ANY MATTER THE MINUTES OF THE BOARD MEETING SHALL REFLECT DISCLOSURE OF ANY CONFLICT OF INTEREST AND THE RECUSAL OF THE INTERESTED TRUSTEE.
	FORM 990, PART VI, SECTION B, LINE 15	THE ORGANIZATION HAS A COMPENSATION COMMITTEE THAT REVIEWS THE SALARY OF THE HEAD OF SCHOOL AND THE ASSOCIATE HEAD OF FINANCE AND OPERATIONS BENCHMARK DATA IS GATHERED FROM THE NATIONAL ASSOCIATION OF INDEPENDENT SCHOOLS WEBSITE FOR COMPENSATION INFORMATION FOR SIMILAR POSITIONS AT LIKE INSTITUTIONS THE COMPENSATION REVIEW PROCESS WAS LAST COMPLETED FEBRUARY 23, 2012
	FORM 990, PART VI, SECTION C, LINE 19	THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC VIA ITS WEBSITE AND ALSO UPON REQUEST
CHANGES IN NET ASSETS OR FUND BALANCES	FORM 990, PART XI, LINE 5	NET UNREALIZED LOSSES ON INVESTMENTS -661,846 MISCELLANEOUS NONCASH ITEMS NOT RECORDED ON FINANCIAL STATEMENTS -17,657 TOTAL TO FORM 990, PART XI, LINE 5 -679,503

Software ID: Software Version:

EIN: 84-0242810

Name: KENT DENVER COUNTRY DAY SCHOOL

Form 990, Special Condition Description:

Special Condition Description

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

(A) Name and Title	(B) Average hours per		that					(D) Reportable compensation from the	(E) Reportable compensation from related	(F) Estimated amount of other compensation
	week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)	from the organization and related organizations
KATHRYN RYAN PRESIDENT	2 00	х		x				0	0	0
KEVIN DUNCAN VICE PRESIDENT	2 00	Х		х				0	0	0
JAMIE DUKE TREASURER	2 00	Х		Х				0	0	0
TED WHITE SECRETARY	2 00	Х		Х				0	0	0
TODD HORN HEAD OF SCHOOL	50 00	Х		Х				252,693	0	73,107
ANDY CLARK TRUSTEE	2 00	Х						0	0	0
SURAYA DESORRENTO TRUSTEE	2 00	х						0	0	0
NAVIN DIMOND TRUSTEE	2 00	Х						0	0	0
BECK FISHER TRUSTEE	2 00	Х						0	0	0
ALISON GALANSKY TRUSTEE	2 00	Х						0	0	0
KELLY GALLAGHER TRUSTEE	2 00	Х						0	0	0
CALLAE GILMAN TRUSTEE	2 00	Х						0	0	0
DOUG HENSTON TRUSTEE	2 00	Х						0	0	0
APRIL JONES TRUSTEE	2 00	Х						0	0	0
ERIC MOSLEY TRUSTEE	2 00	Х						0	0	0
KAREN PADGETT TRUSTEE	2 00	Х						0	0	0
CHRIS PETRE TRUSTEE	2 00	Х						0	0	0
CHUCK PROCKNOW TRUSTEE	2 00	Х						0	0	0
JOHN REPINE TRUSTEE	2 00	Х						0	0	0
MEG STAWIARSKI TRUSTEE	2 00	Х						0	0	0
NANCY HOLST TRUSTEE	2 00	Х						0	0	0
MARY KELLY TRUSTEE	2 00	Х						0	0	0
AMY KENNEDY TRUSTEE	2 00	Х						0	0	0
BRUCE MCGRATH TRUSTEE	2 00	Х						0	0	0
MARCIE PROKUPEK TRUSTEE	2 00	Х						0	0	0

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

compensated Employees, and Independent confidences											
(A) Name and Title	(B) Average hours	(C) Position (check all that apply)						(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of other	
	per week	Individual trustae or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	from the organization (W- 2/1099-MISC)	from related organizations (W- 2/1099- MISC)	compensation from the organization and related organizations	
LISA ROBINSON TRUSTEE	2 00	Х						0	0	0	
JENNIFER WATERS TRUSTEE	2 00	Х						0	0	0	
FAYE WEITZMAN TRUSTEE	2 00	Х						0	0	0	
RAMSAY STABLER TRUSTEE	2 00	х						0	0	0	
JERRY WALKER ASSOCIATE HEAD OF SCHOOL	50 00			х				195,988	0	36,573	
SCOTT YATES ATHLETIC DIRECTOR	50 00					Х		114,360	0	29,837	
JOHN KUNTZ MIDDLE SCHOOL DIRECTOR	50 00					Х		110,220	0	31,828	
ERIC CHANDLER UPPER SCHOOL DIRECTOR	50 00					х		100,702	0	26,571	