

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



### Form **990**

**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)

Department of the Treasury Internal, Revenue Service

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

Open to Public Inspection

OMB No 1545 0047

	Α	For th	e 2012 calen	dar year, or ta	x year beg	inning Jul	1	, 20	12, and	endin	g Jun	30		, 201	3		
	В	Check if	f applicable	C Name of orga	nization TE	IE WARDLA	W-HARTE	IDGE SO	CHOOL			D Employ	er Identi	ification N	lumber		
		Ad	ldress change	Doing Busine								22-	2109	610			
		П	me change	Number and	street (or P O	box if mail is not	delivered to sti	reet addr)		Room/	suite	<b>E</b> Telepho					
		$\vdash$	tial return	  1295 INM	AN AVEN	лік				i		(90	8) 7·	54-18	182		
		Н	rminated	City, town or				St	ate ZIP	code + 4	,	(50	<u> </u>	<u> </u>	,02		
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		∐Ар	plication pending		•	•					' '				Yes		
				ANDREW WEBS					NJ 08		If 'No.'	affiliates inc attach a list	(see ins	tructions)	Yes	Пио	
	<u> </u>	Tax-e	exempt status	X 501(c)(3)	501(c)	<u>(</u> ) <b>1</b> (ı	nsert no.)	4947(a)(1	) or	527							
	J Website: ► WWW.WHSCHOOL.ORG    H(c) Group exemption null   K   Form of organization   X   Corporation   Trust   Association   Other ►   L Year of Formation   1976   M S												umber P				
	K	Form	of organization	X Corporation	Trust	Association	Other ►		L Year o	f Forma	tion 1976 M State of legal domicile NJ						
	Pa	rt I	Summar	<del></del>													
			Briefly descri	be the organiz	ation's mis	sion or most	significant	activities:	EDUCAT	rion -	COLLEGE	PREPARA	TORY	INDEPE	NDENT	SCHOOL	
	Activities & Governance					<del></del>											
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	ove.			ox ► If the					sposed	of mo	re than 25	5% of its r	et ass	ets			
	Ğ			oting members									3			20	
	S			dependent vot									4			20	
^	itie			of individuals		-	ear 2012 (F	Part V, line	2a)				5			210	
2013	훘			of volunteers			, s		E-10 - 104+	-	-m. ,		6			64	
2	ĕ۱	7a	Total unrelate	ed business re d business taxa	venue from	n Part VIII, col	umn (C), II	ne KEC	CIV				7a			0.	
<b>6</b>	_	b	Net unrelated	l business taxa	able incom	e from Form 9	190-1, line	34   \   \	1 1 14 ·	1 i.J			7b	Current Year			
(3)		_						l	<b></b>		P	rior Year					
Z	<u>o</u>			and grants (P			850	MAY	142	014	1	627,3				<u>,431.</u>	
NOT:	Revenue		•	vice revenue (F			} _				1 13	,067,8		13		,344.	
6	ě			ncome (Part VI				000	KJV1	119	<u></u>	46,2			37	<u>,070.</u>	
	•			e (Part VIII, co						"Ul			0.			0.	
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7				imilar amounts				3)			3	,676,3	374.		786	<u>,995.</u>	
Q.				I to or for mem				445.1	= 10								
C)	g			alaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)							<u> </u>	5,583,2	268.		,277	<u>,983.</u>	
	Expenses	16 a	Professional	fundraising fee	es (Part IX	, column (A), l	line 11e)				ļ						
	ĝ	b	Total fundrais	sing expenses	(Part IX, c	olumn (D), lın	e 25) 🟲		488,3	327.							
	ω	17	Other expens	ses (Part IX, co	olumn (A),	lines 11a-11d	, 11f-24e)				3	,313,9	96.	3	419	,074.	
				es. Add lines 1				A), line 25)	,			,573,6				,052.	
			•	s expenses. Su	•	•		. ,,				167,8				,793.	
	8 8		1.070								Reginnir	ng of Curren			nd of Ye		
	SE	20	Total assets	(Part X, line 10	6)						_	, 275, 5				,822.	
	A B			es (Part X, line					•			,390,7	$\overline{}$			,287.	
	Net Assets or Fund Balance					lina Ol fram I	20								•		
			<del></del>	fund balances	s. Subtract	ille 21 ilolli i	1116 20				1 14	,884,8	29.	16	, 696	<u>,535.</u>	
		rt II	Signatur														
	Unde	r penalt ilete De	lies of perjury, I de eclaration of prepa	eclare that I have e arer (other than offi	examined this incoming cer) is based of	return, including ac on all information o	companying s of which prepa	chequies and s rer has any kno	itatements owledge	, and to	the best of n	пу кпожіваде	and bei	ier, it is tr	ue, correc	x, and	
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				Freel					728-1	742		Phone no	(732		0-51		
	May	the II	RS discuss th	iis return with t	the prepare	er shown abov	e? (see ins	structions)						X   Y	'es	No	

Form 990 (2012)

	Statement of Program Service Accomplishments Check if Schedule O contains a response to any question in this Part III				
•	describe the organization's mission.				
ŒDŪC	ATION - COLLEGE PREPARATORY INDEPENDENT SCHOOL				. – – -
	organization undertake any significant program services during the year which were not listed on the prices and services.	or _	1		<b>M</b> .
	90 or 990-EZ? ' describe these new services on Schedule O.	L	Yes	X	No
	organization cease conducting, or make significant changes in how it conducts, any program services?		Yes	x	No
	describe these changes on Schedule O.	ļ	]		
Section	be the organization's program service accomplishments for each of its three largest program services, as a 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of the total expenses, and revenue, if any, for each program service reported.	measur grants	ed by e and all	xpens ocatio	es. ns to
4a (Code:	) (Expenses \$ 11,666,107. including grants of \$ 3,786,995.) (Revenue ATION OF PRE-K TO GRADE 12 STUDENTS				0.)
					. <b></b> -
			<u>-</u>		
4 b (Code:	) (Expenses \$) (Revenue	\$			)
4c (Code	) (Expenses \$ including grants of \$) (Revenue	\$_			)
					. – – -
					. <b>– –</b> -
				<del>-</del>	· <del></del> -
4 d Other p	orogram services. (Describe in Schedule O )				
(Exper				)	
4 e Total p	rogram service expenses ► 11,666,107.				

Form 990 (2012) THE WARDLAW-HARTRIDGE SCHOOL

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### Part IV | Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A	1	х	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I	3		х
4	<b>Section 501(c)(3) organizations</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If 'Yes,' complete Schedule C, Part II</i>	4		х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If 'Yes,' complete Schedule C, Part III	5		х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, Part I	6		х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If 'Yes,' complete Schedule D, Part II	7		х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III	8		х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management credit repair, or debt negotiation services? If 'Yes,' complete Schedule D, Part IV	9		х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If 'Yes,' complete Schedule D, Part V	10	х	
11	If the organization's answer to any of the following questions is 'Yes', then complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable.			
	a Did the organization report an amount for land, buildings and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI	11 a	х	
	Did the organization report an amount for investments — other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VII	11 b		х
	Did the organization report an amount for investments – program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VIII	11 c		х
	I Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part IX	11 d	7	х
	e Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X	11 e	X	
	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If 'Yes,' complete Schedule D, Part X	11 f		х
	a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI, and XII	12a	х	
	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 and XII is optional is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	12b 13	х	х
	a Did the organization maintain an office, employees, or agents outside of the United States?	14a	**	Х
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If 'Yes,' complete Schedule F, Parts I and IV	14b	:	х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If 'Yes,' complete Schedule F, Parts II and IV	15		х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? <i>If 'Yes,' complete Schedule F, Parts III and IV</i>	16		х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I (see instructions)	17		х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II	18	х	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III	19		х
	a Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H	20		X
ŀ	o If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?	20 b		

**Partitives** Checklist of Required Schedules (continued)

	•		Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II	21		х
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If 'Yes,' complete Schedule I, Parts I and III	22	х	
23	Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If 'Yes,' complete Schedule J	23	х	
	a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, and that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No, 'go to line 25	24a		x
١	b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		ļ
	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		
•	d Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		<u> </u>
25 a	a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I	25a		х
l	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		х
26	Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If 'Yes,' complete Schedule L, Part II	26		х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If 'Yes,' complete Schedule L, Part III	27		х
	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):			The second
á	A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a		X
1	A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28b		х
•	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If 'Yes,' complete Schedule L, Part IV	28c		x
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M	30		х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II	32		х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301 7701-3? <i>If 'Yes,' complete Schedule R, Part I</i>	33		х
34	Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts II, III, IV, and V, line 1	34		х
35 a	a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
ŧ	o If 'Yes' to line 35a, 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		
36	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If 'Yes,' complete Schedule R, Part V, line 2</i>	36		х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI	37		х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?  Note. All Form 990 filers are required to complete Schedule O	38	Х	
AΑ		Form	990 (	2012)

Part V Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response to any guestion in this Part V			
Check it Schedule O cortains a response to any question in this rait v		Yes	No
1 a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable .   1a		1.44	
<b>b</b> Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable			
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
(gambling) winnings to prize winners?	1 c	х	_
2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return  2a 210			
b if at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2 b	Х	
Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. (see instructions)			
3 a Did the organization have unrelated business gross income of \$1,000 or more during the year?	3 a		Х
<b>b</b> If 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule O	3 b		Ĺ
4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4 a		х
<b>b</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.			
5 a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5 a		Х
<b>b</b> Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5 b		Х
c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?	5 c		
6 a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6 a		x
<b>b</b> If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6 b		
7 Organizations that may receive deductible contributions under section 170(c).			
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and	_		
services provided to the payor?	7 a	<del></del>	X
<b>b</b> If 'Yes,' did the organization notify the donor of the value of the goods or services provided?	7 b	ļ	├
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7с		х
d If 'Yes,' indicate the number of Forms 8282 filed during the year	_		v
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7 e	ļ	X
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7 f	ļ	X
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7 g		
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7 h		
<b>Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.</b> Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		х
9 Sponsoring organizations maintaining donor advised funds.			
a Did the organization make any taxable distributions under section 4966?	9 a	<u> </u>	X
<b>b</b> Did the organization make a distribution to a donor, donor advisor, or related person?	9 b		X
10 Section 501(c)(7) organizations. Enter.	ļ		
a Initiation fees and capital contributions included on Part VIII, line 12 . 10a			ļ
<b>b</b> Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11 Section 501(c)(12) organizations. Enter:			
a Gross income from members or shareholders			
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	ļ	ļ
b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year [12b]			
13 Section 501(c)(29) qualified nonprofit health insurance issuers.			
a Is the organization licensed to issue qualified health plans in more than one state?	13a	1	_
Note. See the instructions for additional information the organization must report on Schedule O.			
b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
c Enter the amount of reserves on hand		L	
14a Did the organization receive any payments for indoor tanning services during the tax year?	14a	<del> </del>	X
<b>b</b> If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule O	14b		

Part VI Governance, Management and Disclosure For each 'Yes' response to lines 2 through 7b below, and for a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response to any question in this Part VI X Section A. Governing Body and Management Yes No 1 a Enter the number of voting members of the governing body at the end of the tax year 20 1 a If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O. **b** Enter the number of voting members included in line 1a, above, who are independent 1 b 20 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 X 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 X Did the organization make any significant changes to its governing documents 4 Х since the prior Form 990 was filed? Did the organization become aware during the year of a significant diversion of the organization's assets? 5 X Х 6 Did the organization have members or stockholders? 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? 7 a Х **b** Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or other persons other than the governing body? 7 b X Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following 8 a Х a The governing body? 8 b Х **b** Each committee with authority to act on behalf of the governing body? Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If 'Yes,' provide the names and addresses in Schedule O q X Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes Νo 10a Did the organization have local chapters, branches, or affiliates? 10 a Х b If 'Yes,' did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b 11 a X 11 a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? b Describe in Schedule O the process, if any, used by the organization to review this Form 990 12a Did the organization have a written conflict of interest policy? If 'No,' go to line 13 12a X b Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise Х to conflicts? 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in 12c X Schedule O how this is done X 13 Did the organization have a written whistleblower policy? 13 14 Did the organization have a written document retention and destruction policy? 14 X 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? Х a The organization's CEO, Executive Director, or top management official 15a X **b** Other officers of key employees of the organization 15<sub>b</sub> If 'Yes' to line 15a or 15b, describe the process in Schedule O. (See instructions.) 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 16 a X b If 'Yes,' did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the 16b organization's exempt status with respect to such arrangements? **Section C. Disclosure** List the states with which a copy of this Form 990 is required to be filed ► New Jersey Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply. X Upon request Another's website Other (explain in Schedule O) Describe in Schedule O whether (and if so, how) the organization makes its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. State the name, physical address, and telephone number of the person who possesses the books and records of the organization. EDISON 1295 INMAN AVENUE NJ 08820 (908) 754-1882 Form 990 (2012) BAA

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Form <b>990</b> (2012) THE WAR	DLAW-HARTRIDGE	SCHOOL
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## Part VII | Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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

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

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

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

Check this box if neither the organization	on nor any	relate	d or	ganı	zatı	on cor	npei	nsated any current of	icer, director, or trust	ee
				(C	;)			Į.		
(A) Name and Title	(B) Average hours per week (list	one bo	x. uni	ess p	ersor	more the state of	an e)	(D)  Reportable compensation from the organization	(E)  Reportable compensation from related organizations	(F) Estimated amount of other compensation
	any hours for related organiza- tions below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)	(W-2/1099 MISC)	from the organization and related organizations
(1) PETER MINNIUM	8.00			:						
TRUSTEE		Х						0.	0.	<u> </u>
(2) SHEELAGH CLARKE TRUSTEE	8.00	x						0.	0.	0.
(3) JEAN BADALAMENTI	8.00	<del></del> -	$\vdash$				_			
TRUSTEE	· ·	х						0.	٥.١	0.
(4) JEANNE BARBET	8.00									
TRUSTEE		Х	_					0.	0.	0.
(5) ROBERT BERRY	8.00									
TRUSTEE		X	igspace					0.	0.	0.
_(6)_FRANCES_BESSETTE	8.00	ļ								
TRUSTEE		X						0.	0.	0.
_(7)_GREGORY_CASAGRANDE	8.00									
TRUSTEE		Х						0.	0.	0.
(8) NAYAN DALAL	8.00									
TRUSTEE		X						0.	0.	0.
(9) ANTHONY D'AMORE	8.00							ı ı		
TRUSTEE		X						0.	0.	0.
(10) ANNE HOSKINS	8.00	1								
TRUSTEE	<del> </del>	X			_			0.	0.	0.
(11) ERICA NEEDLE	8.00							_		_
TRUSTEE	+	X			_			0.	0.	0.
(12) SURESH NICHANI	8.00				- 1					_
TRUSTEE	<del>                                     </del>	<u> </u>	$\vdash$		_			0.	0.	0.
(13) RANDOLPH ROGERS	8.00							_		•
TRUSTEE	0.00	X	$\vdash$	$\dashv$				0.	0.	0.
(14) RONALD STARNER TRUSTEE	8.00	х						0.	0.	^
17/03166							$oldsymbol{ol}}}}}}}}}}}}}}}}}}$	<u> </u>		0.

	(B)			((	<del>2</del> )				•		,	
(A) Name and title	Average hours per	box,	unle	heck ss pe	rson direct	than is both or/trus	h an stee)	(D)  Reportable compensation from	<b>(E)</b> Reportable compensation from	amou	(F) timated nt of ot	her
	- tions	or director	Institutional trustee	Officer	Key employee	employee	Former	the organization (W-2/1099 MISC)	related organizations (W-2/1099-MISC)	fro orga and	oensation the inization trelated in inization in inization inization inization	n d
	below dotted line)	ıstee	rustee		6	ensated						
(15) LAURA STEVENS TRUSTEE	8.00	х						0.	0.			0.
(16) HARRY OSBORNE PRESIDENT	8.00			х				0.	0.			0.
(17) NOORALI SONAWALLA VICE PRESIDENT	8.00			х				0.	0.			0.
(18) PAMELA HATTEM SECRETARY	8.00			х				0.	0.			0.
(19) LOUIS RIZZO TREASURER	8.00			х				0.	0.			0.
(20) SURESH MODY ASSISTANT SECRETARY/TREASURER	8.00			х				0.	0.			0.
(21) ANDREW WEBSTER HEADMASTER	40.00				x			192,743.	0.		35,	231.
(22) MARC SPIVAK DIRECTOR OF TECHNOLOGY	40.00					х		106,575.	0.			432.
(23)												
(24)												
(25)												
1 b Sub-total					•	•	<b>•</b>	299,318.	0.	ļ	35,	663.
c Total from continuation sheets to Part VII, Section d Total (add lines 1b and 1c)			,				•	299,318.	0.			663.
2 Total number of individuals (including but not limite	ed to the	se li	sted	abo	ove)	who	rec	ceived more than \$	\$100,000 of reporta	ble com	pensa	ation
from the organization 2											Yes	No
3 Did the organization list any <b>former</b> officer, directo on line 1a? If 'Yes,' complete Schedule J for such			key	emp	oloye	ee, o	r hiệ	ghest compensate	d employee	3		х
4 For any individual listed on line 1a, is the sum of rithe organization and related organizations greater such individual	eportable than \$1!	e cor 50,00	npe 00?	nsat <i>If 'Y</i>	tion 'es' i	and comp	othe olete	er compensation free Schedule J for	rom	4	х	
5 Did any person listed on line 1a receive or accrue for services rendered to the organization? If 'Yes,'	compen:	satıo <i>e Sc</i>	n fro	om a ule .	any <i>J for</i>	unrel	lated h pe	d organization or i	ndıvıdual	- 5		х
Section B. Independent Contractors  1 Complete this table for your five highest compensa	ted inde	nenc	lent	con	trac	tors	that	received more th	an \$100,000 of			
compensation from the organization Report compe	ensation	for t	he c	cale	ndar	yea	r en	iding with or within	the organization's	tax yea	r.	
(A) Name and business addre	ss							(B) Description (		Compe	C) nsatio	on
AETNA 88218 EXPEDITE WAY C				II				HEALTH INSU				992.
ENCON PO BOX 2293 3433 SUNSET AVENUE O			· <u> </u>	NJ				REPAIRS AND M				<u> 121.</u>
	OBURN			MA				FOOD SERVIC	f f			831.
STILO EXCAVATION, INC 2907 SOUTH CLINTON AVENUE SO BREZA BUS SERVICE, INC. PO BOX 143A 101 EAST INMAN AVENUE R			LELD	NJ				CONSTRUCTION TRANSPORTATION	1			847. 844.
2 Total number of independent contractors (including			ted t								-557	<u> </u>
\$100,000 in compensation from the organization												

Par	t VI	II Statement of Rev					, ,	
	•	· Check if Schedule O	contains a resp	oonse to any questi	(A) Total revenue	(B)  Related or exempt function revenue	(C) Unrelated business revenue	(D)  Revenue excluded from tax under sections 512, 513, or 514
ENUE AND OTHER SIMILAR AMOUNTS		Federated campaigns Membership dues Fundraising events Related organizations Government grants (contributional difference of the contributions), gifts, committee amounts not included Noncash contributions included Total. Add lines 1a-1f	grants, and above 1 f	92,366. 2,155,065.	2,247,431.			
PROGRAM SERVICE REVENUE	2a b c d e f	TUITION AND FE SUMMER SCHOOL/ AUXILIARY INCO RENTAL OF FACI OTHER INCOME All other program service	CAMP ME LITIES	611600 611710 900099 531120 900099	336,081. 319,654. 201,255. 130,060.	12,866,294. 336,081. 319,654. 201,255. 130,060.	0. 0. 0. 0.	0. 0. 0.
4	3 4 5	Investment income (incother similar amounts) Income from investmen Royalties		▶	37,070.	37,070.	0.	0.
	b c d	Gross rents Less: rental expenses Rental income or (loss) Net rental income or (lo Gross amount from sales of assets other than inventory		(ii) Other				-
	c d	Less: cost or other basis and sales expenses Gain or (loss) Net gain or (loss) Gross income from fund	traising events	<b>•</b>			-	
OTHER REVENUE	b	of contributions reported See Part IV, line 18 Less: direct expenses Net income or (loss) fro	92,366. d on line 1c).	a 68,339. b 68,339.	0.		0.	0.
	b c	Gross income from gam See Part IV, line 19 Less: direct expenses Net income or (loss) fro Gross sales of inventor	om gaming acti	a b vities		-	•	
	b	Gross sales of inventor and allowances  Less: cost of goods sole  Net income or (loss) fro  Miscellaneous Reven	d om sales of inve	a b entory Business Code				
	b d			<b>.</b>				
		Total revenue. See inst		•	16,137,845.	13,890,414.	0.	0.

#### Part IX | Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

	Check if Schedule O contains a re				
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	<b>(D)</b> 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	3,786,995.	3,786,995.		
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	192,743.	192,743.	0.	0.
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)		•		
7	Other salaries and wages	5,825,497.	4,184,830.	1,491,526.	149,141.
8	Pension plan accruals and contributions (include section 401(k) and section 403(b)				
_	employer contributions)	333,576.	242,637.	82,672.	8,267.
	Other employee benefits	445,600.	324,122.	110,435.	11,043.
10	· · · · · · · · · · · · · · · · · · ·	480,567.	349,557.	119,101.	11,909.
	Fees for services (non-employees):				
	Management			5.040	
	Legal	5,040.	0.	5,040.	0.
	Accounting .	32,750.	0.	32,750.	0.
	Lobbying				
	e Professional fundraising services See Part IV, line 17				
g	Investment management fees Other. (If line 11g amt exceeds 10% of line 25, column (A) amt, list line 11g expenses on Sch 0)				
12	Advertising and promotion	74,530.	61,041.	11,656.	1,833.
	Office expenses	218,829.	137,862.	71,207.	9,760.
14	Information technology				
15	· · · · · · · · · · · · · · · · · · ·				
16	Occupancy				
17					
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	16,454.	13,476.	2,573.	405.
20	Interest .	84,437.	69,154.	13,206.	2,077.
21	· · · · · · · · · · · · · · · · · · ·				<del></del>
22	Depreciation, depletion, and amortization	596,556.	488,580.	93,301.	14,675.
	Insurance .	150,535.	123,288.	23,544.	3,703.
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)		•		
a	REPAIRS AND MAINTENANCE	489,750.	374,755.	76,597.	38,398.
_	ATHLETIC	311,743.	311,743.	0.	0.
	ADMINISTRATIVE	292,595.	209,635.	45,762.	37,198.
	UTILITIES	292,306.	239,398.	45,717.	7,191.
•	All other expenses	853,549.	556,291.	104,531.	192,727.
25	Total functional expenses. Add lines 1 through 24e	14,484,052.	11,666,107.	2,329,618.	488,327.
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.  Check here  if following SOP 98-2 (ASC 958-720)				

**Balance Sheet** 

Part X

· Check if Schedule O contains a response to any question in this Part X (B) (A) End of year Beginning of year Cash - non-interest-bearing 1 350 350. 2 2 Savings and temporary cash investments 2,639,007 2,923,416. 3 3 Pledges and grants receivable, net 38,281 1,719,257. 4 4 Accounts receivable, net 176,077 161,800. Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 5 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L 6 Notes and loans receivable, net 7 48,800 48,800. 8 Inventories for sale or use 27,484 33,848. Prepaid expenses and deferred charges 9 117,717 87,743. Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a 23,838,010 **b** Less: accumulated depreciation 10b 10 c 10,163,947 13,634,329 13,674,063. Investments - publicly traded securities 11 1,569,350 1,755,938. Investments - other securities. See Part IV, line 11 12 12 Investments - program-related. See Part IV, line 11 13 13 14 Intangible assets 14 Other assets. See Part IV, line 11. 15 15 24,182 52,607. 16 Total assets. Add lines 1 through 15 (must equal line 34) 18,275,577 20,457,822. 16 Accounts payable and accrued expenses 17 17 723,743 856,253. Grants pavable 18 18 Deferred revenue 19 19 Tax-exempt bond liabilities 20 20 Escrow or custodial account liability Complete Part IV of Schedule D 21 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L 22 Secured mortgages and notes payable to unrelated third parties 1,322,609 23 1,323,283. Unsecured notes and loans payable to unrelated third parties 24 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D 25 ,344,396 <u>,581,751</u> 26 Total liabilities. Add lines 17 through 25 3,390,748 3,761,287. Organizations that follow SFAS 117 (ASC 958), check here ► x and complete lines 27 through 29, and lines 33 and 34. Unrestricted net assets 27 27 12,960,672 14,151,084. Temporarily restricted net assets 28 1,587,530. 979,187 Permanently restricted net assets 944,970 29 957,921. Organizations that do not follow SFAS 117 (ASC 958), check here ▶ and complete lines 30 through 34. Capital stock or trust principal, or current funds 30 30 Paid-in or capital surplus, or land, building, or equipment fund 31 31 Retained earnings, endowment, accumulated income, or other funds 32 32 33 Total net assets or fund balances 33 16,696,535. 14,884,829 Total liabilities and net assets/fund balances 34 34 18,275,577 20,457,822.

BAA

Form 990 (2012)

Forr	n 990 (2012) THE WARDLAW-HARTRIDGE SCHOOL	<u>22-2109610</u>	<u> </u>	Pa	ige 12
Pa	rt XI Reconciliation of Net Assets				
	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	16,13	37,8	145.
2	Jotal expenses (must equal Part IX, column (A), line 25)	2	14,48	34,0	)52.
3	Revenue less expenses. Subtract line 2 from line 1	3	1,65	33,7	93.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	14,88		
5	Net unrealized gains (losses) on investments	5			913.
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	16,69	6,5	35.
Pa	rt XII Financial Statements and Reporting	·			
	Check if Schedule O contains a response to any question in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990. Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O.				
2	Were the organization's financial statements compiled or reviewed by an independent accountant?		2 a		Х
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or rev separate basis, consolidated basis, or both:	iewed on a			
	Separate basis Consolidated basis Both consolidated and separate basis				
1	Were the organization's financial statements audited by an independent accountant?		2 b	Х	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a se	parate		ŀ	
	basis, consolidated basis, or both:    Separate basis			ļ	
			<u> -  </u>	i	
(	If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight review, or compilation of its financial statements and selection of an independent accountant?	of the audit,	2 c	х	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.			ŀ	
3 :	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in Audit Act and OMB Circular A-133?	the Single	3a		х
ļ	If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the or audits, explain why in Schedule O and describe any steps taken to undergo such audits	required audit	3 b		
BAA		<del></del>	Form	990 (	2012)

#### **SCHEDULE A** (Form 990 or 990-EZ)

### **Public Charity Status and Public Support**

OMB No 1545-0047 2012

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

Open to Public

Department of the Treasury Internal Revenue Service Name of the organization

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

Inspection

Employer identification number

THE	W	ARDLAW-HARTE	RIDGE SCHOOL						22-2	10961	)		
Part		Reason for Pu	ublic Charity Status	(All organizations	must o	comple	ete this	part.)	See i	nstruct	ions.		
The o	rga	nization is not a pr	rivate foundation because	e it is: (For lines 1 throu	igh 11, d	check or	nly one b	ox.)					
1	П	A church, convent	tion of churches or assoc	ciation of churches desc	ribed in	section	170(b)(	1)(A)(i).					
2	$\mathbf{x}$	A school describe	d in section 170(b)(1)(A)	(ii). (Attach Schedule E	)								
3	П	A hospital or a co	operative hospital servic	e organization describe	d in sec	tion 170	(b)(1)(A	)(iii).					
4	П	A medical research	ch organization operated	in conjunction with a ho	ospital d	escribed	in sect	ion 170	(b)(1)(A	(iii) En	ter the hosp	ıtal's	
	ш	name, city, and st	tate:										
5		An organization of 170(b)(1)(A)(iv).	perated for the benefit of Complete Part II.)	f a college or university	owned o	or opera	ted by a	govern	mental ı	unit desc	ribed in sec	tion	
6			or local government or go	overnmental unit describ	ed in <b>se</b>	ection 1	70(b)(1)(	(A)(v).					
7		An organization the in section 170(b)(	nat normally receives a s ( <b>1)(A)(vi).</b> (Complete Par	substantial part of its suj rt II.)	pport fro	m a gov	vernmen	tal unit	or from	the gene	eral public d	escrit	ed
8		A community trus	t described in section 17	<b>'0(b)(1)(A)(vi).</b> (Complet	e Part II	.)							
9	$\sqcap$	An organization tha	it normally receives: (1) mo	ore than 33-1/3% of its sup	port from	contribu	itions, m	embersh	nip fees, a	and gross	receipts fron	n activ	/ities
	_	unrelated business (Complete Part III	•	on 511 tax) from business	es acqui	red by th	e organiz	zation af	ter June	n gross II 30, 1975	nvestment in See <b>section</b>	509(a	and 1)(2).
10			rganized and operated e										
11		supported organization	ganized and operated exclo ations described in sectio zation and complete line	n 509(a)(1) or section 50	o perforn )9(a)(2)	n the fun See <b>se</b> c	ctions of ction 509	or carry ( <b>(a)(3).</b> (	out the p Check the	ourposes e box tha	of one or mo it describes t	re put he typ	olicly be of
		a ∏Type I	b ∏Type II c	Type III - Function	ally inte	grated	C	i∐.	Type III -	– Non-fu	inctionally in	ntegra	ited
е		By checking this to other than founda section 509(a)(2).	oox, I certify that the orgition managers and other	anization is not controller than one or more publ	ed direct icly supp	tly or inconted o	directly b organizat	y one o ions de	or more scribed	disqualif in sectio	ied persons n 509(a)(1)	or	
f If the organization received a written determination from the IRS that is a Type I, Type II or Type III supported this box									orting o	rganization,			
g		Since August 17,	2006, has the organizati	on accepted any gift or	contrib	ution fro	m any d	f the fo	llowing p	persons?			
		(i) A person wh	no directly or indirectly co	ontrols, either alone or t	ogether	with ne	rsons de	scribed	l in (ii) a	nd (III)		Yes	No
		below, the g	overning body of the sur	oported organization?	ogenier	mai po	150115 40	,5011500	(, 0		11 g (i)		
		(ii) A family me	mber of a person describ	bed in (i) above?							11 g (ii)		
		(iii) A 35% contr	rolled entity of a person	described in (i) or (ii) at	oove?						11 g (iii)		
h		• •	ing information about the								1.9()		
		(i) Name of supported organization	(ii) EIN	(III) Type of organization (described on lines 1-9 above or IRC section (see instructions))	your go	ation in ) listed in	(v) Did yo the organi column (i) supp	zation in	colun organize	ation in	(VII) Amount supp		etary
					Yes	No	Yes	No	Yes	No			
				<del> </del>	<del>                                     </del>		1.00		1				
(A)													
<u>,, ,, , , , , , , , , , , , , , , , , </u>													
<u>(B)</u>							ļ						
(C)													
(D)													
<u>(E)</u>													
Total													
BAA	For	Paperwork Reduc	ction Act Notice, see the	Instructions for Form	990 or 9	90-EZ.			Schedul	e A (For	m 990 or 99	0-EZ	2012

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

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

Calendar year (or fiscal year beginning in) — (a) 2008 (b) 2009 (c) 2010 (d) 2011 (e) 2012 (f) Total beginning in the interest (b) foot membershelp feet researd. (D) not membershelp feet research. (D) not not be and either paid to or expended on its behalf and either paid to or expended on securities by each person (d) or expended on securities loans, ents, or expended on securities of common or on the business is regularly carried on the paid to expended or expen	Sec	tion A. Public Support						
module any funusal grants? 2 Tar revenues level of the organization's benefit and on its behalf or expended on securities bons; rents, good or expended on securities bons; rents, good or expended on securities behalf or expended on securities bons; rents, good or expended on securities behalf or expended on securities bons; rents, good or expended or expended on securities bons; rents, good or expended or expende	Cale begi	ndar year (or fiscal year nning in) ►	(a) 2008	<b>(b)</b> 2009	(c) 2010	<b>(d)</b> 2011	<b>(e)</b> 2012	(f) Total
organization's benefit and either paid to or expended on its behalf of the paid to or expended on its behalf or the paid to or expended on its behalf or the paid of the paid	1	Gifts, grants, contributions, and membership fees received. (Do not include any 'unusual grants')						
faculties furnished by a governmental unit to the organization without charge of the programment of total contributions by each person (other than a governmental unit or bubblicty supported organization) motuded on line a governmental unit or publicly supported organization) motuded on line a governmental unit or publicly supported organization in line 11, column (f)  6 Public support. Subtract line 5 from line 4  8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from unrelated bubble seasons in securities loans, rents, royalties and income from unrelated bubble seasons in sequilarly carried on 10 Other income, Do not include gain or loss from the sale of again and the line 14 liss of the programment of the line 14 liss of the loss of the programment of the line 14 liss of line 15 liss of the line 14 liss of liss, and line 15 liss of line 16 liss, and line 15 liss of liss, and line 15 liss, and line 15 liss of liss, and line 15 liss of liss, and line 16 liss, and line 16 liss of liss, and line	2	organization's benefit and either paid to or expended						
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)  8 Public support. Subtract line 5 from line 4  8 Gross income from interest, dividends, payments received on securities loans, rents, cryptiles and income from section of sect	3	facilities furnished by a governmental unit to the						
contributions by each person (other than a governmental unit or publicly supported organization) included on line I had exceeds 2% of the amount shown on line II, column (f)  6 Public support Subtract line 5 from line 4  8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources  9 Net income from unrelated business activities, whether or not the business is regulatify carried on the sale of real relation of the sale of the	4	Total. Add lines 1 through 3						
Section B. Total Support  Calendar year (or fiscal year beginning in) >  7 Amounts from line 4  8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources  9 Net income from unrelated business activities, whether or not the business activities, whether or not the business in regularly carried on 2 arried on 2 arried on 2 arried on 3 arrived in 4 arrived in 3 arrived in 5 arr	5	contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount						
Calendar year (or fiscal year beginning in) >  Amounts from line 4  8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources  9 Net income from unrelated business activities, whether or not the business is regularly carried on  10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)  11 Total support. Add lines 7 through 10  12 Gross receipts from related activities, etc (see instructions)  13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here  Section C. Computation of Public Support Percentage  14 Public support percentage from 2011 Schedule A, Part II, line 14  16a 33-1/3% support test — 2012. If the organization did not check the box on line 13, and the line 14 is 33-1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization  17a 10%-facts-and-circumstances test — 2012. If the organization did not check a box on line 13 or 16a, and line 15 is 33-1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization  17a 10%-facts-and-circumstances test — 2011. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization of the Cxx palor percentage for the organization meets the "facts-and-circumstances" test. The organization of the organization in Part IV how the organization meets the "facts-and-circumstances" test. The organization of percentage as a publicly supported organization  17a 10%-facts-and-circumstances test. The organization of the organization of the organization meets the "facts-and-circumstances" test. The organization of percentage as a publicly su	6							
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13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3)  Section C. Computation of Public Support Percentage  14 Public support percentage for 2012 (line 6, column (f) divided by line 11, column (f))  15 Public support percentage from 2011 Schedule A, Part II, line 14  16 a 33-1/3% support test — 2012. If the organization did not check the box on line 13, and the line 14 is 33-1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization  17 a 10%-facts-and-circumstances test — 2012. If the organization did not check a box on line 13 or 16a, and line 15 is 33-1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization  17 a 10%-facts-and-circumstances test — 2012. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and stop here. Explain in Part IV how the organization meets the 'facts-and-circumstances' test, check this box and stop here. Explain in Part IV how or more, and if the organization meets the 'facts-and-circumstances' test, check this box and stop here. Explain in Part IV how the organization meets the 'facts-and-circumstances' test, check this box and stop here. Explain in Part IV how the organization meets the 'facts-and-circumstances' test, check this box and stop here. Explain in Part IV how the organization meets the 'facts-and-circumstances' test, check this box and stop here. Explain in Part IV how the organization meets the 'facts-and-circumstances' test, check this box and stop here. Explain in Part IV how the organization meets the 'facts-and-circumstances' test, check this box and stop here. Explain in Part IV how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization	11							
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and stop here. The organization qualifies as a publicly supported organization  17a 10%-facts-and-circumstances test — 2012. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and stop here. Explain in Part IV how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization  b 10%-facts-and-circumstances test — 2011. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and stop here. Explain in Part IV how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization    I	16 a	33-1/3% support test — 2012. If and stop here. The organization	the organization qualifies as a pul	did not check the plicly supported or	box on line 13, an rganization	id the line 14 is 33	3-1/3% or more, ch	neck this box
or more, and if the organization meets the 'facts-and-circumstances' test, check this box and <b>stop here.</b> Explain in Part IV how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization <b>b 10%-facts-and-circumstances test – 2011.</b> If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and <b>stop here.</b> Explain in Part IV how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization	k	33-1/3% support test — 2011. If t and stop here. The organization	he organization d qualifies as a pu	lid not check a bo blicly supported o	x on line 13 or 16a rganization	a, and line 15 is 3	3-1/3% or more, c	heck this box
or more, and if the organization meets the 'facts-and-circumstances' test, check this box and <b>stop here.</b> Explain in Part IV how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization	17 a	or more, and if the organization i	meets the 'facts-a	and-circumstances	s' test, check this t	box and <b>stop here</b>	e. Explain in Part I'	V how
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions		or more, and if the organization is organization meets the 'facts-and	meets the 'facts-a d-circumstances'	and-circumstances test. The organiza	s' test, check this t ition qualifies as a	box and <b>stop here</b> publicly supporte	e. Explain in Part I ed organization	V how the ▶
	18	Private foundation. If the organiz	zation did not che	ck a box on line 1	3, 16a, 16b, 17a,	or 17b, check this	s box and see instr	ructions -

Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II If the organization fails to qualify under the tests listed below, please complete Part II.)

tion A. Public Support						
Gifts, grants, contributions and membership fees received. (Do not include	(a) 2008	<b>(b)</b> 2009	<b>(c)</b> 2010	(d) 2011	<b>(e)</b> 2012	(f) Total
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						
Gross receipts from activities						
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						
Amounts included on lines 1, 2, and 3 received from			•			
and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13						
Add lines 7a and 7b						
7c from line 6.)						
	<del></del>		4 ) 0010	4,0011	4 > 0010	(D.T.)
	(a) 2008	<b>(b)</b> 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
	-					
			d, third, fourth, or	fifth tax year as a	section 501(c)(3)	<b>-</b>
			. 10 . 1	<u> </u>	1 1	
	=		e 13, column (f))		<del>  </del>	* *
					16	*
				mn (f))	17	*
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				nd line 15 is more	للــــــــــــــــــــــــــــــــــــ	
line 18 is not more than 33-1/3%	, check this box a	nd <b>stop here.</b> The	e organization qua	alifies as a publicly	supported organi	zation -
Private foundation. If the organiz	zation did not che	ck a box on line 1	4, 19a, or 19b, ch	neck this box and	see instructions	<b>&gt;</b>
	dar year (or fiscal yr beginning in) ► 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 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 Add lines 7a and 7b Public support (Subtract line 7c from line 6.)  tion B. Total Support  dar year (or fiscal yr beginning in) ► Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business acquired after June 30, 1975 Add lines 10a and 10b Net income from the sale of capital assets (Explain in Part IV.)  Total support. (Add ins 9, 10c, 11, and 12) First five years. If the Form 990 in organization, check this box and tion C. Computation of Put Public support percentage for 20 Public support percentage for 20 Public support tests — 2012. If is not more than 33-1/3%, check 33-1/3% support tests — 2011. If line 18 is not more than 33-1/3%, check	Grits, grants, contributions and membership fees received. (Oo 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.  Tax revenues levied for the organization without charge Total. Add lines 1 through 5 Amounts included on lines 1, 2, and 3 received from other than 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 Add lines 7a and 7b Public support (Subtract line 7c from line 6.)  tion B. Total Support  far year (or fiscal yr beginning in) Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business acquired after June 30, 1975 Add lines 10a and 10b Net income from 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 lins 9, 10c, 11, and 12)  First five years. If the Form 990 is for the organization, check this box and stop here tion C. Computation of Investment Incom Investment income percentage from 2011 Schedule 33-1/3% support assets — 2012. If the organization in the rest is a 2012. If the organization is a 31-1/3% support assets — 2012. If the organization is a 31-1/3% support assets — 2014. If the organization is a 31-1/3% support assets — 2015. If the organization is a 31-1/3% support assets — 2015. If the organization is a 31-1/3% support assets — 2015. If the organ	ar year (or fiscal yr beginning in) > 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  Amounts included on lines 1, 2, and 3 received from disqualified persons  Amounts included on lines 1, 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  Add lines 7a and 7b  Public support (Subtract line 7c from line 6).  Tion B. Total Support  Tar year (or fiscal yr beginning in) > Amounts from line 6  Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources  Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975  Add lines 10a and 10b  Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on  Other income. Do not include gain or loss from the sale of capital assest (Explain in Part IV.)  Total support, (Addins 9, 10c, 11, and 12)  First five years. If the Form 990 is for the organization's first, secon organization, check this box and stop here  Total support percentage from 2011 Schedule A, Part III, line 15 tion D. Computation of Investment Income Percentage  Investment income percentage from 2011 Schedule A, Part III, line 13 in pay 1, 11, 11, 11, 11, 11, 11, 11, 11, 11,	taryear (or fiscal yr beginning in) > (a) 2008 (b) 2009 (c) 2010 (cfts, cyrants, 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'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  Amounts included on lines 1, 2, and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 19% of the amount on line 13 for the year.  Add lines 7a and 7b  Public support (Subtract line 7c from line 6.  To from line 6.  Total Support  Tay year (or fiscal yr beginning in) > Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalities and income from similar sources  Unrelated business taxable income (less section 511 taxes) from businesses activities not included in line 100, whether on of the business is regularly carried on Part IV).  First five years, if the Form 990 is for the organization's first, second, third, fourth, organization, check this box and stop here.  Total support percentage from 2011 Schedule A, Part III, line 15 tion D. Computation of Investment Income Percentage  Investment income percentage from 2011 Schedule A, Part III, line 15 tion D. Computation of Investment Income Percentage  Investment income percentage from 2011 Schedule A, Part III, line 15 tion D. Computation of Investment Income Percentage  Investment income percentage from 2011 Schedule A, Part III, line 15 tion D. Computation of Investment Income Percent	taryear (or fisally beginning in) > (a) 2008 (b) 2009 (c) 2010 (d) 2011 (d)	taryear for fiscal by beginning in > (a) 2008 (b) 2009 (c) 2010 (d) 2011 (e) 2012 (dists, grants, contributions and membership fees received. On both include any unusual grants in the contributions and membership fees received. On both include any unusual grants in the contributions and membership fees received from the contributions and membership fees received from the services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose (Cross receipts from activities that are not an unrelated rate or business under section 513 Tax revenues level of in the either paid to ore spended 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 Amounts included on lines 1, 2, and 3 received from other than disqualitied persons Amounts included on lines 1, 2, and 3 received from other than disqualitied persons and 3 received from other than disqualitied persons and sequent from other than disqualitied persons that the contribution of the

•	Schedule A (Form 990 or 990-EZ) 2012		22-2109610 Page 4
	Part IV Supplemental Information Part II, line 17a or 17b (See instructions).	<b>ation.</b> Complete this part to provide the explanation; and Part III, line 12. Also complete this part for a	ns required by Part II, line 10; any additional information.
	·		

#### **SCHEDULE D** (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

### **Supplemental Financial Statements**

► Complete if the organization answered 'Yes,' to Form 990, Part IV, lines 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047 Open to Public Inspection \*\*

Employer Identification number

	E WARDLAW-HARTRIDGE SCHOOL		22-2109610
Pa	Organizations Maintaining Dono the organization answered 'Yes'	or Advised Funds or Other Similar Fur to Form 990, Part IV, line 6.	nds or Accounts. Complete if
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year .		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and dor are the organization's property, subject to the	nor advisors in writing that the assets held in do organization's exclusive legal control?	nor advised funds Yes No
6	Did the organization inform all grantees, donor for charitable purposes and not for the benefit impermissible private benefit?	rs, and donor advisors in writing that grant fund of the donor or donor advisor, or for any other	s can be used only purpose conferring  Yes No
Pa	代記 Conservation Easements. Comp	lete if the organization answered 'Yes	' to Form 990, Part IV, line 7.
1	Purpose(s) of conservation easements held by	· · · ·	
	Preservation of land for public use (e.g , re		of an historically important land area
	Protection of natural habitat	Preservation of	of a certified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization last day of the tax year.	on held a qualified conservation contribution in	
			Held at the End of the Tax Year
	a Total number of conservation easements		2a
	<b>b</b> Total acreage restricted by conservation easer		26
	c Number of conservation easements on a certif	, ,	2c
•	d Number of conservation easements included in structure listed in the National Register		2d
3	tax year ►		ed by the organization during the
4	Number of states where property subject to co		_
5	and enforcement of the conservation easemen		∐Yes ∐No
6	Staff and volunteer hours devoted to monitoring	ig, inspecting, and enforcing conservation ease	ments during the year
7	Amount of expenses incurred in monitoring, in  \$	specting, and enforcing conservation easement	s during the year
8	and section 170(h)(4)(B)(ii)?	line 2(d) above satisfy the requirements of sec	∐Yes ∐ No
9	conservation easements.	o the organization's financial statements that de	escribes the organization's accounting for
Pai	বিয়ানি Organizations Maintaining Colle Complete if the organization ans	ctions of Art, Historical Treasures, or wered 'Yes' to Form 990, Part IV, line	Other Similar Assets. 8.
1 8	a If the organization elected, as permitted under art, historical treasures, or other similar assets in Part XIII, the text of the footnote to its finan	s held for public exhibition, education, or resear	
1	b If the organization elected, as permitted under historical treasures, or other similar assets hel following amounts relating to these items:	SFAS 116 (ASC 958), to report in its revenue s d for public exhibition, education, or research in	statement and balance sheet works of art, n furtherance of public service, provide the
	(i) Revenues included in Form 990, Part VIII,	line 1	. <b>&gt;</b> \$
	(ii) Assets included in Form 990, Part X		►\$
2	If the organization received or held works of a amounts required to be reported under SFAS	rt, historical treasures, or other similar assets fo 116 (ASC 958) relating to these items:	or financial gain, provide the following
	a Revenues included in Form 990, Part VIII, line	1	<b>\$</b>
ı	Assets included in Form 990, Part X		<b>▶</b> \$

Schedule D (Form 990) 2012 THE W	ARDLAW-H	ARTRIDG	E SCHOO	L			22-210	9610	Page 2
Partilla Organizations Maintai	ning Colle	ctions of	Art, Histo	rical	Treasures, o	r Other	Similar Ass	ets (contin	nued)
3 Using the organization's acquisition items (check all that apply):	n, accession,	, and other	records, che	eck an	y of the following	that are	a significant u	se of its colle	ection
a Public exhibition			d Loan	or exc	hange programs				
<b>b</b> Scholarly research			e Other						
c Preservation for future genera	tions		ш						
4 Provide a description of the organ		ections and	explain hov	v they	further the organ	ızatıon's	exempt purpos	e in	
Part XIII.						. 11			
5 During the year, did the organizati to be sold to raise funds rather that	on solicit or i an to be mair	receive dona ntained as p	ations of art art of the oi	i, nisto rganizi	orical treasures, o ation's collection?	r other si	milar assets	Yes	No
Part V Escrow and Custodial A	rrangemer	its.Comp	lete if the o	organ	ization answer	ed 'Yes'	to Form 990	, Part IV, Iır	ne 9, or
reported an amount on	Form 990	, Part X,	line 21.						
1 a Is the organization an agent, trust on Form 990, Part X?	ee, custodian	n, or other in	ntermediary	for co	ntributions or oth	er assets	not included	Yes	No
<b>b</b> If 'Yes,' explain the arrangement i	n Part XIII ar	nd complete	the following	ng tabl	le:				
								Amount	
c Beginning balance						1 c			
<b>d</b> Additions during the year						1 d			
e Distributions during the year						1 e			
f Ending balance						_ 1 f			
2a Did the organization include an an	nount on Forr	m 990, Part	X, Iine 21?					Yes	No
<b>b</b> If 'Yes,' explain the arrangement i	n Part XIII. C	heck here if	f the explan	tion ha	as been provided	ın Part X	III	— <del>_</del>	
<u> </u>									
Ranta Endowment Funds. Co	<del></del> _		<u>ızation an</u>	swer					
_	(a) Current		(b) Prior yea	ar	(c) Two years	(d)	Three years	(e) Four y	ears
1 a Beginning of year balance	2,131,	742.	2,202,1	.83	2,359,17	5.	L,993,147	. 2,35	9,224.
<b>b</b> Contributions	22,	500.	21,8	70.	23,84	5.	86,462	. 17	5,395.
c Net investment earnings, gains, and losses	194,	799.	-27,1	.53.	204,41	1.	80,819	29	2,944.
d Grants or scholarships									
e Other expenditures for facilities	E0	050	53,3		375,30		-205,881	24	8,528.
and programs  f Administrative expenses	39,	052.							0,320.
g End of year balance	2 200	000	11,8 2,131,7		9,94 2,202,18	_	7,134 2,359,175		3,147.
2 Provide the estimated percentage	2,289,						2,359,175	., 1,33	3,147.
a Board designated or quasi-endowr		•		e iy, t	column (a)) nelu i	<b>35.</b>			
b Permanent endowment		18.1							
c Temporarily restricted endowment	41.83 %	40.06%							
The percentages in lines 2a, 2b, a			,						
3a Are there endowment funds not in		·		that a	re held and admir	nistered fo	or the		
organization by:	tric possessi	011 01 1110 01	garnzation	tilut ui	TO TICIO OTTO CONTIN	11310100 11	51 the	Yes	s No
(i) unrelated organizations .					•			3a(i)	Х
(ii) related organizations .								3a(ii)	X
<b>b</b> If 'Yes' to 3a(ıı), are the related or	ganızatıons lı	sted as req	uired on Sc	hedule	e R?			3b	x
4 Describe in Part XIII the intended	uses of the o	rganızatıon'	s endowme	nt fun	ds				
Rart:VIE Land, Buildings, and E	quipment.	See Form	m 990, Pa	art X,	line 10.				
Description of property		(a) Cost or ( (invest			Cost or other pasis (other)	dep	cumulated reciation	<b>(d)</b> Book	value
1 a Land					1,586,282.	2. 无证		1,58	6,282.
<b>b</b> Buildings				1	9,189,174.	7,	683,959.	11,50	<u>5,</u> 215.
c Leasehold improvements .	ſ								

**d** Equipment 582,566. 3,062,554. 2,479,988. e Other 13,674,063. Schedule **D** (Form 990) 2012 Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).)

BAA

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) Financ	ial derivatives		
	/-held equity interests		
(3) Other	~		
(A)			
(A) (B)			
(C)			
(D)			
(E)			
<u>(F)</u>			
<u>(G)</u>			
<u>(H)</u>			
<u>(I)</u>			
	nn (b) must equal Form 990, Part X, column (B) line 12.)		
Part VIII	Investments - Program Related. See		
	(a) Description of investment type	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
_ (1)			
(2)			
_ (3)			
(4)			
_ (5)			
(6)			
(7)			
(8)			
(9)			
(10)			
	nn (b) must equal Form 990, Part X, column (B) line 13	1F	
Part IX	Other Assets. See Form 990, Part X, I	scription	(b) Book value
(1)	(a) Des	scription	(b) BOOK Value
(2)			
(3)	· · · · · · · · · · · · · · · · · · ·		
(4)			
(5)			
<del>(6)</del>			
<del>(0)</del> (7)			
(8)	<del></del>	<del></del>	
(9)			
(10)			
	lumn (b) must equal Form 990, Part X, column (B	), line 15.)	<b>&gt;</b>
Part X	Other Liabilities. See Form 990, Part		
<u>G WILLY</u>	(a) Description of liability	(b) Book value	
(1) Fede	ral income taxes		
(2) TUI	TION PAID IN ADVANCE	1,571,06	5.
	ITAL LEASE OBLIGATION	10,68	<del></del>
(4)			
(5)			
(6)	<del></del>		
(7)			
(8)			
(9)			
(10)			
(11)			
	nn (b) must equal Form 990, Part X, column (B) line 25.)	1,581,75	1.
2. FIN 48 (AS		the organization's financial s	tatements that reports the organization's liability for uncertain tax positions

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Re	turn	
1 Total revenue, gains, and other support per audited financial statements	1	16,295,758.
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a Net unrealized gains on investments 2a 157, 913.	1 1	
b Donated services and use of facilities 2b	1 1	
c Recoveries of prior year grants		
d Other (Describe in Part XIII.)	1 1	
e Add lines 2a through 2d	2 e	157,913.
3 Subtract line 2e from line 1	3	16,137,845.
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:	<del> +</del>	10,137,043.
a Investment expenses not included on Form 990, Part VIII, line 7b		
b Other (Describe in Part XIII.)	ı	
c Add lines 4a and 4b	4 c	
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	16 127 045
		16,137,845.
Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per I		
1 Total expenses and losses per audited financial statements	1	14,484,052.
2 Amounts included on line 1 but not on Form 990, Part IX, line 25	1 .	
a Donated services and use of facilities	1 1	
b Prior year adjustments	1 1	
c Other losses 2c		
d Other (Describe in Part XIII.)		
e Add lines 2a through 2d	2 e	
3 Subtract line 2e from line 1	3	14,484,052.
4 Amounts included on Form 990, Part IX, line 25, but not on line 1:	:	
a Investment expenses not included on Form 990, Part VIII, line 7b		
b Other (Describe in Part XIII.)		
c Add lines 4a and 4b	4 c	11 101 050
5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	3	14,484,052.
Part XIII   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, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any a	ines 1b addition	and 2b; Part V, al information.
	<b>-</b> -	
	= -	
		. <b></b> .
BAA	Schedul	e <b>D</b> (Form 990) 2012

Schedule D (Form 990) 2012 THE WARDLAW-HARTRIDGE SCHOOL  Part XIII Supplemental Information (continued)	22-2109610	Page 5
(September Comp)		
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		- <b></b> -
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### SCHEDULE E (Form 990 or 990-EZ)

**Schools** 

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

OMB No 1545 0047

2012

Open to Public Inspection

Department of the Treasury Internal Revenue Service

THE WARDLAW-HARTRIDGE SCHOOL

Employer identification number

22-2109610

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 Х Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships? 2 X 3 Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it 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 X ADVERTISED IN INFORMATION PROVIDED BY NJ ASSOC OF INDEPENDENT SCHOOLS Does the organization maintain the following? a Records indicating the racial composition of the student body, faculty, and administrative staff? 4 a X **b** Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis? 4 b X c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships? 4 c Х d Copies of all material used by the organization or on its behalf to solicit contributions? 4 d X 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? 5 a Х **b** Admissions policies? 5 b X c Employment of faculty or administrative staff? 5с Х d Scholarships or other financial assistance? 5 d Х e Educational policies? 5 e Х f Use of facilities? 5 f X q Athletic programs? 5 g X h Other extracurricular activities? 5h Х If you answered 'Yes' to any of the above, please explain. If you need more space, use Part II. 6 a 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? 6 b Х If you answered 'Yes' to either line 6a or line 6b, explain on Part II. Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If

'No,' explain on Part II

#### SCHEDULE G (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

# Supplemental Information Regarding Fundraising or Gaming Activities

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

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

OMB No 1545-0047

2012

Open to Public Inspection

	in the organization					Employer identific	
THE	WARDLAW-HARTRIDGE SC					22-210961	0
Par	Fundraising Activities. Comp Form 990-EZ filers are not re	lete if the orga quired to comp	nization ar lete this pa	nswered 'Y art.	es' to Form 990, Part I	IV, line 17.	
1	Indicate whether the organization is	aised funds thi	rough any	of the follo	owing activities. Check	all that apply.	
а	Mail solicitations			е	Solicitation of non-	-government grants	
b	Internet and email solicitations	3		f	Solicitation of gove	ernment grants	
c	Phone solicitations			g	<b>H</b>	<del>-</del>	
d	In-person solicitations			9		3 0 0 0 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
	Did the organization have a writter employees listed in Form 990, Par						
b	If 'Yes,' list the ten highest paid in compensated at least \$5,000 by the	dividuals or ent e organization.	ities (fund	raisers) pu	ursuant to agreements	under which the fundrai	ser is to be
(i)	Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did i have custod of contr	fundraiser ly or control ibutions?	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in column (i)	(vi) Amount paid to (or retained by) organization
		}	Yes	No			
1							
2							
3							
4							
5							
6							
7							
8							
9			_				
10							
Total				. •			
3	List all states in which the organization or licensing.	ation is register	ed or licer	ised to sol	licit contributions or has	s been notified it is exei	npt from registration
				<b></b>			
•							
•							
•							

		G (Form 990 or 990-EZ) 2012 THE WA Fundraising Events. Complete if more than \$15,000 of fundraising List events with gross receipts gr	the organization ar	swered 'Yes' to Fo	rm 990, Part IV, lir on Form 990-EZ,	ne 18, or reported lines 1 and 6b.
R			(a) Event #1 Spring Gala (event type)	(b) Event #2 Fall Fair (event type)	(c) Other events 2 (total number)	(d) Total events (add column (a) through column (c))
Rモ>モスUE	1	Gross receipts	86,157.	49,445.	12,180.	147,782
Ě	2	Less: Charitable contributions	52,950.	18,322.	2,833.	74,105
	3	Gross income (line 1 minus line 2)	33,207.	31,123.	9,347.	73,677
	4	Cash prizes		6,324.		6,324
_	5	Noncash prizes	5,032.	1,069.		6,101
DIRECT	6	Rent/facility costs .	20,348.			20,348.
	7	Food and beverages				
EXP	8	Entertainment	4,500.	4,950.		9,450
EXPEZSES	9	Other direct expenses	3,327.	18,780.	9,347.	31,454
S		Direct expense summary. Add lines 4 the Net income summary. Combine line 3, c	= ::		<b>▶</b>	73,677
ar		<b>Gaming.</b> Complete if the organize \$15,000 on Form 990-EZ, line 6a	ation answered 'Yes	s' to Form 990, Part	IV, line 19, or rep	
ルロマルマンの		\$13,000 OITT OITT 330-L2, THE OZ	(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add column (a) through column (c))
E U	1	Gross revenue .				· · · · · · · · · · · · · · · · · · ·
	2	Cash prizes .				
X P R E	3	Non-cash prizes				
XPENSES	4	Rent/facility costs				
	5_	Other direct expenses				
	6	Volunteer labor	Yes %	Yes %	Yes %	
	7	Direct expense summary. Add lines 2 th	rough 5 in column (d)		•	
	8	Net gaming income summary. Combine	lines 1, column (d) and l	ine 7		
_			perates gaming activities			

b If 'Yes,' explain:

Sche	edule G (Form 990 or 990-EZ) 2012 THE WARDLAW-HARTRIDGE SCHOOL	2-2109	610	Page 3
11	Does the organization operate gaming activities with nonmembers?		Yes	No
12	Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity for administer charitable gaming?	med to	Yes	No
13	Indicate the percentage of gaming activity operated in:	1 1		
	a The organization's facility	13a		*
	An outside facility	13b		<del>-</del>
14	Enter the name and address of the person who prepares the organization's gaming/special events books and	records:		
	Name •			
	Address	. <b>-</b>		
t	a Does the organization have a contact with a third party from whom the organization receives gaming revenue of If 'Yes,' enter the amount of gaming revenue received by the organization \$ and to of gaming revenue retained by the third party \$ Elf 'Yes,' enter name and address of the third party.		Yes	No
	Name *		~	· <del>-</del> -
	Address •			i
16	Gaming manager information:			
	Name •	- <b></b> -	. – – – –	
	Gaming manager compensation • \$			
	Description of services provided	<b></b>		
	Director/officer Employee Independent contractor			
17	Mandatory distributions			
	a Is the organization required under state law to make charitable distributions from the gaming proceeds to retistate gaming license?		Yes	No
t	Enter the amount of distributions required under state law to be distributed to other exempt organizations or organization's own exempt activities during the tax year * \$	spent in th	ne	
Par	Supplemental Information. Complete this part to provide the explanations required columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as appliable this part to provide any additional information (see instructions).	d by Par cable. A	t I, line 2 Also com	2b, plete
		<del> </del>		

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Schedule **G** (Form 990 or 990-EZ) 2012

SCHEDULE I (Form 990)		Grants and Otl Governments, a	ther Assistance to Organizations, and Individuals in the United States	to Organization n the United St	s, ates		2012
Department of the Treasury Internal Revenue Service		Complete if the organization answered 'Yes' to Form 990, Part IV, line 21 or 22. ► Attach to Form 990.	ion answered 'Yes' to Fα ► Attach to Form 99	orm 990, Part IV, line 21 0.	1 or 22.		Open to Public Inspection
Name of the organization  THE WARDLAW-HAR	WARDLAW-HARTRIDGE SCHOOL	ceictance				Employer identification number	ation number 0
1 Does the organizal the selection criter 2 Describe in Part IV	Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees the selection criteria used to award the grants or assistance?  Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.	ate the amount of the grasstance?	ants or assistance, the grantees' eligibility for the grants or assistance, and	antees' eligibility for the	e grants or assistance,	and	X Yes No
그	Grants and Other Assistance to Governments and Organ Form 990, Part IV, line 21 for any recipient that received	ernments and Organ ippent that received n	nizations in the United States. Complete if the organization answered 'Ye more than \$5,000. Part II can be duplicated if additional space is needed	can t	Complete if the organization answered 'Yes' to be duplicated if additional space is needed.	ion answered 'Ye space is needed	es' to
1 (a) Name and address of organization or government	ss of organization (b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ω							
(2)							
(3)							
(4)							
(5)							
(6)							
ω							
(8)							
2 Enter total number	Enter total number of section 501(c)(3) and government organizations listed in the line 1 table	nent organizations listed	in the line 1 table				
3AA For Paperwork Re	BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990.	uctions for Form 990.		TEEA3901	11/30/12	Schedul	Schedule I (Form 990) (2012)

Partilla Grants and Other Assistance to Individuals in the United States. Complete if the organization answered 'Yes' to Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed. 22-2109610 THE WARDLAW-HARTRIDGE SCHOOL Schedule I (Form 990) (2012)

Page 2

SCHOLARSHIPS/FINANCIAL ASSISTANCE (f) Description of non-cash assistance Partive Supplemental Information. Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other THE SCHOOL'S ADMISSION DEPARTMENT BUSINESS OFFICE AND HEADS OFFICE REVIEW AND AWARD THE SCHOOL HAS A COMMITTEE THAT REVIEWS AND AWARDS SCHOLARSHIPS TO STUDENTS. Method of valuation (book, FMV, appraisal, other) FMV **⊕** 3,786,995. (d) Amount of non-cash assistance FINANCIAL ASSISTANCE TO STUDENTS THAT ARE ELIGIBLE. (c) Amount of cash grant 209 (b) Number of recipients additional information. (a) Type of grant or assistance 1 FINANCIAL AID m 4 IJ φ

Schedule I (Form 990) (2012)

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## SCHEDULE J

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, line 23.
► Attach to Form 990.
► See separate instructions.

OMB No 1545-0047

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Employer identification number 22-2109610 THE WARDLAW-HARTRIDGE SCHOOL **Questions Regarding Compensation** Part I No Yes 1 a 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 X Housing allowance or residence for personal use Travel for companions Payments for business use of personal residence Tax indemnification 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 on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If 'No,' complete Part III to explain 1 b X 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 Х

Written employment contract

Compensation survey or study

Approval by the board or compensation committee

During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization:

Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.

a Receive a severance payment or change-of-control payment?

 $\textbf{b} \ \mathsf{Participate} \ \mathsf{in}, \ \mathsf{or} \ \mathsf{receive} \ \mathsf{payment} \ \mathsf{from}, \ \mathsf{a} \ \mathsf{supplemental} \ \mathsf{nonqualified} \ \mathsf{retirement} \ \mathsf{plan?}$ 

c Participate in, or receive payment from, an equity-based compensation arrangement?

If 'Yes' to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

#### Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.

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:

a The organization?

**b** Any related organization?

Compensation committee

Independent compensation consultant

Form 990 of other organizations

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.

a The organization?

**b** Any related organization?

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

8 Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53 4958-4(a)(3)? If 'Yes,' describe in Part III

If 'Yes' to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

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

Schedule J (Form 990) 2012

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4 b

4 c

5 a

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6b

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Page 2

Schedule J (Form 990) 2012 THE WARDLAW-HARTRIDGE SCHOOL

22-2109610

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

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

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

		(B) Breakdown of	(B) Breakdown of W-2 and/or 1099-MISC compensation	compensation	(C) Retirement	(D) Nontaxable	(E) Total of	(F) Compensation
(A) Name and Title		(i) Base compensation	(ii) Bonus and incentive compensation	(iii) Other reportable compensation	and other deferred compensation	benefits	_	reported as deferred in prior Form 990
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Schedule J (Form 990) 2012

#### SCHEDULE O (Form 990 or 990-EZ)

### Supplemental Information to Form 990 or 990-EZ

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

2012

Open to Public Inspection

Department of the Treasury Internal Revenue Service ► Attach to Form 990 or 990-EZ.

Employer identification number THE WARDLAW-HARTRIDGE SCHOOL 22-2109610 Pt\_VI, Line 19 THE SCHOOL'S FINANCIAL STATEMENTS AND GOVERNING DOCUMENTS ARE MADE AVAILABLE TO THE PUBLIC UPON REQUEST. Pt\_VI, Line 11b THE SCHOOL'S FINANCE MANAGER AND TREASURER REVIEW THE 990 BEFORE IT IS FILED. Pt VI, Line 12c THE FINANCE OFFICE MONITORS THE CONFLICT OF INTEREST POLICY AND INFORMS THE HEAD OF SCHOOL AND BOARD FINANCE COMMITTEE OF ANY POTENTIAL CONFLICTS. Pt VI, Line 15a THE TREASURER OF THE BOARD RESEARCHES COMPARABLE POSITIONS IN OTHER ORGANIZATIONS AND MAKES RECOMMENDATIONS TO THE BOARD WHICH ARE THEN VOTED ON. Pt VI, Line 15b THE TREASURER OF THE BOARD RESEARCHES COMPARABLE POSITIONS IN OTHER ORGANIZATIONS AND MAKES RECOMMENDATIONS TO THE BOARD WHICH ARE THEN VOTED ON.