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DLN: 93493134083614

# Form 990

# **Return of Organization Exempt From Income Tax**

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

OMB No 1545-0047 2012

Open to Public

Department of the Treasury Internal Revenue Service

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

								Inspection
<b>B</b> Ch		applicable	lendar year, or tax year beginnin C Name of organization COLUMBUS SCHOOL FOR GIRLS	g 07-01-2012 , 2012, and ending 06	-30-2013			ntification number
	me cha	=	Doing Business As			31-43	79452	2
	tial reti rminate		Number and street (or P O box if r 56 S Columbia Avenue	nail is not delivered to street address) Room/	'suite	E Telepho	ne num	ber
		return	City or town, state or country, and Columbus, OH 43209	ZIP + 4		(614)	252-0	781
— Apı	plicatio	n pending				<b>G</b> Gross re	ceipts \$	20,859,592
			<b>F</b> Name and address of pri MRS ELIZABETH LEE	ncıpal officer		this a group liates?	return	for
			80 S Columbia Avenue Columbus, OH 43209		<b>H(b)</b> Are	e all affiliates		ded?
<b>I</b> Ta	ıx-exer	mpt status	▼ 501(c)(3)	(insert no )	_			(see instructions)
y W	ebsit	e:► WV	VW COLUMBUSSCHOOLFORGI	RLS ORG	<b>H(c)</b> Gr	oup exempti	on nur	nber 🟲
	m of o	_	n ▼ Corporation	on Other ►	<b>L</b> Year of	formation 189	98 <b>M</b>	State of legal domicile OH
Governance		COLUM YEAR T	HE HEALTH & WELLNESS CEN	DMARK CAPITAL CAMPAIGN PROJ TER OPENED AUGUST, 2012 CON ATER THE NEW THEATER WILL OF	STRUCTION	CONTINUE		
	2	Check t	his box ► If the organization d	scontinued its operations or dispose	d of more thar	n 25% of its	net as	sets
Activities &				ning body (Part VI, line 1a)			3	34
				of the governing body (Part VI, line 1			4 5	33
ृ	1			calendar year 2012 (Part V, line 2a) necessary)			6	327 250
	1			eart VIII, column (C), line 12			7a	0
				from Form 990-T, line 34			7b	0
					Р	rior Year		Current Year
gı.	8		ibutions and grants (Part VIII, I			2,888,1	74	4,177,577
Rayenue	9			ine 2g)	•	12,072,0		11,535,848
₽ŝ√	10 11			n (A), lines 3, 4, and 7d)	.	825,6		1,015,962
	12	Total	revenue (Fart VIII, Column (A)	ine		1,687,258 17,473,192 1		
	13			IX, column (A), lines 1-3)		1,475,4	94	1,333,113
	14			IX, column (A), line 4)			0	0
8	15	Saları 5–10		ee benefits (Part IX, column (A), lines	5	9,112,6	79	9,408,947
Expenses	16a	Profes	ssional fundraising fees (Part IX	, column (A), line 11e)		34,3	38	153,684
ਡੋ	Ь		undraising expenses (Part IX, column (E					
	17			lines 11a-11d, 11f-24e)		4,126,7		4,408,024
	18			st equal Part IX, column (A), line 25;		14,749,2 2,723,9		15,303,768 1,572,738
Net Assets or Fund Balances	129	Kevel	ide iess expenses Subtract ille	10 HOM HIE 12		ing of Currer Year		End of Year
SS et	20	Total	assets (Part X, line 16)			48,074,6	01	51,380,137
P. A.	21	Total	liabilities (Part X, line 26) .			14,261,8	39	13,821,173
	22			line 21 from line 20		33,812,7	62	37,558,964
Unde my k	nowle	alties of dge and as any k	belief, it is true, correct, and con nowledge	amined this return, including accomp nplete Declaration of preparer (other				
c:	_	**** Sign	*** ature of officer			2014-04-16 Date		
Sigr Her		JANI	E GIBSON ASSOC HEAD OF SCHOOL e or print name and title					
		17	Print/Type preparer's name	Preparer's signature		Check If	PTIN	770
Paid	d	<b>⊢</b>	Rachel Spurlock  Firm's name	<u> </u>	s	elf-employed irm's EIN ►	P00520	0/29
	pare	er						
Use	On	ıly	Firm's address • 10 West Broad Street Suite 1700 Columbus, OH 43215	3713	P	hone no (614)	469-00	001

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

✓ Yes ☐ No

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Par	Statement of Program Service Accomplishments Check if Schedule O contains a response to any question in this Part III
1	Briefly describe the organization's mission
PRO CAP	FILLMENT OF OUR MISSION AND PHILOSOPHY WE STRIVE TO EMBRACE THE VITALITY OF A DIVERSE COMMUNITY AND DE A CURRICULUM THAT REFLECTS MULTIPLE CULTURES AND GLOBAL CONNECTEDNESS, DEVELOP LEADERSHIP SITY AND INSTILL A COMMITMENT TO SOCIAL AND CIVIC RESPONSIBILITY AND LIFELONG SERVICE TO OTHERS, INUED IN SCHEDULE O)
2	nd the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?
	f "Yes," describe these new services on Schedule O
3	ıd the organization cease conducting, or make significant changes in how it conducts, any program ervices?
	f "Yes," describe these changes on Schedule O
4	escribe the organization's program service accomplishments for each of its three largest program services, as measured by xpenses Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, ne total expenses, and revenue, if any, for each program service reported
4a	(Code ) (Expenses \$ 10,452,545 including grants of \$ ) (Revenue \$ 9,539,084 )
	COLUMBUS SCHOOL FOR GIRLS (CSG) IS A COLLEGE PREPARATORY INDEPENDENT DAY SCHOOL IN CENTRAL OHIO CSG'S HAS AN ENROLLMENT OF 560 STUDENTS FROM PRE-SCHOOL TO GRADE 12 THE SCHOOL IS COMMITTED TO ITS FUNDAMENTAL VALUES SEPARATE EDUCATION FOR WOMEN, CHALLENGING PREPARATION FOR COLLEGE, AND SUPPORTIVE RELATIONSHIPS, DIVERSITY, AND EXCELLENCE IN ALL ENDEAVORS BY OFFERING ACADEMIC EXCELLENCE IN A SINGLE SEX ENVIRONMENT THE MAIN SOURCE OF REVENUE IS TUITION, SUPPLEMENTED BY FUNDRAISING AND ENDOWMENT FUNDS CSG HAS ALSO BEEN IN A CAPITAL CAMPAIGN TO BUILD A HEALTH & WELLNESS CENTER AND THEATER SINCE 2010 THE CAMPAIGN FUNDS ARE INCLUDED IN THE REVENUE FIGURES
4b	(Code ) (Expenses \$ 1,333,113 including grants of \$ 1,333,113) (Revenue \$ 1,333,113) (COLUMBUS SCHOOL FOR GIRLS AWARDS FINANCIAL AID TO STUDENTS BASED ON THE FAMILY'S ECONOMIC NEEDS AN INDEPENDENT SERVICE IS USED TO ASSESS THE FINANCIAL NEEDS OF THE APPLICANTS THIS SERVICE IS SIMILAR TO SERVICES USED BY OTHER INDEPENDENT PRIVATE SCHOOLS, COLLEGES, AND UNIVERSITIES TOTAL FINANCIAL AID WAS AWARDED TO 136 STUDENTS IN THE AMOUNT OF \$1,333,113 DURING THE 2012-2013 SCHOOL YEAR THIS INCLUDES TUITION REMISSION TO 29 FACULTY AND STAFF CHILDREN IN THE AMOUNT OF \$351,713
	(Code ) (Expenses \$ 626,027 including grants of \$ ) (Revenue \$ 820,636)
40	CSG OFFERS A CHALLENGING, DEVELOPMENTALLY-APPROPRIATE ACADEMIC PROGRAM IN A SUPPORTIVE ENVIRONMENT, PROVIDES A VARIETY OF TEACHING TECHNIQUES TO REFLECT MULTIPLE LEARNING STYLES, ADDRESSES THE CRUCIAL ISSUES OF GIRL'S EDUCATION, INCLUDING THE COURAGE TO EXPLORE NEW ADVENTURES AND THE DEVELOPMENT OF LEADERS, PREPARES ALL STUDENTS FOR AN INCREASINGLY TECHNOLOGICAL AND GLOBAL SOCIETY, FOSTERS IN EACH GIRL CONFIDENCE, A LOVE OF LEARNING, AESTHETIC UNDERSTANDING, DESIRE FOR HEALTH AND FITNESS, AND A COMMITMENT TO SOCIAL RESPONSIBILITY, ENSURES DIVERSITY IN BOTH STUDENT AND ADULT POPULATIONS THAT REFLECTS AND EMBRACES THE GREATER COLUMBUS COMMUNITY, ENGAGES THE WHOLE SCHOOL COMMUNITY IN THE CHALLENGE AND EXCITEMENT OF STRIVING FOR EXCELLENCE, AND MAINTAINS A POSITION OF EDUCATION LEADERSHIP WITHIN OUR COMMUNITY
4d	Other program services (Describe in Schedule O )
	(Expenses \$ \text{including grants of \$} \text{) (Revenue \$} \text{)}
4e	Total program service expenses ► 12,411,685

Part IV C	hecklis	st of	Required	Schedu	les
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			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 🕏	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		N o
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	Yes	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts 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		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If</i> "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		No
9	Did the organization report an amount in Part X, line 21 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	Yes	
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	Yes	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10?  If "Yes," complete Schedule D, Part VI	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		No
C	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		N o
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		No
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year?  If "Yes," complete Schedule D, Parts XI and XII	12a	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 🥵	13	Yes	
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		No
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		No
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17	Yes	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	Yes	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		No
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, 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	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part $I$	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, 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		No
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	Yes	
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
a	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV			1
L		28a		No_
D	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes,"</i> complete Schedule L, Part IV	28b		No
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	Yes	
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Part I	31		No
32	Schedule N, Part II	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? <i>If</i> "Yes," complete Schedule R, Part I	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	Yes	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Yes	
b	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		No
36	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O	38	Yes	

<b>.</b>	Statements Regarding Other 1RS Filings and Tax Compliance			_
	Check if Schedule O contains a response to any question in this Part V	•	Yes	No
а	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable   1a   65		1 63	140
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable  1b 0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			
	gaming (gambling) winnings to prize winners?	1c	Yes	
3	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			
)	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?  Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
ì	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За		No
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
1	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		No
)	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			
ı	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
,	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			
		5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		No
	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
	Organizations that may receive deductible contributions under section 170(c).			
	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?	7a	Yes	
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Yes	
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		N
	If "Yes," indicate the number of Forms 8282 filed during the year			
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit			
	contract?	7e		N
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
	<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		
	Sponsoring organizations maintaining donor advised funds.	<u> </u>		
	Did the organization make any taxable distributions under section 4966?	9a		
	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
	Section 501(c)(7) organizations. Enter	<del></del>		
	Initiation fees and capital contributions included on Part VIII, line 12   10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	-		
	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them )			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	Is the organization licensed to issue qualified health plans in more than one state?  Note. See the instructions for additional information the organization must report on Schedule O	13a		
)	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
	Enter the amount of reserves on hand			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
	If "Yes " has it filed a Form 720 to report these payments? If "No" provide an explanation in Schedule O	14h		

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

Se	ection A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax  1a			
	year			
	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			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?.	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		N o
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No
6	Did the organization have members or stockholders?	6		N o
	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?	7a		No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
Se	ection B. Policies (This Section B requests information about policies not required by the Internal R	evenu	ıe Cod	e.)
			Yes	No
	Did the organization have local chapters, branches, or affiliates?	10a		No
Ь	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		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
C	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes	
13	Did the organization have a written whistleblower policy?	13	Yes	
14	Did the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b	Yes	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			1
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its			
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		
Se	ection C. Disclosure			

- 18 Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply
  - Own website Another's website Upon request Other (explain in Schedule O)
- Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year
- State the name, physical address, and telephone number of the person who possesses the books and records of the organization ►JANE GIBSON 56 S COLUMBIA AVENUE Columbus, OH (614) 252-0781

Form	990	(2012)
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#### Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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

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

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

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

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

	1	1		(C)						
(A) Name and Title	Name and Title Average hours per week (list any hours					heck unless officer stee)		(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the organization and
	organizations below dotted line)	Individual trustae or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1033 MISC)	MISC)	related related organizations
See Additional Data Table										
	•	•	•							Form <b>990</b> (2012)

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

	<b>(A)</b> Name and Title	(B) Average	Doc	tion	<b>(C)</b>	not c	heck		(I		<b>(E)</b> Reportable		(F) Estima	
	ivaine and Title	hours per week (list any hours	more t	han o	one l both	box, an c		;	comper from organiza	compensation compensa from the from rela organization (W- organization			mount o compens from t	f other ation he
		for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1099	-MISC)	2/1099-MISC)		rganizati relate organiza	ed
							٥							
1b	Sub-Total					<u> </u>		<b> </b>						
c	Total from continuation sheet	s to Part VII, S	ection A	۸.				Þ						
d	Total (add lines 1b and 1c) .							►		386,109		0		55,769
2	Total number of individuals (in \$100,000 of reportable compe						d abov	e) w	ho receive	d more th	an			
3	Did the organization list any <b>f</b> o	armor officer du	ractor o	r truc	.+00	kov	omple		or highes	t compon	sated employee		Yes	No
3	on line 1a? If "Yes," complete S							•		• •	· · · ·	3		No
4	For any individual listed on line organization and related organ individual											4	Yes	
5	Did any person listed on line 1 services rendered to the organ									janization	or individual for	5		No
	ction B. Independent Co	ntractors												
1	Complete this table for your five compensation from the organization from the organizati	/e highest comp											tax vear	
	-	(A) ame and business						, -			(B) cription of services		(C Comper	)
CORN	A-KOKOSING 6235 WESTERVILLE RD V	VESTERVILLE OH 43	081							WELLNESS			3	,106,330
	DINING SERVICES 1402 YORK ROAD L									FOOD SERV		$\bot$		606,761
	TECTURAL SYSTEMS 8633 MEMORIAL		43064								ERIAL & INSTALLATION	+	470,000	
	N GROUP 515 E MAIN STREET COLUM CUSTODIAL MAINTENANCE PO BOX 71		143271							ARCHITEC <sup>-</sup> JANITORIA	SERVICES	+		340,603 205,981
	Total number of independent co			not	lımıt	ed to	o those	e list	ed above)					

\$100,000 of compensation from the organization  $\blacktriangleright 5$ 

Form 99								Page <b>9</b>
Part V	ЛΠ		o <b>f Revenue</b> ule O contains a respon	ise to any question i	n this Part VIII			
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512,513,or 514
s &	1a	Federated cam	paigns 1a	0				
ant	ь	Membership du	ies <b>1b</b>	0				
E	c	Fundraising ev	ents <b>1c</b>	83,680				
Ē,Ā	d		zations 1d	22,700				
ia ia								
ns,	e	Government grant	s (contributions) <b>1e</b>			ļ		[
Contributions, Gifts, Grants and Other Similar Amounts	f	All other contribution similar amounts no	ons, gifts, grants, and <b>1f</b> ot included above	3,888,341				
혈본	g		ons included in lines	30,000		İ		<u> </u>
1 t		1a-1f \$			4 177 577			
<u> </u>	h	Total. Add lines	sla-lt		4,177,577			
<u>ā</u>				Business Code				
ven	2a	TUITION		611600	10,264,686	10,264,686		
æ	Ь	AUXILIARY		611600	820,636	820,636		
Program Serwoe Revenue	C	FEES		611600	132,595	132,595		
Şe.	d	SUMMER PROGRA	MS	611600	317,931	317,931		
Ē	е				0			
25	f	f All other program service revenue			0	0	C	0
Ě	g	Total. Add lines	s 2a-2f		11,535,848			
	3		ome (including dividend		E14 71E	0		E14 71E
	l <u>.</u>		ar amounts) stment of tax-exempt bond ;	<u> </u>	514,715	U U		514,715
	5			` . F	0			
	•	Royalties .	(ı) Real	(II) Personal	J			
	6a	Gross rents	15,800	(II) I CISOIIII				
	ь	Less rental	72,807					
	<sub>c</sub>	expenses Rental income	-57,007	0				
	d	or (loss)	me or (loss)		-57,007			-57,007
	"	Net remai meo	(i) Securities	(II) O ther	,			,
	7a	Gross amount						
		from sales of assets other	3,291,584	1,080,733				
	Ь	than inventory Less cost or						
		other basis and sales expenses	2,667,294	1,203,776				
	c	Gain or (loss)	624,290	-123,043				
	d	Net gain or (los	ss)		501,247	0		501,247
۸.	8a		from fundraising					
Other Revenue		events (not inc \$ 83	3,680					
<b></b> }		of contributions	s reported on line 1c)					
č		See Part IV, lir	a .	86,350				
<u> </u>	ь	Less direct ex	penses b	39,209				
ŏ	c	Net income or	ا (loss) from fundraising (	events	47,141		C	47,141
	9a	Gross income f	from gaming activities					
		See Part IV, IIr	ne 19 a					
	Ь	Less directles	penses b	0				
	c		(loss) from gaming activ	vities	o			
	10a	Gross sales of						
		returns and allo	•	0				
	ь	less cost of -	a oods sold b					
	1	<del>-</del>	(loss) from sales of inve	entory	o			
		Miscellaneous		Business Code				
	11a	TRANSPORTA	TION	611600	17,160	17,160		
	ь	MISCELLANEO		900099	139,825	139,825		1
	c				0			
	d	All other reven	ue		0	0	C	0
	e	Total. Add lines	s 11a-11d	🕨	156,985			
	12	Total revenue.	See Instructions	🕨		44 605 555		1 222
	1			-	16,876,506	11,692,833	C	1,006,096

reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check

here ► [ if following SOP 98-2 (ASC 958-720)

Form 990 (2012) Page **10** 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 response to any question in this Part IX (D) (B) (C) Do not include amounts reported on lines 6b, (A) Program service Management and Fundraising 7b. 8b. 9b. and 10b of Part VIII. Total expenses expenses general expenses expenses Grants and other assistance to governments and organizations in the United States See Part IV, line 21 Grants and other assistance to individuals in the United States See Part IV, line 22 1,333,113 1,333,113 Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16 0 Benefits paid to or for members 0 Compensation of current officers, directors, trustees, and 468,043 374,434 93,609 key employees Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) . . . . Other salaries and wages 7,262,102 6,370,577 703,697 187,828 Pension plan accruals and contributions (include section 401(k) 388.991 341,250 47,086 655 and 403(b) employer contributions) . . . . 729,123 636,425 43,329 Other employee benefits . . . . 49,369 10 560,688 414,689 126,080 19,919 11 Fees for services (non-employees) O Management . . . . 53,571 53,571 Legal . . . . . . . Accounting . . . . . . . . . . . . 61,442 61,442 0 Lobbying . . . . . . . . . . . . Professional fundraising services See Part IV, line 17 153,684 153,684 Investment management fees . . . . . 66,954 66,954 Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on 321,517 209,375 0 Schedule O) . . . . . . . 112.142 Advertising and promotion . . 176,833 28,578 68,374 79,881 12 13 Office expenses . . . 1,036,819 970,060 59,509 7,250 87,611 24,002 14 Information technology . . 120,013 8,400 15 0 Royalties . 325,715 166,117 146,570 13,028 16 Occupancy . . . . **17** 162,839 161,699 1,140 Travel . . . . 18 Payments of travel or entertainment expenses for any federal, state, or local public officials . . . . . 0 19 Conferences, conventions, and meetings . 31,094 21,188 9,906 20 Interest . . . . . . . . . . . . 158,864 158,864 Payments to affiliates . . . . . . 21 O 22 Depreciation, depletion, and amortization . 877,263 780,765 61,408 35,090 23 64,215 64,215 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) 308,955 a SUMMER SCHOOL 308,955 STUDENT ACTIVITIES 272,877 272,877 AFTER HOURS PROGRAM 94,195 94,195 d BAD DEBT EXPENSE 35,201 35,201 O 239,657 200,198 8,344 e All other expenses 31,115 Total functional expenses. Add lines 1 through 24e 25 15,303,768 12,411,685 2,202,349 689,734 Joint costs. Complete this line only if the organization 26

Part X Balance Sheet

		Check if Schedule O contains a response to any question in the	s Part	X		<u></u>	· · · · · · · · · · · · · · · · · · ·
					<b>(A)</b> Beginning of year		<b>(B)</b> End of year
	1	Cash—non-interest-bearing			618,337	1	205,034
	2	Savings and temporary cash investments	27,791	2	18,991		
	3	Pledges and grants receivable, net			2,580,793	3	2,339,413
	4	Accounts receivable, net			62,931	4	65,488
	5	Loans and other receivables from current and former officers, employees, and highest compensated employees Complete P Schedule L	art II	of		5	0
fs	6	Loans and other receivables from other disqualified persons (a $4958(f)(1)$ ), persons described in section $4958(c)(3)(B)$ , and and sponsoring organizations of section $501(c)(9)$ voluntary e organizations (see instructions) Complete Part II of Schedule	buting employers		6	0	
Assets	7	Notes and loans receivable, net		435,288		10,335	
ď	8	Inventories for sale or use			400,200	8	10,000
	9	Prepaid expenses and deferred charges			32,096	<b>⊢</b> •	98,813
	10a	Land, buildings, and equipment cost or other basis Complete			32,090	9	30,013
		Part VI of Schedule D	10a	35,199,727			
	Ь	Less accumulated depreciation	10b	11,644,437	21,530,452	10c	23,555,290
	11	Investments—publicly traded securities	22,703,531	11	25,003,391		
	12	Investments—other securities See Part IV, line 11	0	12	0		
	13	Investments—program-related See Part IV, line 11	•	0	13	0	
	14	Intangible assets		•		14	
	15	Other assets See Part IV, line 11			83,382	15	83,382
	16	<b>Total assets.</b> Add lines 1 through 15 (must equal line 34) .			48,074,601	16	51,380,137
	17	Accounts payable and accrued expenses			2,336,783	17	1,885,789
	18	Grants payable		18			
	19	Deferred revenue	1,425,532	19	1,211,864		
	20	Tax-exempt bond liabilities				20	
ø	21	Escrow or custodial account liability Complete Part IV of Sch	edule	D	114,595	21	126,287
Liabilitie	22	Loans and other payables to current and former officers, direct key employees, highest compensated employees, and disqual	rustees,				
аę		persons Complete Part II of Schedule L				22	0
	23	Secured mortgages and notes payable to unrelated third partie	es .		8,659,596	23	8,779,773
	24	Unsecured notes and loans payable to unrelated third parties			1,520,000	24	1,684,213
	25	Other liabilities (including federal income tax, payables to rela and other liabilities not included on lines 17-24) Complete Pa	art X o	f Schedule	205 000		400.047
		D			205,333		133,247
	26	Total liabilities. Add lines 17 through 25			14,261,839	26	13,821,173
ф S		Organizations that follow SFAS 117 (ASC 958), check here ▶ lines 27 through 29, and lines 33 and 34.	, and	d complete			
ä	27	Unrestricted net assets			5,900,154	27	7,667,568
<u> </u>	28	Temporarily restricted net assets			11,894,206	28	13,830,971
=	29	Permanently restricted net assets			16,018,402	29	16,060,425
Fund Balances		Organizations that do not follow SFAS 117 (ASC 958), check h	ere ►	┌ and			
ō	30	complete lines 30 through 34.  Capital stock or trust principal, or current funds				30	
ets ets	31	Paid-in or capital surplus, or land, building or equipment fund				31	
Assets or	32	Retained earnings, endowment, accumulated income, or other				32	
Α. Δ	33	Total net assets or fund balances			33,812,762	_	37,558,964
Net							
	34	Total liabilities and net assets/fund balances			48,074,601	34	51,380,137

Par	t XI Reconcilliation 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		16,8	376,506
2	Total expenses (must equal Part IX, column (A), line 25)	2		15,3	303,768
3	Revenue less expenses Subtract line 2 from line 1	3		1,5	572,738
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		33,8	312,762
5	Net unrealized gains (losses) on investments	5		2,1	170,956
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			2,508
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		37,5	558,964
Par	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII				. $ abla$
				Yes	No
1	Accounting method used to prepare the Form 990				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or revie a separate basis, consolidated basis, or both	wed on			
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a sepa basis, consolidated basis, or both	ırate			
	▼ Separate basis				
C	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversigh audit, review, or compilation of its financial statements and selection of an independent accountant?	t of the	2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain it Schedule O	n			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in th Single Audit Act and OMB Circular A-133?	e	3a		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the raudit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	equired	3b		

**Software ID:** 12000266 **Software Version:** v2012.1.0

**EIN:** 31-4379452

Name: COLUMBUS SCHOOL FOR GIRLS

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

Form 990, Part VII - Compensation of Compensated Employees, and Independent	omicers, Dir ident Contra	ectors ctors	, i rt	uste	es,	кеу	EM	ipioyees, Highe '	st	1
<b>(A)</b> Name and Title	(B) Average hours per week (list any	dıre	than	o not one son i er an 'trus!	box s bot d a tee)	, th	1	(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related
	hours for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Ke) emplojee	Highest compensated employee	Former			organizations
BERNIE OSTROWSKI BOARD CHAIR	1 00	х		х				0	0	0
ELIZABETH CRANE SECRETARY	1 00	х		х				0	0	0
LAVEA BRACHMAN CHAIR-ELECT, VICE CHAIR	1 00	х		х				0	0	0
TIM FABER TREASURER	1 00	х		х				0	0	0
ANDREA ZID SALMI BOARD MEMBER	1 00	х						0	0	0
BETH TIERNEY BOARD MEMBER	1 00	х						0	0	0
BRIAN TIERNEY BOARD MEMBER	1 00	х						0	0	0
CECILY ALEXANDER BOARD MEMBER	1 00	х						0	0	0
COLLEEN DUFFY BOARD MEMBER	1 00	х						0	0	0
DAWN LEE BOARD MEMBER	1 00	х						0	0	0
GLENDA HARRISON BOARD MEMBER	1 00	х						0	0	0
GORDON GEE BOARD MEMBER	1 00	х						0	0	0
IRA SHARFIN BOARD MEMBER	1 00	х						0	0	0
JEFF HENDERSON BOARD MEMBER	1 00	х						0	0	0
JOHN P KENNEDY BOARD MEMBER	1 00	х						0	0	0
JONATHON FEIBEL BOARD MEMBER	1 00	х						0	0	0
KATE CARLIN GILLER BOARD MEMBER/JUBILEE	1 00	х						0	0	0
KIM WILSON BOARD MEMBER	1 00	х						0	0	0
LEIGH ANN WOBST BOARD MEMBER	1 00	х						0	0	0
LISA COURTICE PHD BOARD MEMBER	1 00	х						0	0	0
LISA HINSON BOARD MEMBER/DEVELOPMENT CHAIR	1 00	х						0	0	0
LYNNE SMITH BOARD MEMBER	1 00	х						0	0	0
MICHAEL GLIMCHER BOARD MEMBERS	1 00	х						0	0	0
NANCY JEFFREY BOARD MEMBER	1 00	х						0	0	0
ROCKY ROBINS BOARD MEMBER	1 00	х						0	0	0

1 00

1 00

1 00

40 00

40 00

Χ

Х

Χ

Χ

TOM BRIGDON

TOM O'HARA

WEBB VORYS

BOARD MEMBER

BOARD MEMBER

BOARD MEMBER

ELIZABETH LEE

**OPERATIONS** 

HEAD OF SCHOOL JANE GIBSON

ASSOCIATE HEAD OF SCHOOL FOR FINANCE AND

Form 990, Part VII - Compensation of Compensated Employees, and Indepe				uste	ees	, Key	En	nployees, Highe	st	
(A) Name and Title	(B) Average hours per week (list	Position more unless	(C on (do than	not one son i er an	e box is bo id a	ι,		(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and
	any hours for related organizations below dotted line)	Individual trustae or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former		2/1099-M13C)	related organizations
SARAH BALASKY BOARD MEMBER	1 00	х						0	0	0
SARAH BENSON HEINRICHS BOARD MEMBER	1 00	х						0	0	0
STEPHANIE HIGHTOWER BOARD MEMBER	1 00	х						0	0	0
SUSAN MERRYMAN BOARD MEMBER	1 00	х						0	0	0
SUSAN TOMASKY BOARD MEMBER	1 00	х						0	0	0
TIM MILLER BOARD MEMBER	1 00	х						0	0	0

0

0

0

34,085

21,684

0

0

0

0

0

0

0

0

252,229

133,880

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493134083614

OMB No 1545-0047

ОМВИ

**Employer identification number** 

SCHEDULE A (Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service

Total

Name of the organization

COLUMBUS SCHOOL FOR GIRLS

# **Public Charity Status and Public Support**

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

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

2012

Open to Public Inspection

				Yes	NO	Yes	NO	Yes	No				
sup	ported nization	orted organization organization in col (i) listed in lines 1 - 9 above or IRC section (see			ion in ted in rning	the organii in col (i) c suppor	zation of your	organiza col (i) or	organization in col (i) organized in the U S ?			netary oport	
	lame of	(ii) EIN	- -			(v) Did you	ı notıfv	(vi) Is	the	1	(vii) A	mount of	
h			lled entity of a persong information about							11g(ii	IJ	<u> </u>	
		•	er of a person descri	• •		- 1 2				11g(i	<del>-</del> +	<del>                                     </del>	
	•		governing body of th		_	n?				11g(i		<del>                                     </del>	
	• • •		irectly or indirectly o	•		5	persons de	escribed in (i	1)		Yes	No	
g	follown	ng persons?		•									
f		organization this box	received a written do	etermination	from the IR	S that it is a	Type I, Tyl	pe II, or Type	e III su	pportin	g organ	ization,	
e 「	other t section	han foundatı n 509(a)(2)	ox, I certify that the ion managers and otl	her than one	or more pul	olicly support	ed organiza	ations descri	bed ın s	ection	509(a)	(1) or	
11	one or the box	more public <u>x t</u> hat descri	ganized and operated ly supported organiz ibes the type of supp <b>b</b> Type II <b>c</b>	ations descr or <u>ti</u> ng organ	ibed in sect ization and	ion 509(a)(1 complete line	) or sectior s 11e th <u>ro</u>	1509(a)(2) : ugh 11h	See <b>sec</b>	tion 50	9(a)(3)	.Check	
10	_		ganızed and operated	•									
	acquire	acquired by the organization after June 30, 1975 See <b>section <math>509(a)(2)</math>.</b> (Complete Part III )											
	ıts sup	port from gr	oss investment inco	me and unre	lated busine	ess taxable ın	come (less	section 511	. tax) fr	om bus	inesses	5	
	receipt	ts from activ	rities related to its ex	xempt functi	ons—subjec	t to certain e	xceptions,	and (2) no m	ore tha	n 331/3	% of		
9	_	An organization that normally receives (1) more than 331/3% of its support from contributions, membership											
8 F			on 170(b)(1)(A)(vi). : described in <b>sectior</b>			mplete Part II	I )						
7			at normally receives		•	support from	a governm	ental unit or	from the	e gener	al publi	с	
6 Г	_		local government or		tal unit desc	rıbed ın <b>sect</b> i	ion 170(b)(	1)(A)(v).					
,	_	· ·	(A)(iv). (Complete P	_		c, oca o. o	peracea by	a governmen	icai aiii	. 405011	DC4 111		
5 Г			ity, and state erated for the benefi	t of a college	or universi	tv owned or o	perated by	a governmei	ntal unit	descri	bed in		
4 F	A med	ıcal researcl	h organızatıon operat	ted ın conjun	ction with a	hospital des	crıbed ın <b>s</b> e	ection 170(b)	(1)(A)	(iii). En	ter the		
з Г	- A hosp	oital or a coo	perative hospital se	rvice organiz	zatıon descr	ıbed ın <b>sectio</b>	n 170(b)(1	.)(A)(iii).					
2 ▽	A scho	ol described	in <b>section 170(b)(1</b>	L <b>)(A)(ii).</b> (At	tach Sched	ule E)							
1 T	_	•	ion of churches, or a	•			•	•					
			te foundation becaus						ii isti uc	tions.			
Part 1	Pone	on for Du	blic Charity Sta	tue (All or	nanization	s must som	ploto this	31-4379		tions			
								1					

Sch	edule A (Form 990 or 990-EZ) 2012							Page <b>2</b>
Pa	(Complete only if you o	hecked the bo	x on line 5, 7,	or 8 of Part I o	r if the organiza	ation faile	ed to q	
	Part III. If the organiza ection A. Public Support	tion fails to qu	alify under the	tests listed bel	ow, please com	iplete Pa	rt III.)	
	endar year (or fiscal year beginning					1		
	in) ►	(a) 2008	<b>(b)</b> 2009	(c) 2010	(d) 2011	(e) 2	312	(f) Total
1	Gifts, grants, contributions, and							
	membership fees received (Do not include any "unusual							
	grants ")							
2	Tax revenues levied for the							
	organization's benefit and either							
	paid to or expended on its behalf							
3	The value of services or facilities							
•	furnished by a governmental unit to							
	the organization without charge							
4	<b>Total.</b> Add lines 1 through 3							
5	The portion of total contributions by each person (other than a							
	governmental unit or publicly							
	supported organization) included on							
	line 1 that exceeds 2% of the							
	amount shown on line 11, column							
6	(f) <b>Public support.</b> Subtract line 5 from							
	line 4							
S	ection B. Total Support							
Cal	endar year (or fiscal year beginning	(a) 2008	<b>(b)</b> 2009	(c) 2010	(d) 2011	(e) 20	)12	(f) Total
_	in) ► A mounts from line 4		. ,		. ,	, ,		. ,
7 8	Gross income from interest,							
0	dividends, payments received on							
	securities loans, rents, royalties							
	and income from similar							
9	sources Net income from unrelated							
9	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							
4.0	10)		<u> </u>					
12	Gross receipts from related activitie					12		
13	<b>First five years.</b> If the Form 990 is this box and <b>stop here</b>							ization, check
	ection C. Computation of Pub				<u> </u>	<u> </u>		
14	Public support percentage for 2012			11, column (f))		14		
15	Public support percentage for 2011			, , , , , , ,		15		
	33 1/3% support test—2012. If the o	· ·	•	on line 13 and l	ine 14 is 33 1/20%		chack ti	nie hov
104	and <b>stop here.</b> The organization qua				me 1 1 13 33 1/3/0	or more,	JIICCK CI	<b>►</b> □
b	<b>33</b> 1/3% support test—2011. If the				and line 15 is 33	3 1/3% or n	nore, ch	eck this
	box and <b>stop here.</b> The organization						. 4 4	▶□
1/a	10%-facts-and-circumstances test- is 10% or more, and if the organizat							•
	in Part IV how the organization mee							
	organization				4	r	,rF3	<b>▶</b> □
b	10%-facts-and-circumstances test-							
	15 is 10% or more, and if the organ Explain in Part IV how the organizat							lv
	supported organization	ion meets the T	acts-ana-cncum:	stances test III	ic organization qu	uiiiiE5 45 i	a public	·y ▶□
18	Private foundation. If the organizat	on did not check	c a box on line 13	, 16a, 16b, 17a,	or 17b, check thi	s box and	see	·
	instructions							<b>▶</b> ┌

Schedule A (Form 990 or 990-EZ) 2012 Page 3 Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.) Section A. Public Support Calendar year (or fiscal year beginning (a) 2008 **(b)** 2009 (c) 2010 (d) 2011 (e) 2012 (f) Total 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						
3	Gross receipts from activities that						
	are not an unrelated trade or						
	business under section 513			-			
4	Tax revenues levied for the						
	organization's benefit and either						
	paid to or expended on its behalf						
5	The value of services or facilities						
3	furnished by a governmental unit to						
	the organization without charge						
6	<b>Total.</b> Add lines 1 through 5						
	Amounts included on lines 1, 2,						
/a	and 3 received from disqualified						
	persons						
b	Amounts included on lines 2 and 3						
_	received from other than						
	disqualified persons that exceed						
	the greater of \$5,000 or 1% of the						
	amount on line 13 for the year						
С	Add lines 7a and 7b						
8	Public support (Subtract line 7c						
	from line 6 )						
_Se	ction B. Total Support						
Cale	ndar year (or fiscal year beginning	(a) 2008	<b>(b)</b> 2009	(c) 2010	( <b>d)</b> 2011	(e) 2012	(f) Total
	in) ►	(u) 2000	(6) 2003	(6) 2010	(4) 2011	(6) 2012	(1) 10tai
9	A mounts from line 6						
10a	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar						
	sources						
Ь	Unrelated business taxable income (less section 511 taxes)						
	from businesses acquired after						
	June 30, 1975						
c	Add lines 10a and 10b						
11	Net income from unrelated						
11	business activities not included						
	in line 10b, whether or not the						
	business is regularly carried on						
12	Other income Do not include						
	gain or loss from the sale of						
	capital assets (Explain in Part						
	IV)						
13	Total support. (Add lines 9, 10c,						
	11, and 12)			Librari Corretto con	6.01	E04(-)(2)	
14	First five years. If the Form 990 is for	or the organization	on's first, second	i, thira, fourth, or	ππη tax year as a	1 501(c)(3) org	anization, ►
	check this box and stop here	a Cunnaut Da					<u> </u>
	ction C. Computation of Public			1.2		T I	
15	Public support percentage for 2012			13, column (T))		15	
16	Public support percentage from 2011	L Schedule A, Pa	art III, line 15			16	
Se	ction D. Computation of Inve	stment Inco	me Percenta	ge			
17	Investment income percentage for 20				nn (f))	17	
					. , ,	<del>                                     </del>	
18	Investment income percentage from					18	
19a	33 1/3% support tests—2012. If the o						ıd lıne 17 ıs not ▶□

33 1/3% support tests—2011. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18

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

Schedule A (Form 990 or 990-EZ) 2012

DLN: 93493134083614

OMB No 1545-0047

Inspection

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

Department of the Treasury Internal Revenue Service

For Organizations Exempt From Income Tax Under section 501(c) and section 527 ▶ Complete if the organization is described below. ▶ Attach to Form 990 or Form 990-EZ. ► See separate instructions.

Political Campaign and Lobbying Activities

If the organization answered "Yes" to Form 990, Part IV, Line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C
- ◆ Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B
- ◆ Section 527 organizations Complete Part I-A only

If the organization answered "Yes" to Form 990, Part IV, Line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

◆ Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B

• Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A If the organization answered "Yes" to Form 990, Part IV, Line 5 (Proxy Tax) or Form 990-EZ, Part V, line 35c (Proxy Tax), then ◆ Section 501(c)(4), (5), or (6) organizations Complete Part III Name of the organization **Employer identification number** COLUMBUS SCHOOL FOR GIRLS 31-4379452 Complete if the organization is exempt under section 501(c) or is a section 527 organization. Provide a description of the organization's direct and indirect political campaign activities in Part IV 2 Political expenditures 3 Volunteer hours Part I-B Complete if the organization is exempt under section 501(c)(3). Enter the amount of any excise tax incurred by the organization under section 4955 2 Enter the amount of any excise tax incurred by organization managers under section 4955 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? ☐ Yes 3 Was a correction made? ☐ Yes □ No If "Yes," describe in Part IV Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3). Enter the amount directly expended by the filing organization for section 527 exempt function activities Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities 3 Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b Did the filing organization file Form 1120-POL for this year? 4 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV **(c)** EIN (e) A mount of political (a) Name (b) Address (d) A mount paid from contributions received filing organization's and promptly and funds If none, enter -0directly delivered to a separate political organization If none, enter-0-

e Grassroots ceiling amount (150% of line 2d, column (e))

**f** Grassroots lobbying expenditures

Sch	nedule C (Form 990 or 990-EZ) 2012					Page 2
Pa	art II-A Complete if the organization	is exempt under	section 501(	c)(3) and fil	ed Form 5768	(election
_	under section 501(h)). Check ► if the filing organization belongs to a	an affiliated group (and	lict in Part IV os	ach affiliated are	un mambar's nam	o addross EIN
	expenses, and share of excess lobb	ying expenditures)		_	up member s nam	e, address, LTN
<u>B</u>	Check Frifthe filing organization checked box	x A and "limited contro	ıl" provisions apı	oly		
	Limits on Lobbying E (The term "expenditures" means an		l <b>.</b> )		(a) Filing organization's totals	<b>(b)</b> Affiliated group totals
1a	Total lobbying expenditures to influence public o	pınıon (grass roots lob	bying)			
b	Total lobbying expenditures to influence a legisla	ative body (direct lobb	yıng)			
c	Total lobbying expenditures (add lines 1a and 1b	o)				
d	O ther exempt purpose expenditures					
e	Total exempt purpose expenditures (add lines 1c	c and 1d)				
f	Lobbying nontaxable amount Enter the amount fo					
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontax	able amount is:			
	Not over \$500,000	20% of the amount on li	ne 1e			
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the	e excess over \$500,0	000		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the	e excess over \$1,000	0,000		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the	excess over \$1,500,	.000		
	Over \$17,000,000	\$1,000,000				
	Grassroots nontaxable amount (enter 25% of lin	e 1f)				
_	Subtract line 1g from line 1a If zero or less, ente	•		-		
i	Subtract line 1f from line 1c If zero or less, ente			-		
_	If there is an amount other than zero on either lin		organization file	Form 4720 rep	ortina	1
-	section 4911 tax for this year?					┌ Yes ┌ No
_	4-Voor Av	veraging Period U	Inder Section	F01/b)		
	(Some organizations that made a scolumns below. See the	section 501(h) el	ection do not	have to cor		ne five
	Lobbying Expe	enditures During	4-Year Avera	ging Period		1
	Calendar year (or fiscal year beginning in)	(a) 2009	<b>(b)</b> 2010	(c) 2011	( <b>d)</b> 2012	<b>(e)</b> Total
2a	Lobbying nontaxable amount					
b	Lobbying ceiling amount (150% of line 2a, column(e))					
c	Total lobbying expenditures					
d	Grassroots nontavable amount					

Pa	rt II-B Complete if the organization is exempt under section 501(c)(3) and has N filed Form 5768 (election under section 501(h)).	ОТ				
		( a	a)		(b)	
activ	each "Yes" response to lines 1a through 1i below, provide in Part IV a detailed description of the lobbying vity.	Yes	No	,	A mour	nt
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of					
а	Volunteers?	Yes				
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?		Νo			
C	Media advertisements?		Νo			
d	Mailings to members, legislators, or the public?		Νo			
е	Publications, or published or broadcast statements?		Νo			
f	Grants to other organizations for lobbying purposes?		Νo			
g	Direct contact with legislators, their staffs, government officials, or a legislative body?		Νo			
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		Νo			
i	O ther activities?		Νo			
j	Total Add lines 1c through 1i		_			
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		Νo			
b	If "Yes," enter the amount of any tax incurred under section 4912					
С	If "Yes," enter the amount of any tax incurred by organization managers under section 4912		_			
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					
Pai	rt III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).	01(c	)(5), (	or s		
	Ware substantially all (000), or mare) dues reserved pendeductible by members?		_	1	Yes	No
1 2	Were substantially all (90% or more) dues received nondeductible by members?  Did the organization make only in-house lobbying expenditures of \$2,000 or less?		F	2		
3	Did the organization make only in-house lobbying expenditures of \$2,000 of less?  Did the organization agree to carry over lobbying and political expenditures from the prior year?			3		
	rt III-B Complete if the organization is exempt under section 501(c)(4), section 5	01/6	\/E\ /		ostio	<u> </u>
14:1	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "N line 3, is answered "Yes."					
1	Dues, assessments and similar amounts from members	1				
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).					
а	Current year	2a				
b	Carryover from last year	2b				
C	Total	2c				
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3				
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4				
5	Taxable amount of lobbying and political expenditures (see instructions)	5				

#### Part IV Supplemental Information

Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group list), Part II-A, line 2, and Part II-B, line 1 Also, complete this part for any additional information

Identifier	Return Reference	Explanation
Description of the activities reported on Lines 1a through 1i		COLUMBUS SCHOOL FOR GIRLS FORM IV STUDENTS HAVE BEEN WORKING WITH THE OHIO LEGISLATURE TO GET THE ADENA PIPE DESIGNATED AS THE OHIO ARTIFACT A PARENT OF A STUDENT WHO IS A LOBBYIST VOLUNTEERED THEIR TIME TO ASSIST THE CLASS

DLN: 93493134083614

OMB No 1545-0047

**SCHEDULE D** (Form 990)

Department of the Treasury

**Supplemental Financial Statements** 

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b

Open to Public

ema	Revenue Service	m 990. ► See separate instructions.		Inspection
	me of the organization .UMBUS SCHOOL FOR GIRLS		Emp	loyer identification number
_			31-4	4379452
Pa	organizations Maintaining Donor Advorganization answered "Yes" to Form 990		unds	or Accounts. Complete if the
		(a) Donor advised funds		(b) Funds and other accounts
	Total number at end of year			
	Aggregate contributions to (during year)			
	Aggregate grants from (during year)			
	Aggregate value at end of year			
	Did the organization inform all donors and donor advisor funds are the organization's property, subject to the or	3	ıor advı	sed Yes No
	Did the organization inform all grantees, donors, and dused only for charitable purposes and not for the beneficonferring impermissible private benefit?			
a	rt II Conservation Easements. Complete if	the organization answered "Yes" t	o Forn	n 990. Part IV. line 7.
	Purpose(s) of conservation easements held by the org Preservation of land for public use (e g , recreation Protection of natural habitat Preservation of open space Complete lines 2a through 2d if the organization held a	or education)  Preservation of ar Preservation of a	certifie	d historic structure
	easement on the last day of the tax year			Hald at the Fud of the Year
_	Total number of conservation easements		22	Held at the End of the Year
a			2a	
<b>b</b>	Total acreage restricted by conservation easements	oric structure included in (a)	2b	
с	Number of conservation easements on a certified histo	• •	2c	
d	Number of conservation easements included in (c) acc historic structure listed in the National Register		2d	
	Number of conservation easements modified, transferr	red, released, extinguished, or terminate	ed by th	ie organization during
	the tax year 🗠			
	Number of states where property subject to conservat	ion easement is located ►		
	Does the organization have a written policy regarding tenforcement of the conservation easements it holds?	the periodic monitoring, inspection, han	dlıng of	violations, and Yes No
	Staff and volunteer hours devoted to monitoring, inspe	cting, and enforcing conservation easer	ments d	luring the year
	A mount of expenses incurred in monitoring, inspecting	a and enforcing conservation easement	s durina	the year
	►\$	g, and emorening conservation easement	3 during	g the year
	Does each conservation easement reported on line 2(a and section 170(h)(4)(B)(ii)?	d) above satisfy the requirements of sec	tion 17	70(h)(4)(B)(ı)
	In Part XIII, describe how the organization reports coi balance sheet, and include, if applicable, the text of th	e footnote to the organization's financia		
ar	the organization's accounting for conservation easemet III Organizations Maintaining Collection Complete if the organization answered "Y	s of Art, Historical Treasures,	or Otl	her Similar Assets.
a	If the organization elected, as permitted under SFAS 1 works of art, historical treasures, or other similar asse	.16 (ASC 958), not to report in its reve		
_	service, provide, in Part XIII, the text of the footnote t	o its financial statements that describe	s these	e items
Ь	If the organization elected, as permitted under SFAS 1 works of art, historical treasures, or other similar asseservice, provide the following amounts relating to thes	ts held for public exhibition, education,		
	(i) Revenues included in Form 990, Part VIII, line 1			<b>►</b> \$
	(ii) Assets included in Form 990, Part X			<b>▶</b> \$
	If the organization received or held works of art, histor following amounts required to be reported under SFAS			
a	Revenues included in Form 990, Part VIII, line 1			<b>▶</b> \$
				· • ———

**b** Assets included in Form 990, Part X

Par	Organizations Maintaining Co	<u>illections of Ar</u>	t, His	storical	reas	sures, or O	tne	<u>r Similar As</u>	ssets (d	continued)
3	Using the organization's acquisition, access collection items (check all that apply)	ion, and other reco	rds, cl	heck any o	f the fo	ollowing that a	are a	significant use	e of its	
а	Public exhibition		d	┌ Loa	nore	change progr	ams			
b	Scholarly research		e	┌ Oth	er					
С	Preservation for future generations									
4	Provide a description of the organization's co	ollections and expl	aın ho	w they furt	her the	e organization	's ex	empt purpose	ın	
5	During the year, did the organization solicities	or receive donation	s of ar	rt historica	al troa	cures or othe	reim	ular		
•	assets to be sold to raise funds rather than t							iii di	┌ Yes	┌ No
Par	<b>Escrow and Custodial Arrang</b> Part IV, line 9, or reported an ar					on answere	d "Y	es" to Form 9	990,	
1a	Is the organization an agent, trustee, custoo included on Form 990, Part X?	lian or other interm	nediary	for contril	oution	s or other ass	ets i	not	┌ Yes	√ No
b	If "Yes," explain the arrangement in Part XI	II and complete the	e follov	wing table		_				
						-		Aı	nount	
С	Beginning balance					-	1c			
d	Additions during the year					_	1d			
e	Distributions during the year					_	1e			
f	Ending balance						1f			
2a	Did the organization include an amount on Fe	orm 990, Part X, Iır	ne 21?	•					✓ Yes	┌ No
b	If "Yes," explain the arrangement in Part XII	I Check here if the	e expla	anation has	s been	provided in P	art >	KIII		ᅜ
Pa	rt V Endowment Funds. Complete		n ans	swered "Y	'es" t	o Form 990,	Par	t IV, lıne 10.		
		(a)Current year	(b)	Prior year	_		+	Three years back		years back
1a	Beginning of year balance	23,282,692		24,012,90	-	21,253,669		19,587,359		24,942,162
b	Contributions	42,023		47,85	9	56,767		22,109		84,038
С	Net investment earnings, gains, and losses	3,229,777		185,02	6	3,747,078		2,762,896		-4,292,598
d	Grants or scholarships	939,491		963,09	4	1,044,613		1,118,695		1,146,243
e	Other expenditures for facilities and programs									
f	Administrative expenses									
g	End of year balance	25,615,001		23,282,69	2	24,012,901		21,253,669		19,587,359
2	Provide the estimated percentage of the cur	rent year end balar	nce (lır	ne 1g, colu	mn (a	)) held as				
а	Board designated or quasi-endowment 🕨	0 %								
ь	Permanent endowment ► 63 000 %									
С		000 %								
·	The percentages in lines 2a, 2b, and 2c sho									
За	Are there endowment funds not in the posse		zatıon	that are he	eld and	d administered	d for	the		
	organization by								Yes	No
	(i) unrelated organizations						•	3a		+
	(ii) related organizations						•	<u>3a</u>	_	No
ь 4	If "Yes" to 3a(II), are the related organization Describe in Part XIII the intended uses of the second of the seco				· ·		•	3	<b>D</b>	<u></u>
	t VI Land, Buildings, and Equipme				10					
Fai	Description of property	siit. See roiiii 9	30, F	(a) Cost		(b)Cost or of	ther	(c) Accumulated	( <b>d)</b> B	ook value
	,			basis (inve	stment	) basis (othe	r)	depreciation		
1a	Land					3,711	,728			3,711,728
b	Buildings		•			27,937	,506	9,161,33	89	18,776,167
C	Leasehold improvements		•			660	,446	592,75	51	67,695
	Equipment					2,890	,047	1,890,34	17	999,700
						1				0
Tota	<b>l.</b> Add lines 1a through 1e <i>(Column (d) must e</i>	qual Form 990, Part	X, colu	umn (B), lin	e 10(c	).)		🕨		23,555,290

Part VII Investments—Other Securities. Se	ee Form 990, Part X, line 12	2.	
(a) Description of security or category	(b)Book value	(c) Method of valuation	
(including name of security)		Cost or end-of-year market value	
(1)Financial derivatives			
(2)Closely-held equity interests			
Other			
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	<b>*</b>		
Part VIII Investments—Program Related.	See Form 990, Part X, line	13.	
(a) Description of investment type	(b) Book value	(c) Method of valuation	
		Cost or end-of-year market value	
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)	lung 1F		
Part IX Other Assets. See Form 990, Part X, (a) Des		(b) Book value	
(u) Des	eriperon	(B) Book value	
			-
Total. (Column (b) must equal Form 990, Part X, col.(B) line	15.)		
Part X Other Liabilities. See Form 990, Par			
1 (a) Description of liability	(b) Book value		
Federal income taxes	0		
CHARITABLE GIFT ANNUITIES	125,422		
UNREALIZED LOSS ON SWAP AGREEMENT			
UNREALIZED LOSS ON SWAP AGREEMENT	7,825		
	0		
	+		
Total. (Column (b) must equal Form 990, Part X, col (B) line 25 )	▶ 133,247		
2. Fin 48 (ASC 740) Footnote In Part XIII, provide the	text of the footnote to the organ	nization's financial statements that reports the	

Par	t XI Reconciliation of Revenue per Audited Financial Statements With Revenue	er Re	turn
1	Total revenue, gains, and other support per audited financial statements	1	17,722,709
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments		
b	Donated services and use of facilities		
c	Recoveries of prior year grants		
d	Other (Describe in Part XIII )		
e	Add lines <b>2a</b> through <b>2d</b>	2e	2,263,392
3	Subtract line <b>2e</b> from line <b>1</b>	3	15,459,317
4	Amounts included on Form 990, Part VIII, line 12, but not on line <b>1</b>		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a 66,954		
b	Other (Describe in Part XIII )		
c	Add lines <b>4a</b> and <b>4b</b>	4c	1,417,189
5	Total revenue Add lines <b>3</b> and <b>4c.</b> (This must equal Form 990, Part I, line 12)	5	16,876,506
Part	XII Reconciliation of Expenses per Audited Financial Statements With Expenses	per F	Return
1	Total expenses and losses per audited financial statements	1	13,976,507
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities		
b	Prior year adjustments		
c	Other losses		
d	Other (Describe in Part XIII )		
e	Add lines 2a through 2d	2e	72,806
3	Subtract line <b>2e</b> from line <b>1</b>	3	13,903,701
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a 66,954		
b	Other (Describe in Part XIII )		
c	Add lines <b>4a</b> and <b>4b</b>	4c	1,400,067
5	Total expenses Add lines <b>3</b> and <b>4c.</b> (This must equal Form 990, Part I, line 18)	5	15,303,768
	VIII Supplemental Information		

#### Part XIIII Supplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b Also complete this part to provide any additional information

Information	Dahum Dafama	F. v. L. v L. v. v.
I dentifier	Return Reference	Explanation
Explanation of escrow agreement	Schedule D, Part IV, Line 2b	THE SCHOOL HOLDS FUNDS IN A CUSTODIAL MANNER FOR VARIOUS SCHOOL CLUBS AND GROUPS THESE FUNDS ARE NOT FOR USE OF THE SCHOOL WHEN CLUBS AND GROUPS COLLECT FUNDS THEY ARE GIVEN TO THE BUSINESS OFFICE FOR DEPOSIT THE FUNDS ARE DEPOSITED TO THE SCHOOL'S MAIN CHECKING ACCOUNT AT HUNTINGTON NATIONAL BANK FOR CLUBS AND GROUPS THAT HAVE REGULAR ACTIVITY, SUCH AS LANGUAGE CLUBS AND SPORTS TEAMS, MONTHLY STATEMENTS ARE SENT TO THE CLUB ADVISOR IF THE ACCOUNT IS FOR A GROUP THAT DOES NOT HAVE REGULAR ACTIVITY THROUGHOUT THE YEAR, STATEMENTS ARE SENT DURING THE TIME WHEN THEY ARE REGULARLY DEPOSITING AND USING FUNDS
Intended uses of endowment funds	Schedule D, Part V, Line 4	COLUMBUS SCHOOL FOR GIRLS ENDOWMENT FUNDS ARE TO SUSTAIN THE SCHOOL FOR FUTURE GENERATIONS, WHILE PROVIDING FOR CURRENT STUDENTS WITH FINANCIAL AID SCHOLARSHIPS AND OTHER DONOR DESIGNATED GIFTS
FIN 48 (ASC 740) footnote	Schedule D, Part X, Line 2	GENERALLY ACCEPTED ACCOUNTING PRINCIPLES PRESCRIBES RECOGNITION THRESHOLDS AND MEASUREMENT ATTRIBUTES FOR THE FINANCIAL STATEMENT RECOGNITION AND MEASUREMENT OF A TAX POSITION TAKEN OR EXPECTED TO BE TAKEN IN A TAX RETURN TAX BENEFITS WILL BE RECOGNIZED ONLY IF A TAX POSITION IS MORE-LIKELY-THAN-NOT SUSTAINED IN A TAX EXAMINATION, WITH A TAX EXAMINATION BEING PRESUMED TO OCCUR THE AMOUNT RECOGNIZED WILL BE THE LARGEST AMOUNT OF TAX BENEFIT THAT IS GREATER THAN 50% LIKELY BEING REALIZED ON EXAMINATION FOR TAX POSITIONS NOT MEETING THE MORE-LIKELY-THAN-NOT TEST, NO TAX BENEFIT WILL BE RECORDED MANAGEMENT HAS CONCLUDED THAT THEY ARE UNAWARE OF ANY TAX BENEFITS OR LIABILITIES TO BE RECOGNIZED AT JUNE 30, 2013 OR 2012 THE SCHOOL WOULD RECOGNIZE INTEREST AND PENALTIES RELATED TO UNRECOGNIZED TAX BENEFITS IN INTEREST AND INCOME TAX EXPENSE, RESPECTIVELY THE SCHOOL HAS NO AMOUNTS ACCRUED FOR INTEREST OR PENALTIES FOR THE YEARS ENDED JUNE 30, 2013 OR 2012 THE SCHOOL IS NO LONGER SUBJECT TO EXAMINATION BY TAXING AUTHORITIES FOR YEARS BEFORE 2010 THE SCHOOL DOES NOT EXPECT THE TOTAL AMOUNT OF UNRECOGNIZED TAX BENEFITS TO SIGNIFICANTLY CHANGE IN THE NEXT 12 MONTHS
Other revenues in audited financial statements not in form 990	Schedule D, Part XI, Line 2d	HOUSE EXPENSES - 72806, FAIR VALUE OF INTEREST RATE SWAP - 19630,
Other revenues in form 990 not in audited financial statements	Schedule D, Part XI, Line 4b	FINANCIAL AID - 1333113, CHANGE IN VALUE OF SPLIT INTEREST - 17122,
Other expenses in audited financial statements not in form 990	Schedule D, Part XII, Line 2d	HOUSE EXPENSES - 72806,
Other expenses in form 990 not in audited financial statements	Schedule D, Part XII, Line 4b	FINANCIAL AID - 1333113,

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DLN: 93493134083614

OMB No 1545-0047

2012

2012

#### **SCHEDULE E**

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

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

**Schools** 

► Attach to Form 990 or Form 990-EZ.

Employer identification number

COLUMBUS SCHOOL FOR GIRLS 31-4379452 Part I YES NO Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body? 1 Yes Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships? 2 Yes Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe If "No," please explain If you need more space use Part II 3 Yes Does the organization maintain the following? a Records indicating the racial composition of the student body, faculty, and administrative staff? 4a Yes b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory 4b Yes c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships? 4c Yes 4d Yes d Copies of all material used by the organization or on its behalf to solicit contributions? If you answered "No" to any of the above, please explain If you need more space, use Part II Does the organization discriminate by race in any way with respect to a Students' rights or privileges? Νo 5a **b** Admissions policies? 5b Νo c Employment of faculty or administrative staff? Νo d Scholarships or other financial assistance? 5d Νo e Educational policies? 5e Νo f Use of facilities? 5f Νo g Athletic programs? 5g Νo 5h Νo h Other extracurricular activities? If you answered "Yes" to any of the above, please explain If you need more space, use Part II 6a 6a Does the organization receive any financial aid or assistance from a governmental agency? Yes b Has the organization's right to such aid ever been revoked or suspended? Νo If you answered "Yes" to either line 6a or line 6b, explain on Part II 7 Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05 of Rev Proc 75-50, 1975-2 C B 587, covering racial nondiscrimination? If "No," explain on Part II Yes

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

ldentifier	Return Reference	Explanation
Racially nondiscriminatory policy	Schedule E, Part I, Line 3	COLUMBUS SCHOOL FOR GIRLS ADMINISTERS ITS ADMISSION, FINANCIAL AID, AND EMPLOY MENT POLICIES WITHOUT REGARD TO RACE, RELIGION, SEXUAL ORIENTATION, CREED, OR NATIONAL ORIGIN
Financial aid or assistance from a governmental agency	Schedule E, Part I, Line 6a	COLUMBUS SCHOOL FOR GIRLS RECIEVES STATE MANDATED FUNDS FROM THE STATE OF OHIO

Schedule E (Form 990 or 990-EZ) 2012

DLN: 93493134083614

OMB No 1545-0047

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

Department of the Treasury

**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. Form 990-EZ filers are not required to complete this part.

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

Open to Public Inspection

Internal Revenue Service Name of the organization **Employer identification number** COLUMBUS SCHOOL FOR GIRLS 31-4379452

Pa	Fundrais	sina Act	t <b>ivities.</b> Complete	e if the oi	roanizat	ion answered "Yes" to	o Form 990. Part IV.	line 17.
1	<u> </u>					following activities Che		
a	Mail solicitati	_	nzation raised lunds	through ai	•	Solicitation of non-	• • •	
a b	✓ Internet and		citations		e •	Solicitation of gove		
C	Phone solicita		citations		a	Special fundraising		
d	✓ In-person sol				y	j* Special idildialsing	, events	
u	j. III-person soi	incitations	•					
2a						ividual (including officer		
			·	•		ction with professional fu	-	Yes N
b			t paid individuals or t \$5,000 by the orga		undraisei	rs) pursuant to agreeme	nts under which the fund	draiser is
	to be compensate	u at leas	t \$5,000 by the orga	11112011011				
(	i) Name and addre	ss of	(ii) Activity	(iii)	) Dıd	(iv) Gross receipts	(v) A mount paid to	(vi) A mount paid to
	ındıvıdual			fundrais	ser have	from activity	(or retained by)	(or retained by)
	or entity (fundrais	ser)		1	ody or		fundraiser listed in	organization
				1	rol of outions?		col <b>(i)</b>	
				Yes	No			
			ASSISTED					
	BENEFACTOR GR	OLID	COLUMBUS SCHOOL FOR					
	1488 GRANDVIE		GIRLS		l	2 2 2 4 5 7	36.000	2 0 24 4 5 0
	AVENUE		DEVELOPMENT		No	2,968,457	36,999	2,931,458
	COLUMBUS OF	42212	OFFICE WITH FUNDRAISING					
	COLUMBUS, OH	43212	METHODS					
Tata			1	1	<u> </u>	2 060 457	36,000	2 0 24 4 5 0
Tota	1			• • •		2,968,457	36,999	2,931,458
3		which the	organızatıon ıs regis	tered or li	censed to	solicit funds or has bee	en notified it is exempt f	rom registration or
	licensing							
ЭН								

Sche	dule	e G (Form 990 or 990-EZ) 2012				Page 2
Pai	rt I	Fundraising Events. Commore than \$15,000 of fundrevents with gross receipts of	aising event contribut			
		<u> </u>	(a) Event #1	<b>(b)</b> Event #2	(c) O ther events	(d) Total events (add col (a) through col (c))
ds			(event type)	(event type)	(total number)	
Ě	1	Gross receipts	170,03	0 0	0	170,030
Revenue	2	Less Contributions	83,68	О		83,680
<u>~</u>	3	Gross income (line 1 minus line 2)	86,35	0 0	0	86,350
	4	Cash prizes				0
ဟ	5	Noncash prizes				0
Expenses	6	Rent/facility costs	18,29	3		18,293
ğ	7	Food and beverages .	3,97	6		3,976
Direct	8	Entertainment	80	О		800
Ş	9	Other direct expenses .	16,14	0		16,140
	10	Direct expense summary Add lir	nes 4 through 9 ın columı	n (d)		(39,209)
	11	Net income summary Combine I				47,141
Par	t II			"Yes" to Form 990, Pa	rt IV, line 19, or repo	l .
	l	\$15,000 on Form 990-EZ, li	I	T 43 5 11 1 45 1 1 1		I
Revenue			(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
<u>~</u>	1	Gross revenue				
99 90	2	Cash prizes				
sesuedy	3	Non-cash prizes				
ш	4	Rent/facility costs				
Direct	5	Other direct expenses				
	6	Volunteer labor	Г Yes Г No	Г Yes Г No	┌ Yes	
	7	Direct expense summary Add line	s 2 through 5 in column	(d)		
	8	Net gaming income summary Com	nbine lines 1 and 7 in col	umn (d)	🕨	
9 a b	Is	ter the state(s) in which the organiz the organization licensed to operate 'No," explain	gaming activities in eac	h of these states?		
10a b		re any of the organization's gaming	licenses revoked, suspe	nded or terminated during		

Does	s the organization operate gaming	activities with nonmembers?	?		Yes No
<b>L2</b>	Is the organization a grantor, be	neficiary or trustee of a trust	t or a mem	ber of a partnership or other entity	
	formed to administer charitable	gamıng?			Γ <sub>Yes</sub> Γ <sub>No</sub>
.3	Indicate the percentage of gami	ng activity operated in			
а	The organization's facility			13a	
b	An outside facility			13b	
L4	Enter the name and address of t	he person who prepares the o	organızatıc	on's gaming/special events books and records	5
	Name 🟲				
	Address ►				
l5a	Does the organization have a co			organization receives gaming	Гу., Гл.
b		ming revenue received by the	e organızat	tion 🕨 \$ and the	Tes I No
С	If "Yes," enter name and addres	s of the third party			
	Name 🕨				
	Address 🟲				
L6	Gaming manager information				
	Name 🕨				
	Gaming manager compensation	<b>▶</b> \$			
	Description of services provided	1▶			
	Director/officer	<b>F</b> Employee		Independent contractor	
.7	Mandatory distributions				
а	Is the organization required und	er state law to make charıtal	ole distribu	utions from the gaming proceeds to	
	retain the state gaming license?	·			$\Gamma_{\text{Yes}}$ $\Gamma_{\text{No}}$
b	Enter the amount of distributions	s required under state law dis	strıbuted t	o other exempt organizations or spent	
	ın the organization's own exemp				
Pai	columns (III) and (v), a		10b, 15b,	ovide the explanations required by Part , 15c, 16, and 17b, as applicable. Also c ons).	
	Identifier	Return Reference		Explanation	
Des	cribe the custody or control	Schedule G, Part I, Line 2b		BENEFACTOR GROUP-BENEFACTOR GROU	JP PROVIDES

Identifier	Return Reference	Explanation
Describe the custody or control arrangement	Scriedule G, Part I, Line 2b	BENEFACTOR GROUP-BENEFACTOR GROUP PROVIDES FUNDRAISING CONSULTING SERVICES FOR COLUMBUS SCHOOL FOR GIRLS (CSG) DEVELOPMENT OFFICE CSG DID NOT HIRE AN ADDITIONAL STAFF MEMBER IN THE DEVELOPMENT OFFICE, TO WORK SOLELY ON THE CAPITAL CAMPAIGN INSTEAD CSG USES BENEFACTOR GROUP ON A AS NEEDED BASIS TO MEET WITH THE CAMPAIGN CHAIRS AND COMMITTEE MEMBERS ABOUT PROCESS, DONORS, AND TIMELINE,

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

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

OMB No 1545-0047

DLN: 93493134083614

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Schedule I

(Form 990)

Employer identification number

						1 ' '	
OLUMBUS SCHOOL FOR GIRLS						31-4379452	
Part I General Information	n on Grants and	d Assistance				•	
<ul> <li>Does the organization maintain r</li> <li>the selection criteria used to aw</li> <li>Describe in Part IV the organiza</li> </ul>	ard the grants or as	sıstance?					√ Yes
Form 990, Part IV, line							es" to
(a) Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC Code section if applicable	<b>(d)</b> Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of gran or assistance
<ul><li>Enter total number of section 50</li><li>Enter total number of other organ</li></ul>							

Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

	•				
(a)Type of grant or assistance	( <b>b)</b> Number of recipients	<b>(c)</b> A mount of cash grant	(d)A mount of non-cash assistance	<b>(e)</b> Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
(1) TUITION REIMBURSEMENT	29	351,713	0 1	N/A	N/A
(2) FINANCIAL AID	107	981,400	0 0	N/A	N/A

Part IV Supplemental Information.

Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional information

Identifier	Return Reference	Explanation
Procedures for monitoring use of grant funds		CSG'S ADMISSION AND DEVELOPMENT OFFICES WORK CLOSELY TOGETHER TO AWARDI NAMED SCHOLARSHIPS TO STUDENTS THE PARENTS SUBMIT A FINANCIAL AID APPLICATION AND SUPPORTING TAX FORMS ONLINE VIA THE SCHOOL AND STUDENT SERVICES (SSS) MODULE LOCATED ON THE NATIONAL ASSOCIATION OF INDEPENDENT SCHOOLS WEBSITE COLUMBUS SCHOOL FOR GIRLS (CSG) RECEIVES A REPORT BASED ON PARENT INCOME, EXPENSES AND THE AMOUNT THEY ARE ABLE TO AFFORD FOR INDEPENDENT SCHOOL TUITION CSG'S FINANCIAL AID COMMITTEE REVIEWS THE PARENT INFORMATION AND GRANTS AWARDS AS NEEDED THE ADMISSION OFFICE NOTIFIES THE STUDENT OF THEIR SCHOLARSHIP AMOUNT THESE GRANTS ARE ENTERED INTO THE SR SYSTEM FINANCIAL AID SOFTWARE, WHICH FLOWS INTO THE ACCOUNTS RECEIVABLE MODULE THE TOTAL FINANCIAL AID IS BASED ON A BUDGET NUMBER THAT IS ON CSG'S FINANCIAL STATEMENT IF, IN THE RARE INSTANCE, CSG REQUESTED A STUDENT LEAVE, THAT PORTION OF THE FINANCIAL AID WOULD BE DESIGNATED BACK INTO THE FINANCIAL AID FUNDS THE DEVELOPMENT OFFICE HAS THE DONOR
		SPECIFICATIONS FOR WHO SHOULD BE AWARDED THE SCHOLARSHIP ONCE THE STUDENT IS CHOSEN FOR THE SCHOLARSHIP AWARD, THE DEVELOPMENT OFFICE SENDS THE DONOR A LETTER ABOUT THE STUDENT

DLN: 93493134083614

OMB No 1545-0047

**Schedule J** (Form 990)

Department of the Treasury

Internal Revenue Service

**Compensation Information** For certain Officers, Directors, Trustees, Key Employees, and Highest

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

► Attach to Form 990. ► See separate instructions.

Open to Public Inspection

Name of the organization COLUMBUS SCHOOL FOR GIRLS **Employer identification number** 

31-4379452

Pa	Questions Regarding Compensation				١,,	
					Yes	No
1a	Check the appropriate box(es) if the organization provider 990, Part VII, Section A, line 1a Complete Part III to p					
			Housing allowance or residence for personal use			
	Travel for companions	_	Payments for business use of personal residence			
	Tax idemnification and gross-up payments	Γ	Health or social club dues or initiation fees			
	Discretionary spending account	Γ	Personal services (e g , maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the organiz					
	reimbursement or provision of all of the expenses descri	bec	d above? If "No," complete Part III to explain	1b	Yes	
2	Did the organization require substantiation prior to reimb directors, trustees, and the CEO/Executive Director, reg			2	Yes	
3	Indicate which, if any, of the following the filing organizat organization's CEO/Executive Director Check all that a used by a related organization to establish compensation	ppl	y Do not check any boxes for methods			
	Compensation committee	Г	Written employment contract			
	- <u></u>	고				
	Form 990 of other organizations	굣	Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, Part or a related organization	VI	I , Section A , line 1a with respect to the filing organization			
а	Receive a severance payment or change-of-control paym	mer	nt?	4a		No
b	Participate in, or receive payment from, a supplemental r	non	qualified retirement plan?	4b		Νo
c	Participate in, or receive payment from, an equity-based	СО	mpensation arrangement?	4c		Νo
	If "Yes" to any of lines 4a-c, list the persons and provide	e th	ne applicable amounts for each item in Part III			
	Only 501(c)(3) and 501(c)(4) organizations only must $\infty$	omj	plete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section A, line compensation contingent on the revenues of	1 a	, did the organization pay or accrue any			
а	The organization?			5a		No
b	Any related organization?			5b		Νo
	If "Yes," to line 5a or 5b, describe in Part III					
6	For persons listed in Form 990, Part VII, Section A, line compensation contingent on the net earnings of	1 a	, did the organization pay or accrue any			
а	The organization?			6a		No
b	Any related organization?			6b		No
	If "Yes," to line 6a or 6b, describe in Part III					
7	For persons listed in Form 990, Part VII, Section A, line payments not described in lines 5 and 6? If "Yes," described in lines 6 and 6			7		Νo
8	Were any amounts reported in Form 990, Part VII, paid of					
	subject to the initial contract exception described in Reg					
	ın Part III			8		No
9	If "Yes" to line 8, did the organization also follow the reb section 53 $4958-6(c)$ ?	utt	able presumption procedure described in Regulations	9		

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

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

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

(A) Name and Table		(B) D	:W 2 1/ 1 000 MT/		(a) D-t	(D) Nontonolilo	(F) T - b - 1 - 6 1	(F) C	
<b>(A)</b> Name and Title		(ii) Base (iii) Bonus & (iii) Other		(C) Retirement and other deferred	<b>(D)</b> Nontaxable benefits	( <b>E)</b> Total of columns (B)(ı)-(D)	reported as deferred		
		compensation	incentive compensation	reportable compensation	compensation			ın prıor Form 990	
(1)ELIZABETH LEE HEAD OF SCHOOL	(i) (ii)	252,000 0	0 0	229 0	10,085 0	24,000 0	286,314 0	0 0	
(2)JANE GIBSON ASSOCIATE HEAD OF SCHOOL FOR FINANCE AND OPERATIONS	(i) (ii)	133,484 0	0	396 0	13,562 0	8,122 0	155,564 0	0	

Schedule J (Form 990) 2012

#### Part III Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II

Also complete this part for any addition	mai miormation	
Identifier	Return Reference	Explanation
Housing allowance or residence for personal use	Schedule J, Part I, Line 1a	THE HEAD OF SCHOOL IS REQUIRED TO LIVE ON CAMPUS THIS BENEFIT IS CONSIDERED NONTAXABLE PURSUANT TO IRC SECTION 119 AN ESTIMATED VALUE OF THE BENEFIT WAS REPORTED FOR ELIZABETH LEE IN THE AMOUNT OF \$24,000
ARRANGEMENT USED TO ESTABLISH THE TOP MANAGEMENT OFFICIALS COMPENSATION	SCHEDULE J, PART I, LINE 3	COLUMBUS SCHOOL FOR GIRLS CFO PROVIDES THE BOARD OF TRUSTEES COMPENSATION COMMITTEE WITH SALARY INFORMATION FROM THE NATIONAL ASSOCIATION OF INDEPENDENT SCHOOLS (NAIS) ORGANIZATION NAIS PROVIDES HEAD OF SCHOOL SALARY DATA BASED ON NUMEROUS CRITERIA, SUCH SCHOOL ENROLLMENT, AND LOCATION OF THE SCHOOL, SUCH AS MIDWEST, EAST OR WEST COAST THE COMPENSATION COMMITTEE REVIEWS THE NAIS SALARY INFORMATION AND THE HEAD OF SCHOOL ANNUAL AND LONG-TERM GOALS IN ADDITION, THE COMMITTEE CONSIDERS THE APPROVED FACULTY, STAFF, AND ADMINISTRATOR'S SALARY INCREASE APPROVED BY THE BOARD AFTER DISCUSSION, THE COMMITTEE RECOMMENDS A SALARY TO THE BOARD OF TRUSTEES FOR APPROVAL THE BOARD OF TRUSTEES MEETS IN EXECUTIVE SESSION TO DISCUSS AND VOTE ON THE HEAD OF SCHOOL'S COMPENSATION FOR THE NEW SCHOOL YEAR

Schedule J (Form 990) 2012

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DLN: 93493134083614

OMB No 1545-0047

#### Schedule L

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

#### **Transactions with Interested Persons**

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

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

**2012** 

Open to Public Inspection

Name of the orga COLUMBUS SCHOOL									En	ploye	r identi	fication	numbe	r
Part I Exces	s Renet	it Tran	sactions (	section	n 501/	(c)(3) a	nd section 5	501(c)(4) or		-4379				
								5a or 25b, or 1					10b	
1 (a) Name			on <b>(b)</b> Re	lationsl	hıp bet	ween dis	qualified	(c) Descrip					( <b>d)</b> Corr	ected?
				person	and or	ganızatı	on						Yes	No
2 Enter the am	ount of ta	x incurre	d by organiza	ation m	anager	s or disc	ıualıfıed perso	ons during the	yearı	under	section			
4958 <b>3</b> Enter the am	· · · nount of ta	x.ıfanv.	on line 2, ab	• • ove. rei	 ımburs	• • • ed by the	· · · e organization		• •	•	<b>►</b> \$			
			·			·					'			
			rom Inter ation answere				-EZ, Part V , I	ıne 38a, or Fo	rm 99	0, Par	t IV, lın	ne 26, o	rıfthe	
			n amount on			rt X, lıne		1 (4) - 1					T 485.14	
(a) Name of interested person		itionship anization	(c) Purpose of loan	or fro	oan to om the ization?	,	(e)Original principal amount	<b>(f)</b> Balance due		g) In efault? Approved by board o committee		oved ard or	(i)Wr agreer	
				То	F	rom			Yes	No	Yes	No	Yes	No
												+	_	
													<del>-</del> -	
													_	
													_	
otal	•				\$									
			ce Benefit					t IV, line 27.						
(a) Name of inte		(b) Rela	ationship bet ed person ar organization	ween			fassistance	<b>(d)</b> Type o		tance	(e)	Purpos	e of ass	ıstance
1) SEE PART V			A gamzation		9,575									
2) SEE PART V					1,538									
					<b>├</b>									
								•						

Part IV Business Transactions Complete if the organizat			e 28a, 28b, or 28c.		
(a) Name of Interested person	(b) Relationship between interested person and the organization	(c) A mount of transaction	(d) Description of transaction	(e) Sh of organiz reven	t zation's
				Yes	No
(1) AMERICAN ELECTRIC POWER	BRIAN TIERNEY, BOARD MEMBER, SERVE AS AN OFFICER OF AEP	225,813	UTILITIES		No

#### Part V Supplemental Information

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

Identifier	Return Reference	Explanation
GRANTS OR ASSISTANCE BENEFITING INTERESTED PERSONS	(C)	COLUMBUS SCHOOL FOR GIRLS OFFERS A 25% 3RD AND 4TH CHILD DISCOUNT ON TUITION AND A LUNCH CREDIT FOR CHILDREN WHO HAVE TO BRING THEIR OWN LUNCH FOR SPECIAL DIET NEEDS THAT THE CAFETERIA MAY NOT OFFER CURRENTLY \$9,575 OF DISCOUNTED TUITION AND \$1,538 OF LUNCH CREDIT ARE BEING RECEIVED BY FAMILY MEMBERS OF INTERESTED PERSONS

Schedule L (Form 990 or 990-EZ) 2012

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#### **SCHEDULE M** (Form 990)

Department of the Treasury

Internal Revenue Service

# **Noncash Contributions**

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

Name of the organization COLUMBUS SCHOOL FOR GIRLS

**Employer identification number** 

31-4379452

Pa	rt I Types of Property							
		(a) Check If applicable	<b>(b)</b> Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line	<b>(d</b> Method of d noncash contrib	etermı	_	ts
1	Art—Works of art			19				
	Art—Historical treasures .							
	Art—Fractional interests							
	Books and publications							
	Clothing and household							
	goods							
	Cars and other vehicles							
	Boats and planes							
	Intellectual property							
	Securities—Publicly traded . Securities—Closely held stock .							
	Securities—Partnership, LLC,							
11	or trust interests							
12	Securities—Miscellaneous							
13	Qualified conservation contribution—Historic structures							
14	Qualified conservation contribution—Other							
15	Real estate—Residential .							
	Real estate—Commercial							
	Real estate—Other							
	Collectibles							
	Food inventory							
20	Drugs and medical supplies .							
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts							
	6 PANEL ALUMINUM							
25	Other ► (DOORS)	X	4	30,000	COST			
	Other►( )			·				
27	Other ► ()							
28	O ther ▶ ()							
29	Number of Forms 8283 received							
	for which the organization comple	eted Form 8	283, Part IV, Donee Acknowledge	owledgement [	29			0
20-	. D the did the				1 20 16-14		Yes	No
3Ua	During the year, did the organiza							
	must hold for at least three year			on, and which is not require	a to be usea			
	for exempt purposes for the enti					30a		No
	If "Yes," describe the arrangem					34	\ <sub>\ \ \ \</sub> =	
31	Does the organization have a gif					31	Yes	
32a	Does the organization hire or us contributions?	e third part	ies or related organizations	to solicit, process, or sell	noncasn • • •	32a		No
b	If "Yes," describe in Part II							
33	If the organization did not report	t an amount	in column (c) for a type of	property for which column (	a) is checked,			
	describe in Part II							

**Supplemental Information.** Complete this part to provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

Identifier	Return Reference			Explana	ation	
Explanations of reporting method for number of contributions	Schedule M, Part I	OTHER N	UMBER OF	ITEMS REC	CEIVED	
	Schedule M, part I, column (b), Line other=6 PANEL ALUMINUM DOORS		OF ITEMS R	ECEIVED		

Schedule M (Form 990) (2012)

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#### DLN: 93493134083614

#### **SCHEDULE 0** (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

# Supplemental Information to Form 990 or 990-EZ

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

Inspection

Name of the organization COLUMBUS SCHOOL FOR GIRLS

**Employer identification number** 

31-4379452

ldentifier	Return Reference	Explanation
ORGANIZATION'S MISSION	FORM 990, PART III, LINE 1	
Review of form 990 by governing body	Form 990, Part VI, Section B, Line 11b	CROWE HORWATH, INDEPENDENT ACCOUNTING FIRM, WILL PRESENT THE 990 TO COLUMBUS SCHOOL FOR GIRLS FINANCE COMMITTEE ON MARCH 12, 2014 THE BOARD OF TRUSTEES FINANCE COMMITTEE CHAIR WILL PRESENT TO THE EXECUTIVE AND BOARD OF TRUSTESS AT THEIR RESPECTIVE MEETINGS IN APRIL, 20
Conflict of interest policy	Form 990, Part VI, Section B, Line 12c	ALL BOARD MEMBERS ANNUALLY COMPLETE A CONFIDENTIALITY/CONFLICT OF INTEREST STATEMENT IF A CONFLICT ARISES, IT IS NOTED AND REVIEWED BY THE BOARD TO DETERMINE IF ANY ACTION NEEDS T O BE TAKEN INDIVIDUALS WITH CONFLICTS ABSTAIN FROM VOTING ON SUCH MATTERS
Process used to establish compensation of top management official	Form 990, Part VI, Section B, Line 15a	COLUMBUS SCHOOL FOR GIRLS CFO PROVIDES THE BOARD OF TRUSTEES COMPENSATION COMMITTEE WITH S ALARY INFORMATION FROM THE NATIONAL ASSOCIATION OF INDEPENDENT SCHOOLS (NAIS) ORGANIZATION NAIS PROVIDES HEAD OF SCHOOL SALARY DATA BASED ON NUMEROUS CRITERIA, SUCH SCHOOL ENROLLM ENT, AND LOCATION OF THE SCHOOL, SUCH AS MIDWEST, EAST OR WEST COAST THE COMPENSATION COM MITTEE REVIEWS THE NAIS SALARY INFORMATION AND THE HEAD OF SCHOOL ANNUAL AND LONG-TERM GOA LS IN ADDITION, THE COMMITTEE CONSIDERS THE APPROVED FACULTY, STAFF, AND ADMINISTRATOR'S SALARY INCREASE APPROVED BY THE BOARD AFTER DISCUSSION, THE COMMITTEE RECOMMENDS A SALARY TO THE BOARD OF TRUSTEES FOR APPROVAL THE BOARD OF TRUSTEES MEETS IN EXECUTIVE SESSION T O DISCUSS AND VOTE ON THE HEAD OF SCHOOL'S COMPENSATION FOR THE NEW SCHOOL YEAR THIS IS D OCUMENTED IN THE BOARD MINUTES AND IS CONDUCTED ANNUALLY
Process used to establish compensation of other officers/key employees	Form 990, Part VI, Section B, Line 15b	OFFICERS COMPENSATION IS BASED ON AN ANNUAL SALARY INCREASE APPROVED EACH YEAR BY THE BOAR D OF TRUSTEES THE SALARY INCREASE IS PART OF THE SCHOOL'S BUDGET PROCESS THIS IS DOCUMEN TED IN THE BOARD MINUTES AND IS CONDUCTED ANNUALLY AS WITH THE HEAD OF SCHOOL'S COMPENSAT ION, CSG'S OFFICER'S SALARY ARE REVIEWED PER THE GUIDELINES EASTABLISHED WITH NATIONAL ASS OCIATION OF INDEPENDENT SCHOOLS (NAIS) NAIS HAS SALARY INFORMATION BASED ON SCHOOL ENROLL MENT, AND REGION OF THE COUNTRY
Governing documents, conflict of interest policy and financial statements available to the public	Form 990, Part VI, Section C, Line 19	FINANCIAL STATEMENTS, GOVERNING DOCUMENTS, AND CONFLICT OF INTEREST POLICIES ARE NOT REQUIRED DISCLOSURES PURSUANT TO INTERNAL REVENUE CODE (IRC) SECTION 6104 THESE DOCUMENTS ARE NOT AVAILABLE TO THE PUBLIC
Other changes in net assets or fund balances	Form 990 , Part XI, Line 9	CHANGE IN VALUE OF SPLIT INTEREST17122, FMV OF INTEREST RATE SWAP - 19630,

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2012

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# **SCHEDULE R** (Form 990)

Department of the Treasury

Internal Revenue Service

**Related Organizations and Unrelated Partnerships** 

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

Name of the organization COLUMBUS SCHOOL FOR GIRLS **Employer identification number** 31-4379452

(a)	(b)	(c)	(d)	(e)		(f)		
Name, address, and EIN (if applicable) of disregarded entity	Primary activity	Legal domicile (state or foreign country)		End-of-year assets	D	Direct controlling entity		
		or foleigh country)				entity		
Part II Identification of Related Tax-Exempt Orgon more related tax-exempt organizations duri	ganizations (Complete in ng the tax year.)	f the organization a	inswered "Yes"	to Form 990, P	art IV,	line 34 because it	had or	ne
(a)	(b)	(c)	(d)	(e)		(f)	(9	g)
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign country)	Exempt Code section	Public charity (if section 501)		Direct controlling entity	Section (13) co ent	
							Yes	No
(1) ALUMNAE ASSOCIATION OF THE CSG	SUPPORT CSG	ОН	501(C)(3)	Type II		NA	Yes	
56 SOUTH COLUMBIA AVENUE								
COLUMBUS, OH 43209								
								<del> </del>

(a) Name, address, and EIN o related organization	f	<b>(b)</b> Primary activit	(c) Legal domicile (state or foreign country)	entity	(e) Predominant Income(related, unrelated, excluded from tax under sections 512-	(f) Share of total income	(g) Share of end-of-yea assets	(h Disprop r allocat	ortionate	(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	mana part	ral or	(k) Percenta ownersh
					514)			Yes	No		Yes	No	
V Identification of Related Or line 34 because it had one or r	ganizations Taxa nore related organi	ble as a Corpo	ration is a cor	or Trust ( poration or	Complete if trust during	the organı the tax ye	zatıon ar ar.)	iswere	d "Ye	s" to Form	990,	Part	:IV,
(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)		(d) Direct controll entity	(e) Type of enti (C corp, S corp, or trust)		total Share e of	(g) e of end- year ssets		<b>(h)</b> ercentage wnership	Section (b) conti	(13)	
											Yes		No

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule				Ye	s No
<b>1</b> During the tax year, did the organization engage in any of the following transactions with one	or more related organizations	listed in Parts II-IV?			
a Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity				1a	No
<b>b</b> Gift, grant, or capital contribution to related organization(s)				1b	No
<b>c</b> Gift, grant, or capital contribution from related organization(s)				1c Ye	s
<b>d</b> Loans or loan guarantees to or for related organization(s)				1d	No
e Loans or loan guarantees by related organization(s)				1e	No
f Dividends from related organization(s)				1f	No
g Sale of assets to related organization(s)				1g	No
h Purchase of assets from related organization(s)				1h	No
i Exchange of assets with related organization(s)				1i	No
j Lease of facilities, equipment, or other assets to related organization(s)				1j	No
${f k}$ Lease of facilities, equipment, or other assets from related organization(s)				1k	No
I Performance of services or membership or fundraising solicitations for related organization(	(s)			11	No
<b>m</b> Performance of services or membership or fundraising solicitations by related organization(	s)			1m	No
$oldsymbol{n}$ Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)				1n	No
• Sharing of paid employees with related organization(s)				10	No
p Reimbursement paid to related organization(s) for expenses				1p	No
<b>q</b> Reimbursement paid by related organization(s) for expenses				1q	No
r Other transfer of cash or property to related organization(s)				1r	No
<b>s</b> Other transfer of cash or property from related organization(s)				1s	No
To be a second as a second					
2 If the answer to any of the above is "Yes," see the instructions for information on who must  (a)	(b)	(c)	(d)		
Name of other organization	Transaction type (a-s)	Amount involved	Method of determining amo	unt ınvol	ved

Part V Transactions With Related Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34, 35b, or 36.)

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

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross)

revenue) that was not a related organization See instructions re	garding exclu	sion for ce		nent	partnerships				`	,		_	
<b>(a)</b> Name, address, and EIN of entity	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under section 512- 514)	org	(e) all partners section 501(c)(3) anizations?	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtiona allocations?		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
			514)	Yes	No			Yes	No		Yes	No	
												1	

**Additional Data Return to Form** 

**Software ID:** 12000266

**Software Version:** v2012.1.0

**EIN:** 31-4379452

Name: COLUMBUS SCHOOL FOR GIRLS

Schedule R (Form 990) 2012

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### Part VII Supplemental Information

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