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Department of the Treasury Internal Revenue Service

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

OMB No 1545-0047

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

Open to Public Inspection

AI	or the	2012 calendar year, or tax year beginning JUL 1, 2012 and ending	JUN 30, 2013	
_	Check if	C Name of organization	D Employer identific	ation number
a	pplicable			
	Addres			
一	Name change		91-16	77685
7	Initial	Number and street (or P.O. box if mail is not delivered to street address) Room/su		
늗	ireturn iTermin			574-5752
늗	∟ated ∏Amend			1,145,778.
H	∐return ∏Applica	City, town, or post office, state, and ZIP code VANCOUVER, WA 98686-1843	G Gross receipts \$	
_	⊥ltión pendin		H(a) Is this a group ref	Yes X No
		F Name and address of principal officer:MARK MCGOUGH	for affiliates?	
		SAME AS C ABOVE	H(b) Are all affiliates incl	
		M 91 91 11 11 11 11 11 11 11 11 11 11 11		ist (see instructions)
		e: WWW.GARDNERSCHOOL.ORG	H(c) Group exemption	
			ear of formation: 1995 M	State of legal domicile: WA
P	art I	Summary		
ø	1	Briefly describe the organization's mission or most significant activities SEE SCHEI	DOPE O	
Æ.	ļ.,			
E	2	Check this box 🕨 🔲 if the organization discontinued its operations or disposed of m	ore than 25% of its net as	
€.§	3	Number of voting members of the governing body (Part VI, line 1a)	3	8
<u>ടെ</u>	4	Number of independent voting members of the governing body (Part VI, line 1b)	4	8
es(5	Total number of individuals employed in calendar year 2012 (Part V, line 2a)	5	26
3	6	Total number of volunteers (estimate if necessary)	6	100
===	7 a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
മ്	b	Net unrelated business taxable income from Form 990-T, line 34	7b	0.
RECANNED Activities & Googhance			Prior Year	Current Year
Z.	8	Contributions and grants (Part VIII, line 1h)	85,443.	108,487.
2		Program service revenue (Part VIII, line 2g)	965,358.	1,009,072.
\$		Investment income (Part VIII, column (A), lines 3, 4, and 7d)	42.	39.
¥		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	-7,494.	-23,113.
	h .	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	1,043,349.	1,094,485.
	$\overline{}$	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	74,498.	128,398.
		Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
(0	1	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	673,052.	677,211.
Se	162	Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
Expenses	h	Total fundraising expenses (Part IX, column (D), line 25)		
찣	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	353,411.	307,670.
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	1,100,961.	1,113,279.
		The second secon	-57,612.	-18,794.
<u></u> 8	19	1 + 1 1 (In 1 (In 1) 1 1 1 1 1 1 1 1 1	Beginning of Current Year	End of Year
t Assets or			711,997.	288,455.
SSe	20	Total associa (Fair X, Into To)	680,024.	292,231.
<u>e</u>	21	Loren manufacture (mind and m		-3,776.
	22	Net assets or fund balances. Subtract line 21 from line 20	h 31,373.	-3,110.
	art II		<u> </u>	. Iva a vida da a a a di babata di a
		alties of perjury, I declare that I have examined this return, including accompanying schedules and sta	-	y knowledge and beller, it is
tru	e, correc	ct, and complete. Declaration of preparer (other than officer) is based on all information of which prep	arer has any knowledge.	
		Signature of officer	1 3/13/17	
Sig	-	[*	Date	
He	re	MARK MCGOUGH, HEAD OF SCHOOL Type or print name and title		
_			I Data	II DTW
_		Print/Type preparer's name Preparer's signature	Date Check	PTIN
Pa		YEE LEE LO	500 petit-employe	P01294356
	eparer	Firm's name GARY MCGEE & CO. LLP	Firm's EIN	
Us	e Only	Firm's address 808 S.W. THIRD AVENUE, SUITE 700		FARL 555
_		PORTLAND, OR 97204	Phone no. (<u>503) 222-2515</u>
Ma	y the I	RS discuss this return with the preparer shown above? (see instructions)		Yes No
232	001 12-	10-12 LHA For Paperwork Reduction Act Notice, see the separate instructions.		Form 990 (2012)

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Form 990 (2012) THE GARDNER
Part IV Checklist of Required Schedules

		T	. 1	
			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	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			х
_	public office? If "Yes," complete Schedule C, Part I	3		
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			Х
_	during the tax year? If "Yes," complete Schedule C, Part II Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	4		
5	significant a section 50 f(c)(4), 50 f(c)(5), or 50 f(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to	-		
6	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	-		
•	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
•	Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for			
_	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	Х	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, 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	Х	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			l
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		Х
С	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		X
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	441		x
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	-	X
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		<u> </u>
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		х
100	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	1 11	-	
124	Schedule D, Parts XI and XII	12a		x
h	Was the organization included in consolidated, independent audited financial statements for the tax year?	124		 -
_	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	X	
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
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	<u> </u>	Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization			
	or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15	<u> </u>	Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals			٠,,
	located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16	 	X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			x
10	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17	-	 ^
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	X	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	- ''^	 ^	
	complete Schedule G, Part III	19		х
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a	<u> </u>	X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	T -	
			000	(2012)

Form 990 (2012) THE GARDNER SCHOOL
Part IV Checklist of Required Schedules (continued)

				<u> </u>
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the		Yes	No
21	United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		Х
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX,			
	column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	х	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		Х
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		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
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		X
þ	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			v
	Schedule L, Part I	25b		X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified			х
27	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial	26		
21	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member	.		
	of any of these persons? If "Yes," complete Schedule L, Part III	27		х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		Х
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Х	L
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			.
	If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	20		х
33	Schedule N, Part II Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	32		<u> </u>
33	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
•	Part V, line 1	34		х
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37	<u> </u>	X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	1		
	Note. All Form 990 filers are required to complete Schedule O	38	X	<u> </u>
		Form	990	(2012)

The Enter the number reported in Box 3 of Form 1096. Enter 0 if not applicable Enter the number of Forms W-25 included in line 1a. Enter 0 if not applicable Enter the number of Forms W-25 included in line 1a. Enter 0 if not applicable Enter the number of Forms W-25 included in line 1a. Enter 0 if not applicable Enter the number of employees reported on Form W-3. Transmittal of Wage and Tax Statements, filed for the calendrary year ending with or within the year covered by this return 26 biff at least one is reported on line 2a, did the organization file of the calendrary year ending with or within the year covered by this return 27 Note. If the sum of fines 1 and 2a is greater than 250, you may be required to 6-file file in internations of the organization in the year covered by this return 28 Enter the number of employees reported on line 2a, did the organization file for the year? If V-70 involved an explenation in Schedule O 38 Did the organization have unrelated business gross income of \$1,000 or more duming the year? 39 Did the organization than the value of the good and a start of the foreign country. 30 Enter the number of employees reported on the organization than the analysis of the properties authority over, a financial account in a foreign country (such as a shark account, securities account, or other financial account)? 30 Enter the number of the foreign country. 31 Enter the number of the foreign country. 32 Enter the number of the foreign country. 33 Enter the number of the foreign country. 34 Enter the number of the foreign country. 35 Enter the number of the foreign country. 36 Enter the number of the foreign country. 37 Enter the number of the foreign country. 38 Enter the number of the organization file form 88807? 39 Enter the number of the organization file form 88807? 40 If Y'es, "Indeate the number of the done of the value of the goods and services provided to the payor? 41 If Yes, and the organization number with the done of the value of the goods of services provid		Check if Schedule O contains a response to any question in this Part V			
to Enter the number expond or 16 xs 3 of Form 1096. Enter 0-fl not applicable be first the number of Forms W32 included in the 1.5 flat - 4.1 of the applicable contribution of the provided of the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambing) within provided to the calendar year ending with or within the year covered by this return. 25 Enter the number of employees reported on Form W3. Transmittal of Wage and Tax Statements, field for the calendar year ending with or within the year covered by this return. 26 If all teads on it is reported on line 28, did the organization fleal required federal employment tax returns? Note. If the sum of lines 1s and 2 is greater than 250, you may be required to e-file (see instructions). 38 Did the organization have unreaded business greaters than 250, you may be required to e-file (see instructions). 39 Did the organization have the year? If 'No. provide an explanation in Schedule O. 40 At any time during the calendar year, did the organization have an interest in, or a spatiative or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial accounts. 50 Was the organization apply to a prohibetid stax whether transaction at any time during the tax year? 51 If 'Yes,' to line 5a or 5b, did the organization file Form 8861? 52 Was the organization have annual goes receipts that are normally greater than \$100,000, and did the organization solicid any excepts that were not tax deductible as charitable contributions? 53 If 'Yes,' to line 5a or 5b, did the organization file Form 8861? 54 Organizations that may receive deductible as charitable contributions? 55 If 'Yes,' and did organization include with veryes solicitation an explanation and partly for goods and services provided to the form 8820? 65 Organization and the required property of the value of the goods or services provided? 66 If 'Yes,' and did the organization received d				Voc	No
b Enter the number of Forms W/2G included in line 1a. Enter 0-4 rind applicable of Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming gambling) wrinings to prize winners? 2a Enter the number of employees reported on Form W3. Transmittal of Wage and Tax Statements. Lead or the calendary ser ending with or within the year covered by this return b If at least one is reported on line 2a, did the organization life all required federal employment tax returns? Note. If the sum of lines 1 and 2 as greater than 250, you may be required to e-fife (see instructions) 3a Dot the organization have unrelated business gross income of \$1.000 or more during the year? 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account; 10 the organization or bound to the state of the organization have an interest in, or a signature or other authority over, a financial account; 2 the state of the organization in bank account, securities account, or other financial account; 2 the state of the organization or form 17 the 30-21, Report of Foreign Bank and Financial Accounts. 5a Was the organization party to a prohibited tax shelter transaction at any time during the tax year? 5b Was the organization party to a prohibited tax shelter transaction at any time during the tax year? 5c Was the organization have annual gross receipts that are normally greater than \$100,000, and did the organization select any contributions that were not tax deductible for form 88617. 6b Dose the organization have annual gross receipts that are normally greater than \$100,000, and did the organization select any contributions that were not tax deductible for form 88617. 7b Organizations that may receive deductible contributions under section 170(c). 6c Dot the organization sell-accounts of the value of the goods or services provided? 7c Dot the organization receive a spirment recess of \$15 made party as a cont	10	Enter the number reported in Box 3 of Form 1006. Enter Out applicable		163	140
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) withings to prize with the property of the pro					
a Enter the number of employees reported on Form W.3. Transmittal of Wage and Tax Statements. 1					
2a Enter the number of employees reported on Form W3, Transmittal of Wage and Tax Statements, titled for the calendar year ending with or within the year covered by this return 1 if it least one is reported on line 2a, and the organization file all required federal employment tax returns? Note. If the sum of lines 1 and 2a is a greater than 250, you may be required to e-file (see instructions) 2 bit 1 Yes, 1 has it filed a Form 990-T for this year? If 1 No., Proude an explanation in Schedule 0 3 bit at least out in a foreign country (such as a bank account, securities account, or other financial account) in a foreign country (such as a bank account, securities account, or other financial account). 5 bit 1 Yes, 1 has it filed a Form 990-T for this year? If 1 No., Proude an explanation in Schedule 0 5 bit 1 Yes, 1 has the filed a Form 990-T for this year? If 1 No., Proude an explanation in Schedule 0 5 bit 1 Yes, 1 has the filed a Form 990-T for this year? If 1 No., Proude an explanation in Schedule 0 5 bit 1 Yes, 1 has the filed a Form 990-T for this year? If 1 No., Proude an explanation in Schedule 0 5 bit 1 Yes, 1 has the filed a Form 990-T for this year? If 1 No., Proude an explanation in Schedule 0 5 bit 1 Yes, 1 has the filed a Form 990-T for this year? If 1 No., Proude an explanation in Schedule 0 5 bit 1 Yes, 1 has the filed a Form 990-T for Foreign Bank and Financial Accounts. 5 a Was the organization as party to a prohibited tax shelter transaction at any time during the tax year? 5 bit 1 Yes, 1 has the proper year of the organization and the was the say party to a prohibited tax shelter transaction at any contributions or party to a prohibited tax shelter transaction at any contributions or gifts were not tax deductible? 6 bit 1 Yes, 1 dut the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 7 bit 1 Yes, 2 has the degralization transaction include with every solicitation an express statement that such contributio	C		4.		
the for the calendary year ending with or within the year covered by this return Note. If the sum of lines 1s and 2a is greater than 250, you may be required to e-file (see instructions) Note. If the sum of lines 1s and 2a is greater than 250, you may be required to e-file (see instructions) 13 bit the sum of lines 1s and 2a is greater than 250, you may be required to e-file (see instructions) 14 bit 1 lines 1 lin	0-		10		
b if at least one is reported on ine 2a, dut the organization file all required federal employment tax returns? 3a Did the organization have unrelated business gross income of \$1.000 or more during the year? 3a IV ** 3b IV ** 3a IV ** 3a IV ** 3b IV ** 3a IV ** 3b IV ** 3a IV ** 3a IV ** 3b IV ** 3a IV ** 3a IV ** 3b IV ** 3b IV ** 3a IV ** 3b IV ** 3b IV ** 3a IV ** 3b IV ** 3a IV ** 3b IV ** 3b IV ** 3b IV ** 3b IV ** 3c IV	2a				
Note. If the sum of lines 1a and 2a is greater than 250, you may be required to 4-file (see instructions) 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, or other financial account)? b if "Yes," enter the name of the foreign country; ▶ See instructions for filing requirements for Form TD F 90.22.1, Report of Foreign Bank and Financial Accounts. 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5b If Yes," on line 5a of 5b, of the organization in fer form 8896.1? 6b Does the organization a party to a prohibited tax shelter transaction? 6c 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 chartable contributions? 6c Does the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible as chartable contributions? 6c Does the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 7 Organizations that may receive deductible contributions under section 170(c). 8 If Yes, indicate the number of Forms 8282 filled during the year. 9 Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? 1 Did the organization, during the year, pay premiums on a personal benefit contract? 1 Press, indicate the number of Forms 8282 filled during the year. 9 Did the organization maintaining door advised funds and section 59(8)(3) supporting organizations. Did the supporting N/A any parameter of a contribution of cars, boats, anjenies, or other vehicles, did the organizations. Did the parameter of the supporting N/A			0 L	v	
3a	D		20	-	
b If "Yes," has it field a Form 990-T for this year? If "No," provide an explanation in Schedule O 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other hinancial account)? b If "Yes," enter the name of the foreign country: \(\) See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. If "Yes," to line 5a or 5b, did the organization file for every filing filin	0-		2.		¥
4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account; in a foreign country (such as a bank account, securities account, or other financial accounts. 5 li 1'Yes,' enter the name of the foreign country: \(\) 5 see instructions for filing requirements for Form TD F90:21, Report of Foreign Bank and Financial Accounts. 5 a Was the organization party to a prohibited tax shelter transaction at any time during the tax year? 5 bid any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5 c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T? 6 a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization sloict any contributions that were not tax deductible as charitable contributions? 6 bif 'Yes,' to dif the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 7 bif 'Yes,' did the organization include with every solicitation and express statement that such contributions or gifts were not tax deductible? 8 bif 'Yes,' did the organization include with every solicitation and express statement that such contributions or gifts were not tax deductible? 9 c Did the organizations that may receive deductible contributions under section 170(c). 10 bid the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? 10 bid the organization receive a payment in excess of \$75 made partly as a contribution of the goods or services provided? 11 bid the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 12 bid the organization entire organization in fundation, during the year, pay premiums, directly or indirectly, to pay premiums on a personal benefit contract? 12 bid the organization received a contribution of quali					
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f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? g If the organization received a contribution of qualified intellectual property, did the organization file a Form 1098-C? h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting N/A organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year? 9 Sponsoring organizations maintaining donor advised funds. a Did the organization make any taxable distributions under section 4966? b Did the organization make a distribution to a donor, donor adviser, or related person? 10 Section 501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on Part VIII, line 12 b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 11 Section 501(c)(12) organizations. Enter: a Gross income from members or shareholders b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 1 Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? N/A Note. See the instructions for additional information the organization must report on Schedule O. b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans c Enter the amount of reserves on hand		· · · · · · · · · · · · · · · · · · ·	70		x
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organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year? 9	_	· · · · · · · · · · · · · · · · · · ·			
9 Sponsoring organizations maintaining donor advised funds. a Did the organization make any taxable distributions under section 4966? b Did the organization make a distribution to a donor, donor advisor, or related person? Section 501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on Part VIII, line 12 b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b Section 501(c)(12) organizations. Enter: a Gross income from members or shareholders b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? b If "Yes," enter the amount of tax-exempt interest received or accrued during the year N/A 12b Section 501(c)(29) qualified nonprofit health insurance issuers. a 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. b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans c Enter the amount of reserves on hand 13b			8		
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Initiation fees and capital contributions included on Part VIII, line 12 N/A 10a		27/2			
a Initiation fees and capital contributions included on Part VIII, line 12 N/A 10a 10b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b 10b 11 Section 501(c)(12) organizations. Enter: a Gross income from members or shareholders N/A 11a 1b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 11b 11b 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? If "Yes," enter the amount of tax-exempt interest received or accrued during the year N/A 12b 12b 13 Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? N/A 13a Note. See the instructions for additional information the organization must report on Schedule O. b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans 13b 13c 14a Note organization receive any payments for indoor tanning services during the tax year?					
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Note. See the instructions for additional information the organization must report on Schedule O. b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans c Enter the amount of reserves on hand 13b 13c 14a X	13				<u> </u>
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organization is licensed to issue qualified health plans c Enter the amount of reserves on hand 13c 14a Did the organization receive any payments for indoor tanning services during the tax year? 14a X		Note. See the instructions for additional information the organization must report on Schedule O.			
c Enter the amount of reserves on hand 13c 14a Did the organization receive any payments for indoor tanning services during the tax year? 14a X	b	Enter the amount of reserves the organization is required to maintain by the states in which the			
14a Did the organization receive any payments for indoor tanning services during the tax year?		organization is licensed to issue qualified health plans			
	С	Enter the amount of reserves on hand			
b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
	<u>b</u>	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		

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

	Check if Schedule O contains a response to any question in this Part VI		· -·			X					
sec	tion A. Governing Body and Management				1						
		1.	ı	۰	Yes	No					
1a	Enter the number of voting members of the governing body at the end of the tax year	1a		8							
	If there are material differences in voting rights among members of the governing body, or if the governing	1									
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.	l									
b	Enter the number of voting members included in line 1a, above, who are independent	1b	<u> </u>	8							
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationsh	ip with	any other			v					
	officer, director, trustee, or key employee?			2		X					
3	Did the organization delegate control over management duties customarily performed by or under the	ne dire	ct supervision			v					
	of officers, directors, or trustees, or key employees to a management company or other person?	000	(110	3		X					
4	Did the organization make any significant changes to its governing documents since the prior Form		as filed?	4		X					
5	Did the organization become aware during the year of a significant diversion of the organization's as	sets?		<u>5</u>		X					
6	- Did the organization have made at a constitution of the constitu										
7a	Did the organization have members, stockholders, or other persons who had the power to elect or a	ıppoını	one or			х					
	more members of the governing body?	-41-1		7a							
þ	Are any governance decisions of the organization reserved to (or subject to approval by) members,	STOCKI	oluers, or			х					
_	persons other than the governing body?	or bu H	io following:	7b							
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year.	מו שאַ (ו	is runowing.		χ̈						
a	The governing body?			8a	X	<u> </u>					
b	Each committee with authority to act on behalf of the governing body?		-4.46 -	8b	Λ						
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be re	acned	at the	9	1	x					
800	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	Povonu	o Codo I	1 9		<u> </u>					
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal F	ieveriu	e Code.)		Yes	No					
10-	Did the organization have local chapters, branches, or affiliates?			10a	162	X					
	If "Yes," did the organization have written policies and procedures governing the activities of such	rhanto	re affiliatos	104							
D	and branches to ensure their operations are consistent with the organization's exempt purposes?										
112	·	dv bef	ore filing the form?	10b 11a		x					
b	Description of the control of the co										
12a				12a	х						
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give ris	e to co	iflicts?	12b	X						
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "			1.22		_					
·	in Schedule O how this was done	,		12c	Х						
13	Did the organization have a written whistleblower policy?			13	х	\vdash					
14	Did the organization have a written document retention and destruction policy?			14		Х					
15	Did the process for determining compensation of the following persons include a review and appro-	val by i	ndependent								
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision		•								
а	The organization's CEO, Executive Director, or top management official			15a	Х						
b	Other officers or key employees of the organization			15b		X					
_	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).										
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrange	ement	with a								
	taxable entity during the year?			16a		X					
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evalu	ate its	participation								
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the org	anızatı	on's		1						
	exempt status with respect to such arrangements?			16b							
Sec	tion C. Disclosure										
17	List the states with which a copy of this Form 990 is required to be filed ►WA										
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990	-T (Sec	tion 501(c)(3)s only) avaılal	ole						
	for public inspection. Indicate how you made these available. Check all that apply.										
	Own website Another's website X Upon request Other (explain	n ın Sc	hedule O)								
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, or	conflict	of interest policy,	and fina	ncıal						
	statements available to the public during the tax year.										
20	State the name, physical address, and telephone number of the person who possesses the books THE GARDNER SCHOOL $-360-574-5752$	and re	cords of the organi	zation:	-						
	16413 NE 50TH AVENUE, VANCOUVER, WA 98686-1843										

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

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

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

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

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

(A) Name and Title	(B) Average hours per week	box	not c , unle	ss pe	ition more rson	than is bot or/trus	han	(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) KAYOKO BARNHILL	3.00									
BOARD MEMBER		X				İ		0.	0.	0
(2) KRISTA DAVIS	3.00									_
BOARD MEMBER		X						0.	0.	0
(3) RICHARD BERNHEIMER	3.00									
BOARD MEMBER		Х						0.	0.	0
(4) JUBAL INCE	3.00							_	_	
BOARD MEMBER		Х						0.	0.	0
(5) CHUCK SWANSON	3.00	ļ						_	_	_
BOARD MEMBER		X	ļ	<u> </u>		<u> </u>	Ш	0.	0.	0
(6) JANE TRAFFALIS	3.00	↓						_	_	
BOARD MEMBER		X					L.	0.	0.	0
(7) MATT WOOD	3.00	l								
BOARD MEMBER		Х				1		0.	0.	0
(8) ANDY FIELDS	20.00	 		l				•	_	_
CHAIR		Х	<u> </u>	Х		<u> </u>		0.	0.	0
(9) WIM GEURDEN	5.00	ļ		l				•		_
FINANCE CHAIR	40.00	Х	┞	Х	lacksquare	_	igspace	0.	0.	0
(10) MARK MCGOUGH	40.00		ŀ	l	1			00 456		
HEAD OF SCHOOL		_	 	Х				83,456.	0.	5,773
		-	-	_	-	\vdash				
		1_	<u> </u>	_	_					
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Fai	Section A. Officers, Directors, Trus	tees, Key Em	ploy	ees	, and	d Hi	ghe	st C	Compensated Employe	es (continued)						
	(A)	(C)						(D)	(E)	(E)						
	Name and title	Average	Position (do not check more than one					one	Reportable	Reportable		Es	timate	ed		
		hours per	box	, unle	ss pe	rson	is bot	h an	compensation	compensation	n	amount o				
		week		cerar	u a d	recto	or/trus	ree)	from	from related		other				
		(list any hours for	recto						the	organization			pensa			
		related	ē	8			ated		organization	(W-2/1099-MIS	3C)		om th			
		organizations	Individual trustee or director	Institutional trustee		9	Highest compensated employee		(W-2/1099-MISC)			_	anizat			
		below	ual tr	non		Кеу етріоуее	rt con						d relat anızatı			
		line)	pwipt	strtu	Officer	ey em	mples	Former				org.	21112411	UIIS		
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	-															
1h	Sub-total	ı	<u> </u>	1		1	_	·	83,456.		0.		5,7	73.		
	Total from continuation sheets to Part VI	I Section A							0.		0.		<u> </u>	0.		
	Total (add lines 1b and 1c)	i, section A							83,456.	- · · · · · · · · · · · · · · · · · · ·	0.		5,7			
<u>u</u>	Total number of individuals (including but n	at limited to the		linte		bass	2) 111	<u> </u>	·	000 of resemble			5,,	, , ,		
2		or inflited to tr	iose	เมรเ	eu a	DOV	e) wi	no r	eceived more than \$100	,000 or reportab	ie			(
	compensation from the organization				-								Yes	No		
_	Delth a second of the second o								12.1		ı	Γ	162	140		
3	Did the organization list any former officer,			е, ке	ey er	npic	oyee	, or	nignest compensated e	mployee on		_		37		
_	line 1a? If "Yes," complete Schedule J for s											_3_		_X		
4	For any individual listed on line 1a, is the su									the organization		1		-:		
	and related organizations greater than \$150											4		X		
5	Did any person listed on line 1a receive or a							relat	ted organization or indiv	idual for services		1				
	rendered to the organization? If "Yes," com	plete Schedul	e <i>J f</i>	or s	uch	pers	son					_ 5		_X		
Sec	tion B. Independent Contractors													_		
1	Complete this table for your five highest co										npens	ation	from			
	the organization. Report compensation for	the calendar y	ear	end	ng v	vith	or w	/ithi	n the organization's tax	year.						
	(A)			_					(B)				C)			
	Name and business	address	N	INC	<u> </u>			_	Description of s	ervices		ompe	nsatio	n		
										_						
										-			-			
								\neg								
								一						_		
2	Total number of independent contractors (i	ncludina but n	ot li	mite	d to	tho	ال مع	ster	d above) who received n	nore than						
_	\$100,000 of compensation from the organi		"		0		0	J.00	010, 1110 10001460 11	ioi C diail						

THE GARDNER SCHOOL OF ARTS AND SCIENCES 91-1677685 Form 990 (2012) Page 9 Part VIII Statement of Revenue Check if Schedule O contains a response to any question in this Part VIII (B) (C) (D) Revenue excluded Total revenue Related or Unrelated from tax under sections 512, 513, or 514 exempt function business revenue revenue Contributions, Gifts, Grants and Other Similar Amounts 1 a Federated campaigns 1a **b** Membership dues 1b 75,614 1c c Fundraising events d Related organizations 1d e Government grants (contributions) 1e f All other contributions, gifts, grants, and 32,873 similar amounts not included above 1f 30,491 g Noncash contributions included in lines 1a-1f \$ 108,487. h Total. Add lines 1a-1f Business Code 955,873. 955,873 TUITION 611600 Program Service Revenue 31,919. 13,530. **AUXILIARY SERVICES** 31,919. 611600 13,530. APPLICATION FEE/OTHER 611600 611600 7,750. 7,750. FIELD TRIP All other program service revenue 009,072. g Total. Add lines 2a-2f Investment income (including dividends, interest, and 39. 39. other similar amounts) 4 Income from investment of tax-exempt bond proceeds 5 Royalties (ı) Real (II) Personal 6 a Gross rents b Less: rental expenses c Rental income or (loss) d Net rental income or (loss) 7 a Gross amount from sales of (i) Securities (II) Other assets other than inventory b Less: cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss) Þ 8 a Gross income from fundraising events (not Other Revenue 75,614. of including \$ contributions reported on line 1c). See 26,770 Part IV, line 18 47,714 b Less: direct expenses -20,944. -20,944.c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19 b Less: direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns 1,410 and allowances 3,579. b Less: cost of goods sold -2,169c Net income or (loss) from sales of inventory -2,169.

11 a b c Miscellaneous Revenue

All other revenue

Total. Add lines 11a-11d

Total revenue. See instructions.

0.

094,485.1,009,072.

Business Code

Form 990 (2012) THE GARDNER S
Part IX Statement of Functional Expenses

Secti	on 501(c)(3) and 501(c)(4) organizations must com	plete all columns All oth	er organizations must co	mplete column (A)	
	Check if Schedule O contains a respon	se to any question in th	ıs Part IX		
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and				· · · · · · · · · · · · · · · · · · ·
	organizations in the United States. See Part IV, line 21				
2	Grants and other assistance to individuals in		·		
	the United States. See Part IV, line 22	128,398.	128,398.		
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	United States. See Part IV, lines 15 and 16	i			
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	05 055	45 500	22 255	44.000
	trustees, and key employees	95,077.	47,538.	33,277.	14,262.
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	477 ())	4.65 204	0.150	4 100
7	Other salaries and wages	477,633.	465,284.	8,159.	4,190.
8	Pension plan accruals and contributions (include				
_	section 401(k) and 403(b) employer contributions)	53,758.	46,295.	6,460.	1 002
9	Other employee benefits	53,758.	40,295.	7,104.	1,003. 1,522.
10	Payroll taxes	50,745.	42,11/•	7,104.	1,524.
11	Fees for services (non-employees):				
a	Management	7,500.		7,500.	
b	Legal	4,513.		4,513.	
_	Accounting	Ŧ,JIJ.		4,515.	
d	Lobbying Professional fundraising services. See Part IV, line 17				
e f	Investment management fees				
g					
9	column (A) amount, list line 11g expenses on Sch 0.)	21,698.	17,513.	3,637.	548.
12	Advertising and promotion	7,527.	7,527.		
13	Office expenses	14,451.	6,251.	7,076.	1,124.
14	Information technology	•	•		
15	Royalties				
16	Occupancy	136,858.	103,391.	26,774.	6,693.
17	Travel	-	-		·
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	3,810.	3,048.	762.	
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	10,852.	10,852.		
23	Insurance	13,270.	6,635.	6,635.	
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.)	·			
а	AUVILIANU CHRUICHC	27,495.	27,495.		
b	INSTRUCTIONAL EXPENSES	25,968.	25,968.		
c	MISCELLANEOUS	18,242.	10,973.	7,112.	157.
d	DEDITO MITHERMANCE	9,634.	7,226.	2,216.	192
_	All other expenses	5,852.	.,==••	1,295.	4,557
25	Total functional expenses. Add lines 1 through 24e	1,113,279.	956,511.	122,520.	34,248
26	Joint costs. Complete this line only if the organization			===,,,,,,	,
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.		!		
	Check here if following SOP 98-2 (ASC 958-720)				
	0 12 10 12	· · · · · · · · · · · · · · · · · · ·	·	•	F 000 (0040)

Part X **Balance Sheet** Check if Schedule O contains a response to any question in this Part X (A) (B) End of year Beginning of year 136,983. 80,523. 1 Cash - non-interest-bearing 15,545. 31,100. 2 2 Savings and temporary cash investments 3 Pledges and grants receivable, net 3 377,213. 8,805. 4 4 Accounts receivable, net 5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 5 6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instr). Complete Part II of Sch L 6 Notes and loans receivable, net 7 3,787. Inventories for sale or use 8 9,967. 10,462. Prepaid expenses and deferred charges 9 10a Land, buildings, and equipment cost or other 311,687 basis. Complete Part VI of Schedule D 10a 154,367. 168,172. 157,320. 10b 10c b Less: accumulated depreciation 330. 245. 11 Investments - publicly traded securities 11 12 Investments - other securities See Part IV, line 11 12 13 Investments - program-related See Part IV, line 11 13 14 Intangible assets 14 15 Other assets See Part IV, line 11 15 711,997. 288,455. 16 16 Total assets. Add lines 1 through 15 (must equal line 34) 3,616. 5,515. 17 17 Accounts payable and accrued expenses 18 Grants payable 18 672,502. 286,716. 19 Deferred revenue 19 20 Tax-exempt bond liabilities 20 Escrow or custodial account liability. Complete Part IV of Schedule D 21 21 iabilities Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 22 23 Secured mortgages and notes payable to unrelated third parties 23 24 Unsecured notes and loans payable to unrelated third parties 24 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of 3,906. Schedule D 25 680,024. 292. 231. 26 Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117 (ASC 958), check here complete lines 27 through 29, and lines 33 and 34. Net Assets or Fund Balances 17,173. -5,792. 27 Unrestricted net assets 27 12,800. 28 Temporarily restricted net assets 28 2,000. 2,000. Permanently restricted net assets 29 Organizations that do not follow SFAS 117 (ASC 958), check here and complete lines 30 through 34. 30 Capital stock or trust principal, or current funds 30 31 Paid-in or capital surplus, or land, building, or equipment fund 31 32 Retained earnings, endowment, accumulated income, or other funds 32 33 Total net assets or fund balances 31,973 33 -3,776

> 288,455 Form 990 (2012)

711,997

34

34

Total liabilities and net assets/fund balances

	990 (2012)		GARDNER	SCHOOL	OF	ARTS	AND	SCI <u>E</u> I	NCES	91-16	77685	Pag	_{le} 12
Pai	t XI Reconciliation	on of Ne	t Assets										
	Check if Schedu	le O conta	ins a response t	o any questior	ın thi	s Part XI							<u> </u>
1 2 3 4 5 6 7 8 9	Total revenue (must ex Total expenses (must ex Revenue less expense Net assets or fund bal Net unrealized gains (li Donated services and Investment expenses Prior period adjustment Other changes in net at Net assets or fund bal	equal Part s. Subtrac ances at be osses) on i use of faci its assets or fu	IX, column (A), li t line 2 from line eginning of year nvestments lities und balances (ex	ne 25) 1 (must equal P	dule O)					1 2 3 4 5 6 7 8 9	3:	3,2 3,7 1,9	
10	column (B))	arioes at ci	nd or year. Com		ougii	o (maor o	quarr ur	· / , · · · · · · ·	•	10	-:	3,7	76.
Pa	rt XII Financial Sta	atement	s and Repor	ting									
	Check if Schedu	ile O conta	ins a response t	o any questioi	n ın thi	s Part XII							
							_	7				Yes	No
1	Accounting method us					X Accru		J Other .			-		
	If the organization cha	_		_	-					e O.			••
2a	Were the organization										2a		X
	If "Yes," check a box i	pelow to in	dicate whether t	he financial st	ateme	nts for the	e year we	ere compil	ed or reviewe	d on a			
	separate basis, conso		•										
	Separate basis		Consolidated ba					separate ba	asıs				3.7
b	Were the organization			=	•						2b		X
	If "Yes," check a box I		dicate whether t	the financial st	ateme	nts for the	e year w	ere audite	d on a separa	te basıs,			
	consolidated basis, or Separate basis		Consolidated ba	sis	Both c	onsolidat	ed and s	separate b	asıs				:
С	If "Yes" to line 2a or 2	b, does the	e organization ha	ave a committe	ee that	assumes	respons	sibility for	oversight of tl	ne audit,			
	review, or compilation	of its finan	icial statements	and selection	of an i	independ	ent acco	untant?			2c		
	If the organization cha	inged eithe	er its oversight p	rocess or sele	ction p	orocess d	uring the	e tax year,	explain in Sch	nedule O.			
За	As a result of a federa	l award, wa	as the organizati	on required to	under	go an au	dit or aud	dits as set	forth in the S	ıngle Audıt			
	Act and OMB Circular	A-133?									3a		X
b	If "Yes," did the organ	ization und	dergo the require	ed audit or aud	dits? If	the organ	ization o	did not und	dergo the requ	uired audit			
	or audits, explain why	ın Schedu	le O and describ	e any steps ta	aken to	undergo	such au	udits			3b		<u> </u>

Form **990** (2012)

SCHEDULE A (Form 990 or 990-EZ)

Name of the organization

Public Charity Status and Public Support

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

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

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

Inspection Employer identification number

		THE GAR	DNER SCHOOL	OF AR	TS AN	D SCI	ENCES		9:	1-1677685	
Part I	Reason f		ity Status (All organiza					uctions.			
he organ	zation is not a	private foundation	because it is. (For lines 1	through 1	1, check o	nly one be	ox.)				
1 🗀	A church, cor	vention of churche	s, or association of churc	hes descr	nbed in se e	ction 170(b)(1)(A)(i).				
2 X	A school desc	cribed in section 17	'0(b)(1)(A)(ii). (Attach Sch	nedule E.)							
з 🗔			tal service organization of		n section	170(b)(1)(A)(iii).				
4	•		operated in conjunction					b)(1)(A)(iii). Enter t	he hospital's name,	
	city, and state	-	•	•			•		-	•	
5	•		benefit of a college or un	nversity ov	vned or op	erated by	a governn	nental unit	describ	ed ın	
	section 170(b)(1)(A)(iv). (Compl	ete Part II)								
6 🖳		_	ent or governmental unit								
7 📖	An organization	on that normally red	eives a substantial part o	of its supp	ort from a	governme	ntal unit o	r from the	general	public described in	
		b)(1)(A)(vi). (Comple									
8 🖳			section 170(b)(1)(A)(vi). (
9 📖	_		eives: (1) more than 33 1								
		•	nctions - subject to certa								
			axable income (less sect	ion 511 ta	x) from bu	sinesses a	cquired b	y the orga	nızatıon	after June 30, 1975	•
_		509(a)(2). (Complet									
10 🖳			perated exclusively to tes								
11 📖			perated exclusively for th								•
	· · · · · · · · · · · · · · · ·		ations described in section) See sec	tion 509(a	a)(3). Ch	eck the box that	
		· · · · · · · · · · · · · · · · · · ·	organization and comple				_				
	a L Type I		••	•	nctionally i	-				n-functionally integra	
e 📖			at the organization is not								
			than one or more publicly						9(a)(1) or	section 509(a)(2)	
f	-		tten determination from t	the IRS tha	atitisa Ty	pe I, Type	II, or Type	:			$\overline{}$
		rganization, check t		•			- 6 45 - 6-11				ш
g	_		organization accepted ar							V	
			directly controls, either al	one or tog	etner with	persons o	iescribed i	n (II) and (iii) below	1 " "	No
	•	• ,	supported organization?							11g(i)	
		•	n described in (i) above?							11g(ii)	—
_			a person described in (i) o							[11g(iii)]	—
h	Provide the f	ollowing information	about the supported or	ganization	(S).						
(:) Nome	of augusted	(ii) EIN	(iii) Type of organization	(iv) Is the o	organization	(v) Did voi	ı notify the	(vi) is	the	(vii) Amount of mone	
• -	of supported anization	(ii) EIN	(described on lines 1-9		sted in your	organizat	ion in col.	organizátio (i) organiz		support	, ші у
O. y	umzadon		above or IRC section	governing	document?	(i) of your	support?	Ü.S			
			(see instructions))	Yes	No	Yes	No	Yes	No		
	·						1				
						<u> </u>					
								ľ			
<u></u>											
-				<u> </u>	 				ļ <u>.</u>		
	-				ļ. —			<u> </u>	-		
Total											

Schedule A (Form 990 or 990-EZ) 2012

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

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

Sec	Section A. Public Support											
Cale	ndar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total					
1	Gifts, grants, contributions, and			 								
	membership fees received. (Do not											
	ınclude any "unusual grants.")											
2	Tax revenues levied for the organ-											
	ization's benefit and either paid to											
	or expended on its behalf		i									
3	The value of services or facilities				1		,					
	furnished by a governmental unit to											
	the organization without charge											
4	Total. Add lines 1 through 3											
	The portion of total contributions				-							
-	by each person (other than a											
	governmental unit or publicly											
	supported organization) included											
	on line 1 that exceeds 2% of the											
	amount shown on line 11,											
	column (f)					•						
6	Public support. Subtract line 5 from line 4		· · · · · · · · · · · · · · · · · · ·									
	ction B. Total Support				1	 :						
	ndar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total					
	Amounts from line 4	(4) 2000	(2) 2000	(0) 20 10	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	(0) 2012	(i) rotal					
	Gross income from interest,											
•	dividends, payments received on											
	securities loans, rents, royalties	1										
	and income from similar sources											
9	Net income from unrelated business											
•	activities, whether or not the											
	business is regularly carried on		•									
10	Other income. Do not include gain	-										
10	or loss from the sale of capital											
	assets (Explain in Part IV)											
11	Total support. Add lines 7 through 10											
	Gross receipts from related activities,	etc (see instructi	one)	<u> </u>	<u> </u>	12	<u> </u>					
	First five years. If the Form 990 is for	•	•	d fourth or fifth t	av voar as a soctio							
	organization, check this box and stor	•	o mot, occoria, trii	a, louidi, or mare	ax year as a section	11 301(0)(3)	▶□					
Sec	ction C. Computation of Publ	ic Support Pe	rcentage									
	Public support percentage for 2012 (column (fl)		14	%					
	Public support percentage from 2011					15	<u> </u>					
	33 1/3% support test - 2012. If the	-	•	n line 13, and line	14 is 33 1/3% or r							
	stop here. The organization qualifies					,	▶□					
b	33 1/3% support test - 2011. If the		•		d line 15 is 33 1/3%	or more, check t	his box					
	and stop here. The organization qual											
17a	10% -facts-and-circumstances tes	t - 2012. If the org	anization did not	check a box on lin	ie 13, 16a, or 16b.	and line 14 is 10%	or more,					
	and if the organization meets the "fac											
	meets the "facts-and-circumstances"					3	ightharpoons					
b	10% -facts-and-circumstances tes				_	17a, and line 15 is	10% or					
	more, and if the organization meets ti											
	organization meets the "facts-and-cire						• ▶□					
18	Private foundation. If the organization						ns 🕌					
				, , , , , , , , , , , , , , , , , , , ,	,							

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

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

Sec	ction A. Public Support									
Cale	ndar year (or fiscal year beginning in) 🖊	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total			
1	Gifts, grants, contributions, and									
	membership fees received. (Do not									
	include any "unusual grants.")									
2	Gross receipts from admissions,									
	merchandise sold or services per- formed, or facilities furnished in									
	any activity that is related to the						,			
	organization's tax-exempt purpose									
3	Gross receipts from activities that									
	are not an unrelated trade or bus-					1				
	iness under section 513			· · · · · · · · · · · · · · · · · · ·	ļ					
4	Tax revenues levied for the organ-									
	ızatıon's benefit and either paid to									
	or expended on its behalf									
5	The value of services or facilities									
	furnished by a governmental unit to		a							
	the organization without charge									
	Total. Add lines 1 through 5									
7 8	a Amounts included on lines 1, 2, and									
_	3 received from disqualified persons									
k	Amounts included on lines 2 and 3 received from other than disqualified persons that									
	exceed the greater of \$5,000 or 1% of the									
	amount on line 13 for the year									
	Add lines 7a and 7b						-			
	Public support (Subtract line 7c from line 6)						<u></u>			
	ction B. Total Support	4.3.0000	4.10000	(-) 0010	(4) 0044	(-) 0040	(D. T)			
	endar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total			
	Amounts from line 6 a Gross income from interest,				 					
104	dividends, payments received on					1				
	securities loans, rents, royalties									
	and income from similar sources b Unrelated business taxable income		<u> </u>							
	(less section 511 taxes) from businesses									
	acquired after June 30, 1975			1						
	c Add lines 10a and 10b				 					
	Net income from unrelated business					 	 			
•	activities not included in line 10b,						II			
	whether or not the business is regularly carried on						i			
12	Other income. Do not include gain			 						
	or loss from the sale of capital				1					
13	assets (Explain in Part IV.) Total support. (Add lines 9, 10c, 11, and 12)									
	First five years. If the Form 990 is fo	r the organization	s first second thi	rd fourth or fifth t	tax vear as a secti	on 501(c)(3) organi	zation			
	check this box and stop here	and organization	o., o. o. o		,	· (-)(-) g	▶ □			
Se	ction C. Computation of Publ	ic Support Pe	rcentage							
15	Public support percentage for 2012 (line 8, column (f) d	livided by line 13,	column (f))		15	%			
	Public support percentage from 201			.,,		16	%			
	ction D. Computation of Inve									
17	Investment income percentage for 20)12 (line 10c, colui	mn (f) divided by li	ne 13, column (f))		17	%			
18	Investment income percentage from	2011 Schedule A,	Part III, line 17			18	%			
19	a 33 1/3% support tests - 2012. If the			on line 14, and lin	e 15 is more than	33 1/3%, and line				
	more than 33 1/3%, check this box a	•					ightharpoons			
	b 33 1/3% support tests - 2011. If the	organization did	not check a box o	n line 14 or line 19	a, and line 16 is m	ore than 33 1/3%,	and			
	line 18 is not more than 33 1/3%, che	eck this box and s	top here. The org	anızatıon qualifies	as a publicly sup	ported organization	▶ □			
20	Private foundation. If the organization	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 D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

2012
Open to Public Inspection

Name of the organization

THE GARDNER SCHOOL OF ARTS AND SCIENCES

Employer identification number 91 – 1677685

Par	t I Organizations Maintaining Donor Advise		Accounts. Complete if the
<u> </u>	organization answered "Yes" to Form 990, Part IV, lin		
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)	-	
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor advised f	unds
•	are the organization's property, subject to the organization's	•	Yes No
6	Did the organization inform all grantees, donors, and donor a		
	for charitable purposes and not for the benefit of the donor of	5 5	•
	impermissible private benefit?	deliter devicer, or ier dirty durier parpose com	Yes No
Par		ganization answered "Yes" to Form 990, Part I	
1	Purpose(s) of conservation easements held by the organizat		
	Preservation of land for public use (e.g., recreation or e		cally important land area
	Protection of natural habitat	Preservation of a certified	
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a quali	fied conservation contribution in the form of a	conservation easement on the last
	day of the tax year.		
			Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
С	Number of conservation easements on a certified historic sti	ructure included in (a)	2c
d	Number of conservation easements included in (c) acquired		
	listed in the National Register	2d	
3	Number of conservation easements modified, transferred, re	eleased, extinguished, or terminated by the org	ganization during the tax
	year ▶		
4	Number of states where property subject to conservation ea	sement is located >	
5	Does the organization have a written policy regarding the pe	riodic monitoring, inspection, handling of	<u></u>
	violations, and enforcement of the conservation easements	t holds?	Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting	_ ,	· · · — — — — — — — — — — — — — — — — —
7	Amount of expenses incurred in monitoring, inspecting, and	enforcing conservation easements during the	year ▶ \$
8	Does each conservation easement reported on line 2(d) about	ve satisfy the requirements of section 170(h)(4	·)(B)(ı)
	and section 170(h)(4)(B)(ii)?		└── Yes └── No
9	In Part XIII, describe how the organization reports conservat		
	include, if applicable, the text of the footnote to the organization	tion's financial statements that describes the	organization's accounting for
_	conservation easements.	2 A . 11:	-
Pai	organizations Maintaining Collections of	•	r Similar Assets.
	Complete if the organization answered "Yes" to Form		
1a	If the organization elected, as permitted under SFAS 116 (A	•	•
	historical treasures, or other similar assets held for public ex		of public service, provide, in Part XIII,
	the text of the footnote to its financial statements that descr		
b	If the organization elected, as permitted under SFAS 116 (Al		-
	treasures, or other similar assets held for public exhibition, e	ducation, or research in furtherance of public	service, provide the following amounts
	relating to these items:		
	(i) Revenues included in Form 990, Part VIII, line 1		► \$ ► \$
_	(ii) Assets included in Form 990, Part X		▶ \$
2	If the organization received or held works of art, historical tre	•	in, provide
	the following amounts required to be reported under SFAS 1	116 (ASC 958) relating to these items:	.
a	Revenues included in Form 990, Part VIII, line 1		\$
b	Assets included in Form 990, Part X		▶ \$

		ONER SCHOOL					<u>91-16</u>			
Pạr	t III Organizations Maintaining C	ollections of Ar	t, Historical Tr	easures, e	or Oth	er Simil	<u>ar Asse</u>	ts (contin	ued)	
3	Using the organization's acquisition, accession	on, and other record	s, check any of the	following that	at are a s	ignificant	use of its	collection	n items	
	(check all that apply).									
а	Public exhibition	d	Loan or exc	hange progra	ams					
b	Scholarly research	е	Other							
С	Preservation for future generations									
4	Provide a description of the organization's co	llections and explain	n how they further t	he organizati	on's exe	empt purp	ose in Par	XIII.		
5	During the year, did the organization solicit or									
	to be sold to raise funds rather than to be ma							Yes	☐ No	
Par	t IV Escrow and Custodial Arrang				"Yes" to	Form 990). Part IV. I			
	reported an amount on Form 990, Par		J - ·				, , .			
1a	Is the organization an agent, trustee, custodia	an or other intermed	ary for contribution	s or other as	sets not	included				
	on Form 990, Part X?		,				Γ.	Yes	□ No	
b	b If "Yes," explain the arrangement in Part XIII and complete the following table.									
Amor										
c	c Beginning balance									
	Additions during the year	1d								
	Distributions during the year	1e								
f	Ending balance									
) 2a	f Ending balance a Did the organization include an amount on Form 990, Part X, line 21?									
	If "Yes," explain the arrangement in Part XIII.	Dart YIII		<u> </u>	Yes	├ No				
Par						10				
<u> </u>	The state of the s	(a) Current year	(b) Prior year	(c) Two yea		(d) Three	vaare hack	(a) Four	years back	
10	Beginning of year balance	2,016.	2,016.		2,016.	(u) Illico	2,016.	(e) i oui	2,016.	
	Contributions				_,010.		2,010.		2,010.	
	· · · · · · · · · · · · · · · · · · ·	nts or scholarships								
е	Other expenditures for facilities			}						
	and programs			 						
	Administrative expenses	2,016.	2,016.		2,016.		2 016		2 016	
g	End of year balance	· · · · · · · · · · · · · · · · · · ·	•	<u> </u>	2,016.		2,016.	_	2,016.	
2	Provide the estimated percentage of the curr	ent year end balanc	· ·	a)) held as:						
	Board designated or quasi-endowment		_%							
	Permanent endowment ► 99.20	% •80 %								
С	Temporarily restricted endowment ▶									
_	The percentages in lines 2a, 2b, and 2c shou	-								
За	Are there endowment funds not in the posses	ssion of the organiza	ation that are held a	ind administe	ered for t	the organi	zation	r		
	by:								Yes No	
	(i) unrelated organizations							3a(i)	<u> X</u>	
	(ii) related organizations							3a(ii)	X	
ь	If "Yes" to 3a(ii), are the related organizations							3b		
4	Describe in Part XIII the intended uses of the									
Pai								_		
	Description of property	(a) Cost or o	1 ''	or other		ccumulat		(d) Bool	k value	
		basis (investr	nent) basis	(other)	de	preciation	<u> </u>			
	Land			- O 4 4						
	Buildings		16	7,044.		59,6	05.	10	7,439.	
	Leasehold improvements			7		6.4				
d	Equipment		14	4,643.		94,7	62.	4	9,881.	
	Other									
Tata	Add lines to through to (Column (d) must be	aual Form OOA Dart	V column (P) line:	10(0)			N	15	7 320	

Schedule D (Form 990) 2012

Part VII Investments - Other Securities. See (a) Description of security or category (including name of security)	(b) Book value		valuation. Cost or end	d-of-year market value
(1) Financial derivatives				• • •
(2) Closely-held equity interests	· · · · · · · · · · · · · · · · · · ·			
(3) Other	-			
(A)				
(B)				
(C)				
(D)	·		·	
(E)				
(F)	•			
(G)				
(H)				
(1)				
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)				
Part VIII Investments - Program Related. See	e Form 990, Part X,	line 13.		
(a) Description of investment type	(b) Book value	(c) Method of	valuation: Cost or end	d-of-year market value
(1)				
(2)				
(3)				
(4)				-
(5)				
(6)				
(7)				
(8)				
(9)				
(10)				
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)				
Part IX Other Assets. See Form 990, Part X, line 1	15			
(a) D	escription ((b) Book value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)			·-	
(9)			·-	
(10)				
Total. (Column (b) must equal Form 990, Part X, col (B) line				<u> </u>
Part X Other Liabilities. See Form 990, Part X, III	ne 25.			
1. (a) Description of liability		(b) Book value		
(1) Federal income taxes				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)				
(11)				
Total. (Column (b) must equal Form 990, Part X, col (B) line	25.)			
2. FIN 48 (ASC 740) Footnote In Part XIII, provide the tex	t of the footnote to	the organization's financ	al statements that re	ports the organization's
liability for uncertain tax positions under FIN 48 (ASC 74				

THE GARDNER SCHOOL OF ARTS AND SCIENCES

Schedule D (Form 990) 2012

91-1677685 Page 3

	t XI Reconciliation of Revenue per Audited Financial Statements V			.677685 Page	<u>4</u>
 -		Tritti nevellue per ne			_
1	Total revenue, gains, and other support per audited financial statements	<u> </u>	1		
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12	1			
_	Net unrealized gains on investments		- 1		
Ь					
C	Recoveries of prior year grants 2c				
d	Other (Describe in Part XIII.)		_		
е	Add lines 2a through 2d	-	2e		_
3	Subtract line 2e from line 1	ļ	3		_
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	 	ŀ		
b	Other (Describe in Part XIII.)				
C	Add lines 4a and 4b	<u> </u>	4c		_
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		5		_
Pa	rt XII Reconciliation of Expenses per Audited Financial Statements	With Expenses per F	Retu	rn	_
1	Total expenses and losses per audited financial statements	_	1		
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	,			
а	Donated services and use of facilities 2a				
b	Prior year adjustments 2b)			
С	Other losses 2c				
d	Other (Describe in Part XIII.)		_		
e	Add lines 2a through 2d		2e		_
3	Subtract line 2e from line 1		3		
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	1			
b	Other (Describe in Part XIII.)		. 1		
С	Add lines 4a and 4b		4c		
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)		5		_
Pa	rt XIII Supplemental Information				_
X, lın	iplete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 2, Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide RT V, LINE 4: THE EARNINGS FROM THE ORGANIZAT	de any additional informatio	on.		<u></u>
AR	E AVAILABLE FOR OPERATING SUPPORT.				
				· · ·	
					
		····			_
					_
			Sched	tule D (Form 990) 20	112

SCHEDULE E

(Form 990 or 990-EZ)

Department of the Treasury

Name of the organization

Internal Revenue Service

Part I

Schools

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

➤ Attach to Form 990 or Form 990-EZ.

OMB No 1545-0047

Open to Public Inspection

THE GARDNER SCHOOL OF ARTS AND SCIENCES

Employer identification number 91-1677685

			YES	NO
1	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws,			
	other governing instrument, or in a resolution of its governing body?	1	Х	L.
2	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures,			
	catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	2	Х	
3	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the			
	period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes			
	the policy known to all parts of the general community it serves? If "Yes," please describe If "No," please explain.			
	If you need more space, use Part II	3	Х	
	THE SCHOOL'S NON-DISCRIMINATION POLICY IS SHOWN IN ITS			
	PRINTED SOLICITATION MATERIAL.			
4	Does the organization maintain the following?		٦,	
a		4a	X	<u> </u>
b	, , , , , , , , , , , , , , , , , , , ,	4b	Х	<u> </u>
С	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student		٦,	
	admissions, programs, and scholarships?	4c	X	
d	Copies of all material used by the organization or on its behalf to solicit contributions?	4d	Х	
	If you answered "No" to any of the above, please explain. If you need more space, use Part II.			
		1		ł
			ĺ	
5	Does the organization discriminate by race in any way with respect to:			
а		5a		x
	Admissions policies?			X
	Employment of faculty or administrative staff?	5b 5c		X
	Scholarships or other financial assistance?	5d		X
	Educational policies?	_		X
	Use of facilities?	5e 5f	\vdash	X
	Athletic programs?	5g		X
•	Other extracurricular activities?	5g 5h	<u> </u>	X
	If you answered "Yes" to any of the above, please explain. If you need more space, use Part II.	311		
	if you answered Tes to any of the above, please explain. If you fleed flore space, use Fart II.			
		1		1
				1
		1	Ì	
62	Does the organization receive any financial aid or assistance from a governmental agency?	62	ł	x
	Has the organization's right to such aid ever been revoked or suspended?	6a	<u> </u>	X
J	If you answered "Yes" to either line 6a or line 6b, explain on Part II.	6b	<u> </u>	 ^``
7	Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of			
•	Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," explain on Part II	7	x	
	For Paperwork Reduction Act Notice, see the Instructions for Form 990 or Form 990-EZ. Schedule E (Form 9			/2012\

Schedule E	(Form 990 or 990-E2	Z) (2012) THE	GARDNER	SCHOOL	OF	ARTS	AND	SCIENCES	91-1	677685	Page 2
Part II	Supplemental as applicable Also	Information	• Complete this	part to provid	le the	explanatio	ns requi	red by Part I, lines	3, 4d, 5h	, 6b, and 7,	
	as applicable Also	complete this p	part to provide a	ny other addit	tional	nformation	1.				
	· · · · · · · · · · · · · · · · · · ·									•	
	<u> </u>										
 											
											
								···			
						 					
	-									 	
											
		<u> </u>									
			•								
	<u>.</u>										
					-						
	·										

-											
		_									

SCHEDULE G (Form 990 or 990-EZ)

Name of the argonization

Supplemental Information Regarding Fundraising or Gaming Activities

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

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

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

Inspection

Employer identification number

THE GAR	DNER SCHOOL OF ART	SA	ND	SCIENCES	91-1677	685					
Part I Fundraising Activities required to complete this par	Complete if the organization answet	red "Y	'es" to	Form 990, Part IV, I	ne 17 Form 990-EZ	filers are not					
 a Mail solicitations b Internet and email solicitations c Phone solicitations d In-person solicitations 2 a Did the organization have a written of key employees listed in Form 990, P b if "Yes," list the ten highest paid indirections 	b Internet and email solicitations c Phone solicitations g Special fundraising events d In-person solicitations a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.										
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) fundr have cr or con contribi	Did aiser ustody trol of utions?	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization					
		Yes	No								
<u> </u>											
Total			>		_						
3 List all states in which the organization or licensing.	on is registered or licensed to solicit	contrik	oution	s or has been notifie	d it is exempt from r	egistration					
					-	·					
						··· ·—					
		-									

Schedule @ (Form 990 or 990-EZ) 2012 THE GARDNER SCHOOL OF ARTS AND SCIENCES 91-1677685 Page 2 Part II Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000. (a) Event #1 (b) Event #2 (c) Other events (d) Total events ANNUAL PARTNER WITH NONE (add col (a) through AUCTION GARDNER col. (c)) (total number) (event type) (event type) 87,607. 14,777. 102,384. 1 Gross receipts 14,777 60,837. 75,614. 2 Less: Contributions 26,770 26,770. 3 Gross income (line 1 minus line 2) 4 Cash prizes Noncash prizes Direct Expenses 1,000. 140. 1,140. Rent/facility costs 3,309 8,714. 5,405. 7 Food and beverages 3,490. 3,490. 8 Entertainment 32,919. 1,451. 34,370. 9 Other direct expenses 47,714 10 Direct expense summary. Add lines 4 through 9 in column (d) -20,944. 11 Net income summary. Combine line 3, column (d), and line 10 Gaming. Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a. (b) Pull tabs/instant (d) Total gaming (add Revenue (a) Bingo (c) Other gaming bingo/progressive bingo col. (a) through col. (c)) Gross revenue 2 Cash prizes **Direct Expenses** 3 Noncash prizes Rent/facility costs 5 Other direct expenses Yes Yes Yes % 6 Volunteer labor No No 7 Direct expense summary. Add lines 2 through 5 in column (d) Net gaming income summary. Combine line 1, column d, and line 7 9 Enter the state(s) in which the organization operates gaming activities: a Is the organization licensed to operate gaming activities in each of these states? _ Yes **b** If "No," explain: 10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? __ Yes ∐ No

Schedule G (Form 990 or 990-EZ) 2012

b If "Yes," explain.

232082 01-07-13

Schedule G (Form 990 or 990-EZ) 2012 THE GARDNER SCHOOL OF ARTS AND SCIENCES 91-1677685 Page 3
11. Does the organization operate gaming activities with nonmembers?
12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed
to administer charitable gaming?
13 Indicate the percentage of gaming activity operated in.
a The organization's facility 13a %
b An outside facility 13b %
14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:
Name ▶
Address ▶
15a Does the organization have a contract with a third party from whom the organization receives gaming revenue?
b If "Yes," enter the amount of gaming revenue received by the organization ▶\$ and the amount
of gaming revenue retained by the third party ▶\$
c If "Yes," enter name and address of the third party.
Name ►
Address ▶
16 Gaming manager information.
Name ▶
Gaming manager compensation ▶ \$
Description of services provided
Director/officer Employee Independent contractor
17 Mandatory distributions:
a Is the organization required under state law to make charitable distributions from the gaming proceeds to
retain the state gaming license?
b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the
organization's own exempt activities during the tax year > \$
Part IV Supplemental Information. Complete this part to provide the explanations required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provide any additional information (see instructions)

SCHEDULE I (Form 990) Department of the Treasury Internal Revenue Service

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

2012

Inspection

OMB No 1545-0047

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

Open to Public

& Employer identification number 91-1677685 X Yes 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection THE GARDNER SCHOOL OF ARTS AND SCIENCES General Information on Grants and Assistance criteria used to award the grants or assistance? Name of the organization Part

2 Des	Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States	cedures for monit	oring the use of grant	funds in the United	States				, j
Part	Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000, Part II can be duplicated if additional space is needed.	Sovernments and 5.000. Part II can	l Organizations in the be duplicated if additi	• United States. Conal space is need	omplete if the orga Jed.	anization answered "\	res" to Form 990, Part I	/, line 21, for any	
1 (a) h	1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance	I
									1
									I
2 Ente	Enter total number of section 501(c)(3) and government organizations listed in the line 1 table Enter total number of other organizations listed in the line 1 table	nd government org	ganizations listed in the table	e line 1 table					
ہا	For Paperwork Reduction Act Notice, see the Instructions for Form 990.	see the Instructi	ons for Form 990.					Schedule I (Form 990) (2012	C

THE GARDNER SCHOOL OF ARTS AND SCIENCES

Page 2

91-1677685

Schedule I (Form 990) (2012) THE GARDNER SCHOOL OF ARTS AND SCIENCES

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 Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22.

(d) Amount of non- (e) Method of valuation (f) Description of non-cash assistance cash assistance	0.			Supplemental Information. Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional information	SCHOOL PROVIDES FINANCIAL ASSISTANCE TO	S DETERMINED BY THE	SERVICE TO HELP ASSESS A	1
(c) Amount of cash grant	128,398.			required in Part I, I	VIDES FINAL	FAMILIES, AS	AN OUTSIDE SI	EDUCATION.
(b) Number of recipients	18			de the information	HOOL PRO	STUDENTS' F		NDENT EDI
(a) Type of grant or assistance	SCHOLARSHIPS / FINANCIAL AID			Part IV Supplemental Information. Complete this part to provide	SCHEDULE I, PART I, LINE 2: THE SC	STUDENTS BASED ON THE NEEDS OF STU	SCHOLARSHIP COMMITTEE. THE SCHOOL USES	FAMILY'S ABILITY TO PAY FOR INDEPENDENT

232102 12-18-12

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.

2012

Open to Public Inspection

Name of the organization

THE GARDNER SCHOOL OF ARTS AND SCIENCES

Employer identification number 91-1677685

Par	TI Types of Property								
		(a) Check if	(b) Number of	(c) Noncash contribution	(d) Method of de	termını	ng		
		applicable	contributions or items contributed	amounts reported on Form 990, Part VIII, line 19	noncash contribu	tion an	nounts	3	
1	Art - Works of art								
2	Art - Historical treasures								
3	Art - Fractional interests								
4	Books and publications		,						
5	Clothing and household goods								
6	Cars and other vehicles								
7	Boats and planes						-		
8	Intellectual property								
9	Securities - Publicly traded								
10	Securities - Closely held stock								
11	Securities - Partnership, LLC, or								
	trust interests								
12	Securities - Miscellaneous					•			
13	Qualified conservation contribution -				1				
	Historic structures								
14	Qualified conservation contribution - Other								
15	Real estate - Residential								
16	Real estate - Commercial								
17	Real estate - Other								
18	Collectibles								
19	Food inventory								
20	Drugs and medical supplies			,					
21	Taxidermy					,			
22	Historical artifacts		 						
23	Scientific specimens								
24	Archeological artifacts		1.71	20 401	DEMINITE DESCRIPTION				
25	Other (AUCTION ITEMS)	X	171	30,491.	RETAIL PRIC	ES			
26	Other ()								
27	Other ()								
28	Other (<u> </u>	<u> </u>		<u> </u>				
29	Number of Forms 8283 received by the organi			f I					
	for which the organization completed Form 82	83, Part IV,	Donee Acknowled	gement 29		1	V	Na	
00.	Down at he was a distable a superior because he			marked in Dort Llines 1 00 t	hat it was sat hald for		Yes	No	
30a	During the year, did the organization receive b	•		•				l	
	at least three years from the date of the initial	contribution	n, and which is not	required to be used for exe	mpt purposes for	202		х	
	the entire holding period?					30a		^	
	If "Yes," describe the arrangement in Part II.	naliou that i	roal uroa tha roulou	of any non standard contr	hutiono?	- 04		х	
31	Does the organization have a gift acceptance	-				31			
32a	Does the organization hire or use third parties	or related o	nganizations to so	iicii, process, or seii noncas	II	20-		х	
L	contributions?					32a		A.	
	If "Yes," describe in Part II. If the organization did not report an amount in	column (a)	for a type of pre-	arty for which column (c) is	shackad				
33		Column (C)	ioi a type oi prope	erty for which column (a) is (neckeu,				
1144	describe in Part II. For Paperwork Reduction Act Notice, see	the Instru	otions for Form O	<u> </u>	Cahadula 84	(Eorn	000\	(2010)	
LHA	For Paperwork neduction Activotice, see	ะ เมษามาธนาน	CHOUS IN LAIN S	7 0.	Schedule M	(FORM	350) (,ZU 12)	

Part II	the	organ	ization is i	eportii	mation. Com ng in Part I, coli r any additiona	umn (b), t	he numi	provide the information	ormati tions,	on required by Part I, line the number of items rece	es 30b, 32b, and 33, and whether eived, or a combination of both
SCHEDU	LE	М,	PART	I,	COLUMN	(B):	THE	NUMBER	OF	CONTRIBUTION	NS IS
REPORT	ED	_									
			-								
			-								
					· · · · · · · · · · · · · · · · · · ·			-			
			<u> </u>								
										 	
			_		-						
	-				-						
					-	- <u></u>					
								 <u>-</u>			
	-										
					·						

SCHEDULE O (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 990-EZ or to provide any additional information.

▶ Attach to Form 990 or 990-EZ.

2012
Open to Public Inspection

Name of the organization

THE GARDNER SCHOOL OF ARTS AND SCIENCES

Employer identification number 91-1677685

THE SCHOOL PROVIDES QUALITY EDUCATION TO STUDENTS IN GRADES PRE-K
THROUGH EIGHTH GRADE. THE MISSION OF THE SCHOOL IS TO INSPIRE STUDENTS
TO ACTIVELY SEEK KNOWLEDGE AND UNDERSTANDING, THINK INDEPENDENTLY,
REASON CRITICALLY AND EMBRACE CHALLENGE.

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

COLLABORATIVE WORK, INSPIRING ALL LEARNERS TO REACH THEIR HIGHEST

POTENTIAL. WHILE BUILDING KNOWLEDGE OF SELF AND AN AWARENESS OF OUR

CONNECTION TO OTHERS, WE DEVELOP RESPONSIBILITY TO OURSELVES, OUR

COMMUNITY, THE EARTH AND HUMANITY.

FORM 990, PART VI, SECTION B, LINE 11: THE FORM 990 IS PREPARED BY AN

INDEPENDENT CPA AND REVIEWED BY THE BOOKKEEPER AND THE HEAD OF SCHOOL. A

COPY OF THE FORM 990 IS THEN REVIEWED BY THE FINANCE COMMITTEE AND IS

PROVIDED TO THE GOVERNING BOARD AFTER IT IS FILED WITH THE IRS.

FORM 990, PART VI, SECTION B, LINE 12C: TIME IS ALLOTED AT BOARD MEETINGS
TO OPENLY ASK AND DISCUSS ANY POTENTIAL CONFLICTS.

FORM 990, PART VI, SECTION B, LINE 15A: FORM 990, PART VI, LINE 15:

WHEN THE HEAD OF SCHOOL IS HIRED, ALL NEGOTIATIONS AND ALL COMPENSATION IS

DECIDED BY THE GOVERNING BOARD AFTER CAREFUL REVIEW OF INDUSTRY STANDARDS.

FORM 990, PART VI, SECTION C, LINE 19: THE SCHOOL MAKES ITS GOVERNING

DOCUMENTS, CONFLICT OF INTEREST POLICIES, AND FINANCIAL STATEMENTS

Schedule O (Form 990 or 990-EZ) (2012) Page 2											
Name of the organi	zation	THE	E GARDNI	ER SCI	HOOL OF	ARTS	AND	SCIENCES		Employer identific 91-1677	ation number
AVAILABLE	то	THE	PUBLIC	UPON	REQUEST	· .					
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Form **8868**

(Rev January 2013)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

OMB No. 1545-1709

 If you Do not of Electron required of time to Personal 	are filing for an Automatic 3-Month Extension, complete are filing for an Additional (Not Automatic) 3-Month Extending for an Additional (Not Automatic) 3-Month Extended and filing (e-file). You can electronically file Form 8868 if y to file Form 990-T), or an additional (not automatic) 3-monor file any of the forms listed in Part I or Part II with the extended and contracts, which must be sent to the IRS in paparatics.	tension, can automa ou need a nth extens ception of er format	complete only Part II (on page 2 of the 3-month extension on a previous as 3-month automatic extension of time of time. You can electronically figure 8870, Information Return for 1 (see instructions). For more details of	ly filed For ne to file (6 le Form 88 Fransfers A on the elec	months for a 668 to request associated Wit	an extension h Certain			
A corpor	ation required to file Form 990-T and requesting an auton								
Part I on	ly		•			>			
	corporations (including 1120-C filers), partnerships, REM	ICs, and ti	rusts must use Form 7004 to reques	t an exten	sion of time				
to file inc	come tax returns.								
Type or	Name of exempt organization or other filer, see instru-	Employer	oyer identification number (EIN) or						
print	MILE CARRAGED COULOU OF ARMS	91-1677685							
File by the	THE GARDNER SCHOOL OF ARTS Number, street, and room or suite no. If a P.O. box, so			Social security number (SSN					
due date fo filing your	16413 NE 50TH AVENUE	ee msnac	noris.	Social Set	Junty Humber	(3314)			
Enter the						0 1			
	· ·	Datama	Anathanian		Return				
Applicat	tion	Return	Return Application Code Is For						
is For	0 or Form 990-EZ	01	Form 990-T (corporation)		· · · · · · · · · · · · · · · · · · ·	Code 07			
Form 99		02							
	20 (ındıvidual)	03	Form 4720	-		08			
Form 99	· · · · · · · · · · · · · · · · · · ·	04	Form 5227			10			
	0-T (sec. 401(a) or 408(a) trust)	05	Form 6069			11			
	0-T (trust other than above)	06	Form 8870			12			
Telep	THE GARDNER SCI cooks are in the care of ► 16413 NE 50TH is shone No. ► 360-574-5752 organization does not have an office or place of business is is for a Group Return, enter the organization's four digit If it is for part of the group, check this box ►	S In the Ur	FAX No. ▶ nited States, check this box	If this is foi	the whole gro	▶ □ oup, check this ion is for.			
is	FEBRUARY 18, 2014 , to file the exempt organization return for the organization named above. The extension is for the organization's return for calendar year or X tax year beginning JUL_ 1, 2012, and ending JUN_ 30, 2013								
no	nonrefundable credits. See instructions.								
	this application is for Form 990-PF, 990-T, 4720, or 6069, stimated tax payments made. Include any prior year over	•		3b_	\$	0.			
	alance due. Subtract line 3b from line 3a Include your pa	•	· · · · · · · · · · · · · · · · · · ·						
	/ using EFTPS (Electronic Federal Tax Payment System)			3c	\$	0.			
Caution	. If you are going to make an electronic fund withdrawal	with this F	orm 8868, see Form 8453-EO and F	orm 8879-	EO for paymen	nt instructions			

Form 8868 (Rev. 1-2013)					Page 2		
• 'If you are filing for an Additional (Not Automatic) 3-Month Ex	tension, c	complete only Part II and check this	box		ightharpoons X		
Note. Only complete Part II if you have already been granted an a			led Form 8	3868			
If you are filing for an Automatic 3-Month Extension, complete			. ,		1 1		
Part II Additional (Not Automatic) 3-Month E	xtensioi						
		Enter filer's	identifyin	g number, :	see instructions		
Type or Name of exempt organization or other filer, see instruc	Employer	Employer identification number (EIN) or					
print are		91-1677685					
due date for filing your return See 16413 NE 50TH AVENUE	ee instruc	tions	Social security number (SSN)				
City, town or post office, state, and ZIP code. For a foreign address, see instructions VANCOUVER, WA 98686-1843							
				·= · ·=			
Enter the Return code for the return that this application is for (file	e a separa	te application for each return)			0 1		
Application	Return	Application			Return		
Is For	Code	is For			Code		
Form 990 or Form 990-EZ	01		•				
Form 990-BL	02	Form 1041-A			08		
Form 4720 (individual)	03	Form 4720			09		
Form 990-PF	04	Form 5227	10				
Form 990-T (sec 401(a) or 408(a) trust)	05	Form 6069	11				
Form 990-T (trust other than above)		12					
STOP! Do not complete Part II if you were not already granted		natic 3-month extension on a prev	iously file	d Form 886	i8		
THE GARDNER SCI							
• The books are in the care of \triangleright 16413 NE 50TH 2	AVENU:		<u>98686</u>	<u>-1843</u>			
Telephone No ► 360-574-5752		FAX No 🕨					
If the organization does not have an office or place of business.					• •••		
If this is for a Group Return, enter the organization's four digit	~						
box ► If it is for part of the group, check this box ►		ach a list with the names and EINs o	r all memb	ers the exte	nsion is for		
4 I request an additional 3-month extension of time until		15, 2014	_ TITN	20 2	012		
5 For calendar year, or other tax year beginning					013		
6 If the tax year entered in line 5 is for less than 12 months, o	neck reas	on Initial return	Final r	eturn			
Change in accounting period State in detail why you need the extension							
7 State in detail why you need the extension THE INFORMATION NECESSARY TO	PREPA	RE A COMPLETE AND	ACCITR	Δጥ : ΤΔ	X RETURN		
IS NOT YET AVAILABLE.		ith in complete the	210001	***** IV	DI REFORM		
TO ROT THE HAMMEN.							
8a If this application is for Form 990-BL, 990-PF, 990-T, 4720,	or 6069. e	enter the tentative tax, less any					
nonrefundable credits See instructions	8a	s	0.				
b If this application is for Form 990-PF, 990-T, 4720, or 6069,	enter any	refundable credits and estimated					
tax payments made Include any prior year overpayment allowed as a credit and any amount paid							
previously with Form 8868		•	8b	\$	0.		
c Balance due. Subtract line 8b from line 8a. Include your pa	ayment wr	th this form, if required, by using					
EFTPS (Electronic Federal Tax Payment System) See instr	uctions		8c	\$	0.		
Signature and Verificat	tion mu	st be completed for Part II	only.	_			
Under penalties of perjury, I declare that I have examined this form, include	ing accom	panying schedules and statements, and t	o the best o	f my knowled	ge and belief,		
it is true, correct, and comblete, and that I amouthorized to prepare this for		14		_	1.1.1		
Signature Title	CF	7/	Date	> > 7	10/14		
				Form (8868 (Rev 1-2013)		