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DLN: 93493097000434

Form **990** 

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)

2012

OMB No 1545-0047

Open to Public Inspection

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

A Fo	r the	2012 cal	endar year, or tax year beginning 07-01-2012     , 2012, and ending 06-30	)-2013			
		applicable	C Name of organization La Jolla Country Day School		D Employe	er ider	ntification number
	dress c	_	Doing Business As		_ 95-187	75978	3
	me cha						
_	tial retu		Number and street (or P O box if mail is not delivered to street address) Room/suit 9490 Genesee Avenue	te	E Telephon	e num	ber
	minate		Suite		(858) 4	53-3	440
_		return	City or town, state or country, and ZIP + 4 La Jolla, CA 92037				
Арі	JIICALIO	n pending					6 69,388,975
			<b>F</b> Name and address of principal officer Christopher Schuck		this a group r liates?	eturn	for
			9490 Genesee Avenue La Jolla, CA 92037	1171-3			
							ded? 「Yes 「No (see instructions)
<b>I</b> Ta	x-exer	mpt status	▼ 501(c)(3)	_			
J W	ebsit	e:► ww	w ljcds org	<b>H(c)</b> Gr	oup exemptio	n nun	nber 🟲
<b>K</b> For	n of or	rganızatıon	Corporation	<b>L</b> Year of	formation 1926	5 <b>M</b>	State of legal domicile CA
	rt I		mary			-	
			escribe the organization's mission or most significant activities				
		To prepa	are individuals for a lifetime of intellectual exploration and personal grow	th			
Governance							
룓							
<u> </u>	2	Check th	his box দ $ extstyle{ extstyle{ iny{1}}}$ if the organization discontinued its operations or disposed o	f more thar	ı 25% of ıts r	et as	sets
	_				1	_	
Activities &	I		of voting members of the governing body (Part VI, line 1a)		-	3	22
ĕ			of independent voting members of the governing body (Part VI, line 1b)		F	4	22
<u> </u>			mber of individuals employed in calendar year 2012 (Part V, line 2a) .		F	5	366
<del>य</del>	I		mber of volunteers (estimate if necessary)			6	225
	I		related business revenue from Part VIII, column (C), line 12		• •	7a	0
	Ь	Net unre	elated business taxable income from Form 990-T, line 34			7b	
		Contro	buttons and grants (Dort VIII line 1b)	Pi	1,646,10	\ <u>_</u>	Current Year
ā	8		butions and grants (Part VIII, line 1h)	30,439,6		1,530,997	
Revenue	10	_	tment income (Part VIII, column (A), lines 3, 4, and 7d)		-462,1		-39,028
Ě	11		revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		1,173,0	-	58,771
	12		revenue—add lines 8 through 11 (must equal Part VIII, column (A), line		1,1, 5,0		30,771
		12) .	<u> </u>		32,796,62	2 3	33,591,568
	13		s and similar amounts paid (Part IX, column (A), lines 1–3)		3,705,16	57	3,864,890
	14		ts paid to or for members (Part IX, column (A), line 4)			0	0
Ø	15	Saları 5–10	es, other compensation, employee benefits (Part IX, column (A), lines		18,184,2	51	19,242,852
Expenses	16a		ssional fundraising fees (Part IX, column (A), line 11e)		10,101,21	0	16,926
¥ ⊕	ь		indraising expenses (Part IX, column (D), line 25) ▶747,664			,	
ш	17		expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	10,103,84	11	9,997,024	
	18		expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	31,993,2	-	33,121,692	
	19		nue less expenses Subtract line 18 from line 12		803,36		469,876
<u>ኞ</u>					ing of Current	-	End of Year
Not Assets or Fund Balances					Year	$\perp$	
Ass Ba	20		assets (Part X, line 16)		97,039,13	-	98,249,845
4 E	21		liabilities (Part X, line 26)	67,302,47		63,520,312	
	22		ssets or fund balances Subtract line 21 from line 20		29,736,6	57	34,729,533
	rt II		ature Block				
			perjury, I declare that I have examined this return, including accompany belief, it is true, correct, and complete Declaration of preparer (other th				
			nowledge	an onicer)	is basea on a	11 11110	illiacion of willen
		****			2014-03-13		
Sigr		Signa	ature of officer		Date		
Her	е		e Nelson Chief Financial Officer				
			e or print name and title				
		F	Print/Type preparer's name Preparer's signature Da		HECK!	PTIN	
Paid	d	<u> </u>	Firm's name F GRANT THORNTON LLP		elf-employed   ırm's EIN 🟲		
Pre	pare	er L					
	On		rım's address ┡ ONE CALIFORNIA STREET SUITE 2300	P	hone no (415)	986-39	000

SAN FRANCISCO, CA 94111

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

✓ Yes No

1 0111	1990 (2012)				Page Z
Par		of Program Service A	Accomplishments to any question in this Part III		
1		organization's mission			
_	•	-	IVIDUALS FOR A LIFETIME OF	INTELLECTUAL EXPLORATIO	N, PERSONAL
	WTH AND SOCIAL RE				
2	Did the organization the prior Form 990 or		rogram services during the year	which were not listed on	┌ Yes ┌ No
	If "Yes," describe the	se new services on Schedi	ıle O		
3		cease conducting, or make	significant changes in how it con	ducts, any program	┌ Yes ┌ No
	If "Yes," describe the	se changes on Schedule O			
4	expenses Section 50		complishments for each of its thro anizations are required to report program service reported		
	(Code	) (Expenses \$ 2	7,906,597 including grants of \$	3,864,890 ) (Revenue \$	32,125,210 )
	•	nool prepares individuals for a life	time of intellectual exploration, persona	, , , , , , , , , , , , , , , , , , , ,	
4b	(Code	) (Expenses \$	including grants of \$	) (Revenue \$	)
<b>4</b> c	(Code	) (Expenses \$	including grants of \$	) (Revenue \$	)
4d	Other program servi	ıces (Describe in Schedule	0)		
	(Expenses \$	ıncludınç	g grants of \$	) (Revenue \$	)
4e	Total program servi	ce expenses ► 27	,906,597		

Part IV Checklist of Required Schedule
--

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

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		No
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25	24a	Yes	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	Yes	
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		No
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		No
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part $I$	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			_
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part $IV \cdot \cdot \cdot \cdot$	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Νo
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		No
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section $512(b)(13)$ ? If "Yes," complete Schedule R, Part V, line 2	35b		
36	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O	38	Yes	
		F	orm <b>99</b> 0	(2012)

Par	Statements Regarding Other IRS Filings and Tax Compliance			_
	Check if Schedule O contains a response to any question in this Part V	<del></del>	 Yes	l No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable   1a   84		103	110
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable	1		
	gaming (gambling) winnings to prize winners?	<b>1</b> c	Yes	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?  Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За		No
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		No
b	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
		5b		<u> </u>
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	Yes	
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Yes	
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year	<del>/</del> C		INO
_	za rest, manage die maniser er remis ezez med daring die yeur r			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	<b>Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.</b> Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?			
_		8		
9	Sponsoring organizations maintaining donor advised funds.			
	Did the organization make any taxable distributions under section 4966?	9a		
Ь	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
LO	Section 501(c)(7) organizations. Enter			
	Initiation fees and capital contributions included on Part VIII, line 12 10a	.		
Ь	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	.		
11	Section 501(c)(12) organizations. Enter			
а	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 )			
.2a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
.3	Section 501(c)(29) qualified nonprofit health insurance issuers.	1		
а	Is the organization licensed to issue qualified health plans in more than one state? <b>Note.</b> See the instructions for additional information the organization must report on Schedule O	13a		
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			
L4a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
	If "Yes " has it filed a Form 720 to report these payments? If "No " provide an explanation in Schedule O	14h		

Form 990 (2012) Page 6 Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Section A. Governing Body and Management

			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
b	Enter the number of voting members included in line 1a, above, who are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2	Yes	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? .	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		Νo
6	Did the organization have members or stockholders?	6		Νo
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
Se	ection B. Policies (This Section B requests information about policies not required by the Internal R	evenu	ıe Cod	e.)
Se	ection B. Policies (This Section B requests information about policies not required by the Internal R	evenu	re Cod Yes	e.) <b>No</b>
	Did the organization have local chapters, branches, or affiliates?	evenu 10a		•
10a				No
10a b	Did the organization have local chapters, branches, or affiliates?	10a		No
10a b 11a	Did the organization have local chapters, branches, or affiliates?	10a 10b		No No
10a b 11a b	Did the organization have local chapters, branches, or affiliates?	10a 10b		No No
10a b 11a b 12a	Did the organization have local chapters, branches, or affiliates?	10a 10b	Yes	No No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a	Yes	No No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b	Yes Yes	No No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?  If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?  Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?  Describe in Schedule O the process, if any, used by the organization to review this Form 990  Did the organization have a written conflict of interest policy? If "No," go to line 13  Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?  Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	10a 10b 11a 12a 12b	Yes Yes Yes	No No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13	Yes Yes Yes Yes	No No
10a b 11a b 12a b c 13 14 15	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13	Yes Yes Yes Yes	No No
10a b 11a b 12a b c 13 14 15	Did the organization have local chapters, branches, or affiliates?  If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?  Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?  Describe in Schedule O the process, if any, used by the organization to review this Form 990  Did the organization have a written conflict of interest policy? If "No," go to line 13  Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?  Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done  Did the organization have a written whistleblower policy?  Did the organization have a written document retention and destruction policy?  Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes	No No
10a b 11a b 12a b c 13 14 15	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes	No No
10a b 11a b 12a b c 13 14 15	Did the organization have local chapters, branches, or affiliates?  If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?  Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?  Describe in Schedule O the process, if any, used by the organization to review this Form 990  Did the organization have a written conflict of interest policy? If "No," go to line 13  Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?  Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done  Did the organization have a written whistleblower policy?  Did the organization have a written document retention and destruction policy?  Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?  The organization's CEO, Executive Director, or top management official  Other officers or key employees of the organization	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes	No No
10a b 11a b 12a b c 13 14 15 a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes	No No

- 17 List the States with which a copy of this Form 990 is required to be filed ►CA
- 18 Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply
  - Own website Another's website Upon request Other (explain in Schedule O)
- Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year
- State the name, physical address, and telephone number of the person who possesses the books and records of the organization ►BRUCE NELSON 9409 REGENTS ROAD La Jolla, CA (858) 453-3440

Form	990	(2012)
------	-----	--------

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

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

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

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

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

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

	1									
<b>(A)</b> Name and Title	(B) A verage hours per week (list any hours	more t perso and	han o	one l both ector	box, an o	officer stee)		(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the
	for related organizations below dotted line)	anizations   어디 그 그 그 그 그 그 그 그 그 그 그 그 그 그 그 그 그 그	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former			organization and related organizations
See Additional Data Table										
	•	•	•							Form <b>990</b> (2012)

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

	(A) Name and Title	(B) A verage hours per week (list any hours for related	more t	tion ( han d n is l	ne l both	box, an c	heck unless officer stee)	,	(D) Reportable compensation from the organization (W-	(E) Reportable compensation from related organizations (W	_	(F) Estima amount o compens from t	ted fother ation he
		Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1099-MISC)	2/1099-MISC)		organizati relate organiza	ed	
1b c	Sub-Total	s to Part VII. S	· · ection A	١.	•		_	<b>*</b>					
d	Total (add lines 1b and 1c) .	-			٠.	٠.		۰	1,497,815		0		170,388
2	Total number of individuals (in \$100,000 of reportable compe						d abov	e) w	ho received more th	an			
										_		Yes	No
3	Did the organization list any <b>fo</b> on line 1a? <i>If</i> "Yes," complete S					key •	emplo	yee, •	, or highest compen	sated employee	3		No
4	For any individual listed on line organization and related organ individual										4	Yes	
5	Did any person listed on line 1 services rendered to the organ									or individual for	5	. 55	No
Se	ection B. Independent Co	ntractors											
1	Complete this table for your fiv	/e highest comp										tay usa:-	
	compensation from the organiz	(A)	nihelis	ation	101	ille C	arenda	ы уе	ar enumy with or wi	(R)	UII S	tax year	

(A) Name and business address	(C) Compensation	
City Wide Maintenance of San Diego , 4849 Ronson Court 104 SAN DIEGO CA 92111	Description of services  Janitorial	267,608
Safdie Rabines Architects , 925 Fort Stockton Drive SAN DIEGO CA 92103	Architecture	182,233
Naturalists at Large , PO Box 3517 VENTURA CA 93006	Educational Travel	166,274
Sheppard Mullin Richter Hampton L , 333 South Hope Street LOS ANGELES CA 90071	Legal	149,090
San Diego Travel Group , 9710 Scranton Road SAN DIEGO CA 92121	Educational Travel	140,902
Total combined and an advantage of the state	I - I X I	

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ▶6

Part VI	•••	Statement o	o <b>f Revenue</b> ule O contains a respor	nse to any question i	ın thıs Part VIII			
					<b>(A)</b> Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512,513,or 514
w 22	1a	Federated cam	paigns 1a					
Contributions, Gifts, Grants and Other Similar Amounts	b	Membership du	es <b>1b</b>					
ဗ်မှု မြ	c	Fundraising ev	ents <b>1c</b>	338,672				
£ig. Fβ	d	Related organiz	zations 1d					
5 ਵੂ	e	Government grant						
Sin	-	_		4 402 225				
를 늘	f	similar amounts no	ons, gifts, grants, and <b>1f</b> ot included above	1,192,325				
들 둘	g	Noncash contributi 1a-1f \$	ons included in lines	53,528		j		j
를 등	h		s 1 a - 1 f		1,530,997			
O ē		Totali Add IIIIc.	314 11	· · · •	_,,			
e⊒	2-	TUTTON DEVENUE		Business Code	20.605.075	22 625 275		
yen	2a L	AUXILIARY SERVICE		611600	30,695,975	30,695,975		
22   o.	b	-		611600	1,241,710	1,241,710		
Š.	c c	APPLICATION FEES	S AND FORFEITURES	611600	103,143	103,143		
Program Serwce Revenue	d							
E E	e	All other progra						
ာ့   ကြွ	f	An other progra	am service revenue					
<u>a</u>	g	Total. Add lines			32,040,828			
	3		ome (including dividen ar amounts)		302,607			302,607
	4		stment of tax-exempt bond		2			2
	5	Royalties .		🕨	0			
			(ı) Real	(II) Personal				
	6a	Gross rents						
	b	Less rental expenses						
	C	Rental income or (loss)	0	0				
	d	Net rental inco	me or (loss)		0			
			(ı) Securities	(II) O ther				
	7a	Gross amount from sales of assets other than inventory	35,283,749	1,700				
	b	Less cost or other basis and	35,167,048	460,038				
		sales expenses		·				
	С	Gain or (loss)	116,701	-458,338	241 627			241.62
	d 8a	Net gain or (los Gross income f	1		-341,637			-341,637
Other Revenue	ou.	events (not inc \$338	luding 6,672 is reported on line 1c) ne 18					
<u>ā</u>	L	1	a	112,000				
둥	b C		penses <b>b</b> (loss) from fundraising	151,606 events	-39,606			-39,606
	9a	Gross income f	rom gaming activities ne 19	events p	23,000			
	ь	Less direct ev	penses b					
	c		(loss) from gaming acti	vities	0			
	10a	Gross sales of returns and allo						
			a	32,710				
	b	<del>-</del>	oods sold <b>b</b>	18,715				
-	С		(loss) from sales of inv		13,995			13,995
-	112	Miscellaneous		Business Code 611600	84,382	84,382		
	тта	OTHER INCOM	<b>™</b> □	311000	31,302	01,302		
			_					
	c d	All other reven	ue					
	e e		s 11a-11d	🕨				
	12		See Instructions .	<u> </u>	84,382			
		iocai revenue.	See Instructions .	· · · · •	33,591,568	32,125,210		-64,639

	IX Statement of Functional Expenses				Page 10
	on $501(c)(3)$ and $501(c)(4)$ organizations must complete all columns All	other organizat	ıons must comp	lete column (A )	
	Check if Schedule O contains a response to any question in this Pa	rt IX			<u> </u>
	ot include amounts reported on lines 6b, o, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	<b>(D)</b> Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States See Part IV, line 21	0			
2	Grants and other assistance to individuals in the United States See Part IV, line 22	3,864,890	3,864,890		
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16	0			
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors, trustees, and key employees	974,671	331,395	593,308	49,968
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$ ) and persons described in section $4958(c)(3)(B)$	0			
7	Other salaries and wages	14,358,158	12,491,066	1,522,792	344,300
8	Pension plan accruals and contributions (include section $401(k)$ and $403(b)$ employer contributions)	900,319	765,190	111,846	23,283
9	Other employee benefits	1,901,495	1,590,029	261,595	49,871
10	Payroll taxes	1,108,209	913,612	165,135	29,462
11	Fees for services (non-employees)				
а	Management	0			
b	Legal	253,174		253,174	
c	Accounting	68,287		68,287	
d	Lobbying	0			
e	Professional fundraising services See Part IV, line 17	16,926			16,926
f	Investment management fees	80,363		80,363	
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	1,163,570	665,141	493,266	5,163
12	Advertising and promotion	93,359	,	93,359	,
13	Office expenses	1,557,781	1,365,658	· ·	76,968
14	Information technology	284,453	224,092		8,198
15	Royalties	0			·
16	Occupancy	479,562	456,309	19,689	3,564
17	Travel	10,599	951	3,327	6,321
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0			
19	Conferences, conventions, and meetings	30,226	10,597	17,544	2,085
20	Interest	1,972,214	1,791,141	156,421	24,652
21	Payments to affiliates	0			
22	Depreciation, depletion, and amortization	2,790,937	2,655,614	114,584	20,739
23	Insurance	320,407	264,974	47,729	7,704
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	EQUIPMENT RENT & MAINTENANCE	216,234	198,566	13,418	4,250
b	EMPLOYEE TRAINING	175,744	146,686	28,030	1,028
c	PRINTING & PUBLICATIONS	72,800	356	63,881	8,563
d	BAD DEBT	71,528		71,528	
e	All other expenses	355,786	170,330	120,837	64,619
25	Total functional expenses. Add lines 1 through 24e	33,121,692	27,906,597	4,467,431	747,664
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)				

Part X Balance Sheet

FGI	tΧ	Check if Schedule O contains a response to any question in thi	s Part	×			
					(A) Beginning of year		<b>(B)</b> End of year
	1	Cash—non-interest-bearing			2,218,602	1	1,771,144
	2	Savings and temporary cash investments			26,504,974	2	19,747,635
	3	Pledges and grants receivable, net			6,913	3	2,500
	4	Accounts receivable, net			115,589	4	189,909
	5	Loans and other receivables from current and former officers, employees, and highest compensated employees. Complete P Schedule L	art II d	of	0	5	0
£3	6	Loans and other receivables from other disqualified persons (a $4958(f)(1)$ ), persons described in section $4958(c)(3)(B)$ , and and sponsoring organizations of section $501(c)(9)$ voluntary e organizations (see instructions) Complete Part II of Schedule	contrib mploy	outing employers			0
4ssets	7	Notes and loans receivable, net			0		
₹	8	Inventories for sale or use			18,033		10,221
	9	Prepaid expenses and deferred charges			455,983		491,903
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D		73,402,522	·		161,666
	Ь	Less accumulated depreciation	10b	19,586,713	55,494,823	10c	53,815,809
	11	Investments—publicly traded securities	<u> </u>		10,917,642	11	20,750,686
	12	Investments—other securities See Part IV, line 11			596,005	12	776,536
	13	Investments—program-related See Part IV, line 11			0	13	0
	14	Intangible assets			0		0
	15	Other assets See Part IV, line 11			710,570	15	693,502
	16	<b>Total assets.</b> Add lines 1 through 15 (must equal line 34) .			97,039,134		98,249,845
	17	Accounts payable and accrued expenses			3,051,554	17	2,962,236
	18	Grants payable			0	18	0
	19	Deferred revenue			12,738,994	19	13,116,376
	20	Tax-exempt bond liabilities			29,782,320	20	29,672,053
	21	Escrow or custodial account liability Complete Part IV of Sch			0		0
Liabilities	22	Loans and other payables to current and former officers, direct key employees, highest compensated employees, and disqual	ors, tr				
ge I		persons Complete Part II of Schedule L			0	22	0
	23	Secured mortgages and notes payable to unrelated third partie	es .		9,554,244	23	9,517,260
	24	Unsecured notes and loans payable to unrelated third parties			0	24	0
	25	Other liabilities (including federal income tax, payables to rela and other liabilities not included on lines 17-24) Complete Pa	art X of	Schedule	10.175.005		0.050.007
		D			12,175,365		8,252,387
	26	Total liabilities. Add lines 17 through 25			67,302,477	26	63,520,312
μÇ	27	lines 27 through 29, and lines 33 and 34. Unrestricted net assets			25,876,361	27	30,623,415
Fund Balances	27				1,247,611	28	1,480,305
<u>.</u>	28	Temporarily restricted net assets	•		2,612,685		2,625,813
ŭ.	29	·			2,012,000	29	2,020,613
ř F		Organizations that do not follow SFAS 117 (ASC 958), check be complete lines 30 through 34.	iere F	<sub> </sub> and			
Assets or	30	Capital stock or trust principal, or current funds				30	
ş	31	Paid-in or capital surplus, or land, building or equipment fund				31	
ارو	32	Retained earnings, endowment, accumulated income, or other	funds			32	
~L ,			ianas				
Net 4	33	Total net assets or fund balances			29,736,657	33	34,729,533

Par	t XI Reconcilliation of Net Assets			<u> </u>	
	Check if Schedule O contains a response to any question in this Part XI				<u></u>
1	Total revenue (must equal Part VIII, column (A), line 12)	1		33,5	591,568
2	Total expenses (must equal Part IX, column (A), line 25)	2		33,1	.21,692
3	Revenue less expenses Subtract line 2 from line 1	3		4	69,876
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) $\cdot$ .	4		29,7	36,657
5	Net unrealized gains (losses) on investments	5		5	597,073
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9		3,9	25,927
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		34,7	29,533
Par	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII				. $ abla$
				Yes	No
1	Accounting method used to prepare the Form 990				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		Νo
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or revious a separate basis, consolidated basis, or both	ewed on			
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a sep basis, consolidated basis, or both	arate			
	▼ Separate basis				
c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversig audit, review, or compilation of its financial statements and selection of an independent accountant?	nt of the	2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain Schedule O	ın			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	ne	3a		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	required	3b		

# Software ID: Software Version:

**EIN:** 95-1875978

Name: La Jolla Country Day School

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

Form 990, Part VII - Compensation of Compensated Employees, and Indepen			, I FL	JSTE	ees,	кеу	En	npioyees, Higne		
(A) Name and Title	(B) Average hours per week (list	Positio more unless an o dire	than pers office ctor/	not one on i r an trust	box s bot d a tee)	, th		(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related
		Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former			organizations
Howard Ziment President	10	×		х				0	0	0
Peter Hamilton VP Development - CYPT	1 0 0 0	×		х				0	0	0
Pat Hughes VP Strategic Planning	1 0 0 0	х		х				0	0	0
Barry Rosenbaum Treasurer	1 0 0 0	х		х				0	0	0
Sherry Bahrambeygui-Hosey Secretary	1 0 0 0	х		х				0	0	0
David Ashworth Trustee	1 0 0 0	х						0	0	0
Ben Badiee Trustee	1 0 0 0	х						0	0	0
Jeff Church Trustee	1 0 0 0	х						0	0	0
Bob Gans Trustee	1 0 0 0	х						0	0	0
Kımberly Goldman Trustee	1 0 0 0	х						0	0	0
George Guimaraes Trustee	1 0	×						0	0	0
Debby Jacobs Trustee	1 0 0 0	х						0	0	0
Lisa Lacorte Trustee	1 0 0 0	х						0	0	0
Sherry Mesman Trustee	1 0 0 0	х						0	0	0
Steve Morris Trustee	1 0 0 0	х						0	0	0
Manish Parikh Trustee	1 0 0 0	х						0	0	0
Michael Rosenberg Trustee	1 0 0 0	х						0	0	0
Alex Roudi Trustee	1 0 0 0	х						0	0	0
Jing Wang Trustee	1 0 0 0	х						0	0	0
John Collins Trustee	1 0 0 0	х						0	0	0
Earl Edwards Trustee	1 0 0 0	х						0	0	0
Beth Davidson VP Trustee - CYPT	1 0 0 0	х		х				0	0	0
Maressa Ciccone Alumni Leadership Council Pres	1 0 0 0	х						0	0	0
Angela Glynn Parents' Association President	10	Х						0	0	0
Christopher Schuck Head of School	40 0 0 0			х				430,009	0	28,492

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

40 0

0 0

Marna Weiss

Lower School Director

(A) Name and Title	(B) A verage hours per week (list any hours for related organizations below dotted line)	than	not one on i r an trust	box s bo d a	, th	Former	( <b>D</b> ) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
Bruce Nelson Chief Financial Officer	40 0 0 0		х				202,590	0	32,142
Mark Marcus Asst Head of School Oper	40 0 0 0			х			211,518	0	22,945
Robert Derby Director of Technology	40 0 0 0				х		121,118	0	16,234
Jeff Hutzler Athletic Director	40 0 0 0				х		117,814	0	16,229
Vincent Travaglione Director of Admissions	40 0 0 0				х		122,520	0	16,840
Sarah Bakhiet Asst Head of School Academics	40 0 0 0				х		152,439	0	18,955

18,551

0

139,807

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493097000434

**Employer identification number** 

OMB No 1545-0047

### **SCHEDULE A**

(Form 990 or 990EZ)

Name of the organization

La Jolla Country Day School

Department of the Treasury Internal Revenue Service

# **Public Charity Status and Public Support**

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

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

Open to Public Inspection

									95-18759		
Par				blic Charity Sta						nstructio	ns.
The o	rganı	zatıon ıs	not a priva	te foundation becaus	seitis (Forl	lınes 1 throu	igh 11, check	only one b	ox)		
1	Γ	A chur	ch, convent	on of churches, or a	ssociation of	f churches d	escribed in <b>s</b> e	ection 170(	b)(1)(A)(i).		
2	굣	A scho	ol described	in <b>section 170(b)(</b> 1	<b>L)(A)(ii).</b> (At	tach Schedı	ıle E)				
3	$\Gamma$	A hosp	ital or a cod	perative hospital se	rvice organiz	zatıon descri	bed in <b>sectio</b>	n 170(b)(1)	(A)(iii).		
4	$\Gamma$	A medi	cal researc	h organization opera	ted ın conjun	iction with a	hospital des	cribed in <b>se</b>	tion 170(b)(	1)(A)(iii)	. Enter the
				ty, and state							
5	Г	Anorg	anızatıon op	erated for the benefi	t of a college	or universi	ty owned or o	perated by	a government	al unit de	scribed in
		sect ior	170(b)(1)(	(A)(iv). (Complete P	art II )						
6	$\sqcap$	A feder	al, state, or	local government o	r government	tal unıt desc	rıbed ın <b>secti</b>	on 170(b)(1	L)(A)(v).		
7	$\sqcap$	Anorg	anization th	at normally receives	a substantia	al part of its	support from	a governme	ental unit or fi	om the g	eneral public
	_			on 170(b)(1)(A)(vi).							
8	<u> </u>		-	described in <b>sectio</b>			-	-			
9	ı	_		at normally receives					•	•	
		•		ities related to its e	•	=		•			
				oss investment inco						tax) from	businesses
		•		ganızatıon after June	•			•	•		
10	Γ	Anorg	anızatıon or	ganized and operate	d exclusively	to test for p	oublic safety	See <b>sectio</b>	n 509(a)(4).		
11	Γ			ganized and operate							
			•	ly supported organiz				•		ee <b>sectio</b> i	<b>1 509(a)(3).</b> Check
				bes the type of support of the best between two the best best best best best best best bes						n-functio	nally integrated
e	Г			ox, I certify that the							
	'		_	on managers and ot	_		,				•
			1509(a)(2)	<b>,</b>			,	<b></b>			,(-,
f			-	received a written d	etermınatıon	from the IR	S that it is a	Type I, Typ	e II, or Type	III suppo	rtıng organizatıo <u>n,</u>
			this box	2006 1 11				•	6.1		Γ
g			august 17, and persons?	2006, has the organ	ization accep	oted any gift	or contributi	on from any	or the		
			<b>J</b> ,	rectly or indirectly o	controls, eith	ier alone or t	ogether with	persons de	scribed in (ii)		Yes No
				governing body of th	•		_	F			1g(i)
				er of a person descr		_					1g(ii)
				lled entity of a perso			ahove?				lg(iii)
h				ng information about						<u> </u>	·9(···/
•		110114	circ ronowi	ng miormation about	the support	ca organizat	1011(3)				
	) Nan	ne of	(ii) EIN	(iii) Type of	(iv) Is	the	(v) Did you	ı notıfv	(vi) Is	the	(vii) A mount of
•	uppoi		(,	organization	organizati		the organiz	,	organizati		monetary
or	ganiz	ation		(described on	col (i) lis		ın col (i) d	•	col (i) org		support
				lines 1 - 9 above	your gove	_	suppor	t?	ın the U	S?	
				or IRC section	docume	nt?					
				(see instructions))				T			_
					Yes	No	Yes	No	Yes	No	
				l		1	1			1	

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

Schedule A (Form 990 or 990-EZ) 2012 Page 3 Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.) Section A. Public Support Calendar year (or fiscal year beginning (a) 2008 **(b)** 2009 (c) 2010 (d) 2011 (e) 2012 (f) Total in) 🟲 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt

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

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

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

Schedule A (Form 990 or 990-EZ) 2012

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DLN: 93493097000434

OMB No 1545-0047

**SCHEDULE D** (Form 990)

Department of the Treasury

► 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

**Supplemental Financial Statements** 

Open to Public

itema	Revenue Service Attach to For	m 990. F See separate instructions.		TIIIS	pecu	JII
	me of the organization Jolla Country Day School			oloyer identification i	number	
-	O and allow Malatalata Base Ad	in de la colon Civila E		1875978		C 11
Pe	organizations Maintaining Donor Adv organization answered "Yes" to Form 990		unas	or Accounts. Co	mpiete	ır tne
	organization anowered Tes to Form 330	(a) Donor advised funds		(b) Funds and other	accoun	ts
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 advis- funds are the organization's property, subject to the or		nor adv	ised $ ag{ }$	Yes	┌ No
6	Did the organization inform all grantees, donors, and dused only for charitable purposes and not for the bene			er purpose		<b>–</b>
	conferring impermissible private benefit?			·		No
	rt II Conservation Easements. Complete if		to Forr	n 990, Part IV, line	e /.	
1	Purpose(s) of conservation easements held by the org Preservation of land for public use (e.g., recreation Protection of natural habitat Preservation of open space	or education)		rically important land d historic structure	area	
2	Complete lines 2a through 2d if the organization held a easement on the last day of the tax year	a qualified conservation contribution in	the forr	n of a conservation		
	customent on the fast auty of the tax your			Held at the End o	of the Y	'ear
а	Total number of conservation easements		2a	11012 20 2112		
b	Total acreage restricted by conservation easements		2b			
c	Number of conservation easements on a certified histo	oric structure included in (a)	2c			
d	Number of conservation easements included in (c) accommodate structure listed in the National Register	, ,	2d			
3	Number of conservation easements modified, transferi	red. released. extinguished. or terminat	ed by th	ne organization during	a	
	the tax year ►	,	,	,	2	
4	Number of states where property subject to conservat	ion easement is located ►				
5	Does the organization have a written policy regarding enforcement of the conservation easements it holds?	the periodic monitoring, inspection, han	dling of		Yes	┌ No
6	Staff and volunteer hours devoted to monitoring, inspe	cting, and enforcing conservation ease	ments (	during the year		
7	Amount of expenses incurred in monitoring, inspecting	g, and enforcing conservation easement	s durın	g the year		
В	Does each conservation easement reported on line 2(and section 170(h)(4)(B)(ii)?	d) above satisfy the requirements of sec	ction 1	70(h)(4)(B)(ı)	Yes	┌ No
9	In Part XIII, describe how the organization reports co balance sheet, and include, if applicable, the text of th					
	the organization's accounting for conservation easeme			_		
ar	Complete if the organization answered "Y	es" to Form 990, Part IV, line 8.				
1a	If the organization elected, as permitted under SFAS 1 works of art, historical treasures, or other similar asseservice, provide, in Part XIII, the text of the footnote to	ets held for public exhibition, education,	or rese	earch in furtherance o		:
b	If the organization elected, as permitted under SFAS 1 works of art, historical treasures, or other similar asseservice, provide the following amounts relating to thes	ets held for public exhibition, education,				:
	(i) Revenues included in Form 990, Part VIII, line 1			<b>►</b> \$		
	(ii) Assets included in Form 990, Part X			<b>►</b> \$		
2	If the organization received or held works of art, histor following amounts required to be reported under SFAS					
а	-	( ,		<b>.</b>		
	Revenues included in Form 990, Part VIII, line 1			<b>►</b> \$		

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

	Organizations Maintaining Co										ontinued)
3	Using the organization's acquisition, access collection items (check all that apply)	ion, and other recor	ds, ch	neck a	•	_		-	se of	ıts	
а	Public exhibition		d	ı	Loan or	exchange prog	rams				
b	Scholarly research		e	Γ	Other						
С	Preservation for future generations										
4	Provide a description of the organization's co Part XIII	ollections and expla	ıın hov	w they	/ further	the organization	n's ex	cempt purpos	e ın		
5	During the year, did the organization solicit							nılar	_	.,	<b></b> .
Dar	assets to be sold to raise funds rather than to the sold to raise funds rather than to the sold to the		-					oc" to Form	,	Yes	│ No
1401	Part IV, line 9, or reported an an						uı	es to roin	1 330	, ,	
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?	ian or other interme	ediary	for c	ontributio	ons or other ass	sets	not	Г	Yes	┌ No
b	If "Yes," explain the arrangement in Part XII	I and complete the	follov	ving t	able	_					
									Amoι	ınt	
C	Beginning balance						1c				
d	Additions during the year						1d				
е	Distributions during the year						1e				
f	Ending balance						1f				
2a	Did the organization include an amount on Fo	orm 990, Part X, lin	e 21?						Γ	Yes	┌ No
ь	If "Yes," explain the arrangement in Part XII	I Check here if the	expla	anatio	n has be	en provided in f	oart :	XIII			Γ
Pa	rt V Endowment Funds. Complete										
		(a)Current year	(b)	Prior y		(c)Two years back	_	-	-	)Four y	ears back
1a	Beginning of year balance	14,363,469			060,297	9,899,80		6,748,7	_		7,910,688
b	Contributions	5,965,122		1,8	899,235	1,348,37	5	2,688,8	51		338,800
С	Net investment earnings, gains, and losses	883,864		-!	561,610	1,854,45	5	522,5	21	-	-1,465,250
d	Grants or scholarships						_				
е	Other expenditures for facilities and programs	53,430			34,453	42,33	3	60,3	18		35,502
f	Administrative expenses						$\bot$		4		
g	End of year balance	21,159,025		14,	363,469	13,060,29	7	9,899,8	00		6,748,736
2	Provide the estimated percentage of the cur	rent year end balan	ce (lın	ie 1g,	column	(a)) held as					
а	Board designated or quasi-endowment ►	82 800 %									
b	Permanent endowment ► 12 400 %										
C	Temporarily restricted endowment ► 4 8 The percentages in lines 2a, 2b, and 2c sho	00 % uld equal 100%									
3a	Are there endowment funds not in the posses	ssion of the organiz	ation	that a	re held a	and administere	d for	the			
	organization by  (i) unrelated organizations							Г	Ba(i)	Yes	No
	(ii) related organizations			•			•	-	Ba(ii)	165	No
ь	If "Yes" to 3a(II), are the related organization						٠.	· . · . · . [-	3b		113
4	Describe in Part XIII the intended uses of the							L			<u> </u>
Par	t VI Land, Buildings, and Equipme	ent. See Form 99	0, Pa	art X,	line 10						
	Description of property				Cost or ot (investme			(c) Accumulation		( <b>d)</b> Bo	ok value
1a	Land					9,920	0,000		$\neg$		9,920,000
b	Buildings					58,014	1,005	16,202,	129	4	1,811,876
c	Leasehold improvements								寸		
	Equipment						0 011	3,384	F04		1 515 227
d	Equipinent		•			4,899	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	] 3,504,	,584		1,515,327
	Other		·			<del>-  </del>	3,606	3,304,	,584		568,606

Part VIII Investments—Other Securities. See	Form 990, Part X, line 1.	2.
(a) Description of security or category	(b)Book value	(c) Method of valuation
(including name of security)		Cost or end-of-year market value
(1)Financial derivatives		
(2)Closely-held equity interests		
Other		
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)		
	5 000 5 11/1	
Part VIII Investments—Program Related. See		
(a) Description of investment type	(b) Book value	(c) Method of valuation
		Cost or end-of-year market value
	†	<u> </u>
	+	
	+	<u> </u>
Total. (Column (b) must equal Form 990, Part X, col (B) line 13 )		
Part IX Other Assets. See Form 990, Part X, lii	ne 15.	(b) Book value
	ne 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, lii	ne 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, lii	ne 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, lii	ne 15.	(b) Book value
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Part IX Other Assets. See Form 990, Part X, lii	ne 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, lii	ne 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, lii	ne 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, lii	ne 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, lii	ne 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, lii	ne 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, lii	ne 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, lii	ne 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, lii	ne 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, lii	ne 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, lii	ne 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, III (a) Descrip	ne 15. otion	
Part IX Other Assets. See Form 990, Part X, lii	ne 15. otion	(b) Book value
Part IX Other Assets. See Form 990, Part X, lin (a) Description (b) must equal Form 990, Part X, col.(B) line 15	ne 15. ption	
Part IX Other Assets. See Form 990, Part X, III  (a) Description  Total. (Column (b) must equal Form 990, Part X, col.(B) line 15  Part X Other Liabilities. See Form 990, Part X	ne 15. ption  .) (, line 25.	
Part IX Other Assets. See Form 990, Part X, lin (a) Description (b) must equal Form 990, Part X, col.(B) line 15	ne 15. ption	
Part IX Other Assets. See Form 990, Part X, III  (a) Description  Total. (Column (b) must equal Form 990, Part X, col.(B) line 15  Part X Other Liabilities. See Form 990, Part X	ne 15. ption  .) (, line 25.	
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15  Part X Other Liabilities. See Form 990, Part X  (a) Description of liability  Federal income taxes	.)	
Part IX Other Assets. See Form 990, Part X, lin  (a) Descrip  Total. (Column (b) must equal Form 990, Part X, col.(B) line 15  Part X Other Liabilities. See Form 990, Part X  (a) Description of liability	ne 15. ption  (c)	
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15  Part X Other Liabilities. See Form 990, Part X  (a) Description of liability  Federal income taxes	.)	
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15  Part X Other Liabilities. See Form 990, Part X  (a) Description of liability  Federal income taxes	.)	
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15  Part X Other Liabilities. See Form 990, Part X  (a) Description of liability  Federal income taxes	.)	
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15  Part X Other Liabilities. See Form 990, Part X  (a) Description of liability  Federal income taxes	.)	
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15  Part X Other Liabilities. See Form 990, Part X  (a) Description of liability  Federal income taxes	.)	
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15  Part X Other Liabilities. See Form 990, Part X  (a) Description of liability  Federal income taxes	.)	
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15  Part X Other Liabilities. See Form 990, Part X  (a) Description of liability  Federal income taxes	.)	
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15  Part X Other Liabilities. See Form 990, Part X  (a) Description of liability  Federal income taxes	.)	
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15  Part X Other Liabilities. See Form 990, Part X  (a) Description of liability  Federal income taxes	.)	
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15  Part X Other Liabilities. See Form 990, Part X  (a) Description of liability  Federal income taxes	.)	
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Total. (Column (b) must equal Form 990, Part X, col.(B) line 15  Part X Other Liabilities. See Form 990, Part X  (a) Description of liability  Federal income taxes	.)	
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15  Part X Other Liabilities. See Form 990, Part X  (a) Description of liability  Federal income taxes	.)	
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15  Part X Other Liabilities. See Form 990, Part X  (a) Description of liability  Federal income taxes	.)	
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15  Part X Other Liabilities. See Form 990, Part X  (a) Description of liability  Federal income taxes	.)	
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15  Part X Other Liabilities. See Form 990, Part X  (a) Description of liability  Federal income taxes	.)	
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15  Part X Other Liabilities. See Form 990, Part X  (a) Description of liability  Federal income taxes  INTEREST RATE SWAPS	ne 15. ption  (c)	
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15  Part X Other Liabilities. See Form 990, Part X  (a) Description of liability  Federal income taxes	.)	

Par	t XI Reconciliation of Revenue per Audited Financial Statements With Revenue	oer Re	eturn
1	Total revenue, gains, and other support per audited financial statements	1	34,339,635
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments		
b	Donated services and use of facilities		
c	Recoveries of prior year grants		
d	Other (Describe in Part XIII )		
e	Add lines <b>2a</b> through <b>2d</b>	2e	577,747
3	Subtract line <b>2e</b> from line <b>1</b>	3	33,761,888
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 . 4a		
b	Other (Describe in Part XIII )		
c	Add lines <b>4a</b> and <b>4b</b>	4c	-170,320
5	Total revenue Add lines <b>3</b> and <b>4c.</b> (This must equal Form 990, Part I, line 12)	5	33,591,568
Part	<b>XII</b> Reconciliation of Expenses per Audited Financial Statements With Expenses	s per	Return
1	Total expenses and losses per audited financial statements	1	29,346,759
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities	]	
b	Prior year adjustments	]	
C	Other losses		
d	Other (Describe in Part XIII )		
e	Add lines <b>2a</b> through <b>2d</b>	2e	170,320
3	Subtract line <b>2e</b> from line <b>1</b>	3	29,176,439
4	A mounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIII )		
c	Add lines <b>4a</b> and <b>4b</b>	4c	3,945,253
5	Total expenses Add lines <b>3</b> and <b>4c.</b> (This must equal Form 990, Part I, line 18)	5	33,121,692

### Part XIII Supplemental Information

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

ınformatıon		
Identifier	Return Reference	Explanation
Description of Intended Use of Endowment Funds	Schedule D, Part V, Line 4	Board designated endowment funds are used at the discretion of the Board, and may vary from time-to-time. Interest and dividends earned on donor-restricted endowment funds are used for the purpose stipulated by the donors. Due to the relatively small size of its endowment, the School has not enacted a policy of spending principal or principal appreciation of the funds (absent donor requirements to the contrary). FIN 48 (ASC 740) Footnote Schedule D, Part X, Line 2. The School follows authoritative guidance related to uncertain tax positions. The school recognizes accrued interest and penalties associated with uncertain tax positions as part of the income tax provision, when applicable. The School has no uncertain tax positions or amounts accrued in the financial statements related to uncertain tax positions at June 30, 2013. All tax-exempt entities are subject to review and audit by federal, state and other applicable agencies. Such agencies may review the taxability of unrelated business income, or the qualification of the organization as a tax-exempt entity under Internal Revenue. Code Section 501(c)(3) and applicable state statutes. As of June 30, 2013, the federal statute of limitations remains open for the 2010 through 2013 tax years. The statute of limitations for the state income tax remains open for 2009 through 2013 tax years. Other Adjustments Schedule D, Part XI, Line 2d. Custodial Fees \$ (80,363) Tuition Financial Assistance \$ (3,864,890) Change in Value of Beneficial Interest in Perpetual Trust \$ 2,948

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As Filed Data -

DLN: 93493097000434

OMB No 1545-0047

### **SCHEDULE E**

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

# **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.

**Employer identification number** 

a Joll	a Country Day School	• •			
		95-1875978			
Pa	rtI			YES	NO
1	Does the organization have a racially nondiscriminatory policy toward students by statement in rother governing instrument, or in a resolution of its governing body?	ts charter, bylaws,	1	Yes	
2	Does the organization include a statement of its racially nondiscriminatory policy toward student brochures, catalogues, and other written communications with the public dealing with student adriprograms, and scholarships?		2	Yes	
3	Has the organization publicized its racially nondiscriminatory policy through newspaper or broads the period of solicitation for students, or during the registration period if it has no solicitation prothat makes the policy known to all parts of the general community it serves? If "Yes," please desplease explain If you need more space use Part II	gram, ın a way	3	Yes	
4	Does the organization maintain the following?		-		
	Records indicating the racial composition of the student body, faculty, and administrative staff?		4a	Yes	
b	Records documenting that scholarships and other financial assistance are awarded on a racially basis?	nondiscriminatory	4b	Yes	
C	Copies of all catalogues, brochures, announcements, and other written communications to the pu with student admissions, programs, and scholarships?	blic dealing	4c	Yes	
d	Copies of all material used by the organization or on its behalf to solicit contributions?		4d	Yes	
5 a	Does the organization discriminate by race in any way with respect to Students' rights or privileges?				No
	Admissions policies?		5b		No
	Employment of faculty or administrative staff?		5c		No
	Scholarships or other financial assistance?		5d		No
e	Educational policies?		5e		No
f	Use of facilities?		5f		No
g	Athletic programs?		5g		No
h	Other extracurricular activities?		5h	l	No
	If you answered "Yes" to any of the above, please explain If you need more space, use Part II		  - 		
6a	Does the organization receive any financial aid or assistance from a governmental agency?		6a		No
b	Has the organization's right to such aid ever been revoked or suspended?		6b		Νo
7	If you answered "Yes" to either line 6a or line 6b, explain on Part II  Does the organization certify that it has complied with the applicable requirements of sections 4  of Rev Proc 75-50, 1975-2 C B 587, covering racial nondiscrimination? If "No," explain on Pa		7	Yes	

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

ldentifier	Return Reference	Explanation
Explanation of Nondiscriminatory Policy	Schedule E, Part I, Line 3	Notice of nondiscriminatory policy was advertised in the San Diego Union Tribune on May 21, 2013

Schedule E (Form 990 or 990-EZ) 2012

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DLN: 93493097000434

**Supplemental Information Regarding** OMB No 1545-0047

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

Department of the Treasury

Internal Revenue Service

Fundraising or Gaming Activities

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a. Form 990-EZ filers are not required to complete this part.

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

Open to Public Inspection

Name of the organization La Jolla Country Day School

**Employer identification number** 

La Joha Country Day School					95-1875978	
Part I Fundraising Act	ivities. Complete	ıf the or	ganızatı	on answered "Yes" t	o Form 990, Part IV,	line 17.
1 Indicate whether the organia	citations i written or oral agre Form 990, Part VII) t paid individuals or	ement with or entity i entities (fi	e f g any indi n connec	Solicitation of non Solicitation of gov Special fundraising vidual (including officer	-government grants ernment grants g events rs, directors, trustees undraising services?	<b>V Yes I N</b> draiseris
(i) Name and address of ındıvıdual or entity (fundraiser)	(ii) Activity	fundrais custo cont contrib		(iv) Gross receipts from activity	(v) A mount paid to (or retained by) fundraiser listed in col (i)	(vi) A mount paid to (or retained by) organization
Marts Lundy Inc 1200 Wall Street West Lyndsurst, NJ 07071	Feasibility Study	Yes	No No	0	16,926	-16,926
Total			<b>▶</b>	0	16,926	-16,926
3 List all states in which the dicensing	organization is regis		.ensea to	Solicit lulius or nas de	en notmed it is exempt	iioiii registration or

Pa	rt II	Fundraising Events. Commore than \$15,000 of fundrevents with gross receipts g	aising event contributi			
			(a) Event #1  Golf Tournament (event type)	(b) Event #2  GALA (event type)	(c) O ther events  0 (total number)	(d) Total events (add col (a) through col (c))
≗	1	Gross receipts	23,700			450,672
Revenue	2	Less Contributions	7,125			338,672
- <u>~</u>	3	Gross income (line 1 minus line 2)	16,575			112,000
	4	Cash prizes				
ဟ	5	Noncash prizes				
Expenses	6	Rent/facility costs	12,000			12,000
ă	7	Food and beverages .	12,303	52,866		65,169
Direct	8	Entertainment		2,250		2,250
à	9	Other direct expenses .	3,456	68,731		72,187
	10	Direct expense summary Add lin	es 4 through 9 in column	(d)		(151,606)
	11	Net income summary Combine li	ne 3, column (d), and line	10		-39,606
Par	t II	Gaming. Complete if the oi \$15,000 on Form 990-EZ, lii		"Yes" to Form 990, Pa	rt IV, line 19, or rep	orted more than
Revenue	1	Gross revenue	(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
Expenses		Cash prizes				
ă		Non-cash prizes				
Direct	4	Rent/facility costs				
	5	Other direct expenses				
	6	Volunteer labor	┌ Yes No	┌ Yes	┌ Yes	
		Direct expense summary Add line				
	8	Net gaming income summary Com	bine lines 1 and 7 in colu	ımn (d)	<u> </u>	
9		er the state(s) in which the organiza		<u> </u>		
a b		he organization licensed to operate				
10a b		re any of the organization's gaming Yes," explain	licenses revoked, suspen	ded or terminated during	the tax year?	

)oes	the organization operate gaming	activities with nonmembers	7		· ·   Yes   No
<b>.2</b>	Is the organization a grantor, ber	neficiary or trustee of a trus	t or a mem	ber of a partnership or other entity	
	formed to administer charitable of	gamıng <sup>,</sup>			Г <sub>Yes</sub> Г <sub>No</sub>
3	Indicate the percentage of gamir	ng activity operated in			
а	The organization's facility				13a
4	Enter the name and address of th	ne person who prepares the	organızatıo	on's gaming/special events books a	nd records
	Name 🟲				
	Address -				
b	If "Yes," enter the amount of gar amount of gaming revenue retain			tion 🟲 \$ and	I the
c	If "Yes," enter name and address	s of the third party			
	Name 🕨				
	Address ►				
16	Gaming manager information				
	Name 🕨				
	Gaming manager compensation	<b>*</b> \$			
	Description of services provided	· •			
	☐ Director/officer	┌ <sub>Employee</sub>		Independent contractor	
<b>.7</b>	Mandatory distributions	r = 111p1 = y = =		1 Independent Lenning	
		er state law to make charita	ble dıstrıbu	itions from the gaming proceeds to	
	retain the state gaming license?				Fyes FNo
b			stributed to	o other exempt organizations or spe	
_	in the organization's own exempt				
Par	<b>Supplemental Infor</b> columns (III) and (v), a	mation. Complete this p	part to pro 10b, 15b,	ovide the explanations required , 15c, 16, and 17b, as applicabl ons).	
	Identifier	Return Reference		Explanat	ion
Hıgh	est Paid Fundraiser Address	Schedule G, Part I, Line 2b		The address for Marts & Lundy Inc Lyndhurst, NY 07071	ıs 1200 Wall Street West

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

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

OMB No 1545-0047

DLN: 93493097000434

Open to Public Inspection

Department of the Treasury

Schedule I

(Form 990)

Internal Revenue Service

vame or the organization						Employer Identification	on number
_a Jolla Country Day School						95-1875978	
Part I General Information	on on Grants and	d Assistance				•	
<ol> <li>Does the organization maintain the selection criteria used to available.</li> <li>Describe in Part IV the organization</li> </ol>	ward the grants or as ation's procedures fo	sistance? or monitoring the use o	f grant funds in the Unite	d States			▼ Yes
<b>Part II Grants and Other A</b> Form 990, Part IV, lin							es" to
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of gran
<ul><li>2 Enter total number of section 5</li><li>3 Enter total number of other organization</li></ul>						<b>.</b> _	
For Paperwork Reduction Act Notice, se				Cat No 50055P			le I (Form 990) 2012

Schedule I	Schedule I (Form 990) 2012
Part III	<b>Partitit</b> Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22.
	Dart III can be duralicated if additional coace is pooded

(e)Method of valuation (book, (f)Description of non-cash assistance The financial assistance committee meets at least annually to review the applications for financial assistance Qualifying FMV, appraisal, other) Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional information non-cash assistance (d)A mount of 3,864,890 (c)Amount of cash grant **Explanation** Part III can be duplicated it additional space is needed. 236 (b)Number of recipients Supplemental Information. **Return Reference** (a)Type of grant or assistance (1) Student Financial Assistance Schedule I, Part I, Line 2 Part IV Identifier

Schedule I (Form 990) 2012

students are granted funds on a demonstrated needs basis

DLN: 93493097000434

OMB No 1545-0047

### **Schedule J** (Form 990)

Department of the Treasury Internal Revenue Service

For certain Officers, Directors, Trustees, Key Employees, and Highest **Compensated Employees** ► Complete if the organization answered "Yes" to Form 990, Part IV, question 23.

► Attach to Form 990. ► See separate instructions.

**Compensation Information** 

Open to Public Inspection

Name of the organization La Jolla Country Day School

**Employer identification number** 

95-1875978

Pa	Questions Regarding Compensation					
					Yes	No
1a	Check the appropriate box(es) if the organization provi 990, Part VII, Section A, line 1a Complete Part III t					
	First-class or charter travel	⊽	Housing allowance or residence for personal use			
	Travel for companions	Ė	Payments for business use of personal residence			
	Tax idemnification and gross-up payments	Γ	Health or social club dues or initiation fees			
	Discretionary spending account	Γ	Personal services (e g , maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the orga					
	reimbursement or provision of all of the expenses des	cribed	d above? If "No," complete Part III to explain	1b	Yes	
2	Did the organization require substantiation prior to rei directors, trustees, and the CEO/Executive Director,			2	Yes	
3	Indicate which, if any, of the following the filing organization's CEO/Executive Director Check all that used by a related organization to establish compensation	t appl	y Do not check any boxes for methods			
	Compensation committee	굣	Written employment contract			
	Independent compensation consultant	Ī				
	Form 990 of other organizations	굣	Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, Pa or a related organization	art VII	I , Section A , line $1a$ with respect to the filing organization			
а	Receive a severance payment or change-of-control pa	aymer	nt?	4a		No
b	Participate in, or receive payment from, a supplement	al non	qualified retirement plan?	4b		No
c	Participate in, or receive payment from, an equity-bas	ed co	mpensation arrangement?	4c		No
	If "Yes" to any of lines 4a-c, list the persons and prov	ıde th	ne applicable amounts for each item in Part III			
	Only 501(c)(3) and 501(c)(4) organizations only must					
5	For persons listed in Form 990, Part VII, Section A, I compensation contingent on the revenues of	ıne 1a	, did the organization pay or accrue any			
а	The organization?			5a		No
b	Any related organization?			5b		No
	If "Yes," to line 5a or 5b, describe in Part III					
6	For persons listed in Form 990, Part VII, Section A, I compensation contingent on the net earnings of	ıne 1a	, did the organization pay or accrue any			
а	The organization?			6a		No
b	Any related organization?			6b		No
	If "Yes," to line 6a or 6b, describe in Part III					
7	For persons listed in Form 990, Part VII, Section A, I payments not described in lines 5 and 6? If "Yes," de			7		No
8	Were any amounts reported in Form 990, Part VII, pa	ıd or a	accured pursuant to a contract that was			
	subject to the initial contract exception described in F					
	ın Part III			8		No
9	If "Yes" to line 8, did the organization also follow the section 53 $4958-6(c)$ ?	rebutt	able presumption procedure described in Regulations	9		

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

For each individual whose compensation must be reported in Schedule 3, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii) Do not list any individuals that are not listed on Form 990, Part VII

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

(A) Name and Title		( <b>B</b> ) Breakdown of	(B) Breakdown of W-2 and/or 1099-MISC compensation	C compensation	(c) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	reported as deferred in prior Form 990
(1)Christopher Schuck Head of School	(ii)	281,210	50,000	0 0	20,437	8,055	458,501	0
(2)Bruce Nelson Chief Financial Officer	(ii)	201,670	0	920	15,792	16,350	234,732	0
(3)Mark Marcus Asst Head of School Oper	(ii)	206,405	0	5,113	15,480	7,465	234,463	0
(4)Sarah Bakhiet Asst Head of School Academics	(ii)	151,479	0	096	11,370	0	171,394	0
(5)Marna Weiss Lower School Director	(E)	139,067	0	740	10,476	8,075	158,358	0

Schedule J (Form 990) 2012

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

בונים במווים למורום מווי מממומים ווויסווומיום וויסווומיום וויסווומיום וויסווומיום וויסווומיום וויסווומיום וויסו		
Identifier	Return Reference	Explanation
Housing Allowance	Schedule J, Part I, Ine 1a	As part of the Head of School's employment contract, the school provides him with a housing allowance which is reported as taxable compensation on Form W-2. Severance Arrangements Schedule J, Part I, Line 4a The Head of School has a severance provision as part of his employment contract. The base salary may be paid for the amount of time remaining on the term of his contract up to a maximum of ten months, depending on the reason for termination.

Schedule J (Form 990) 2012

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OMB No 1545-0047

**Inspection** 

DLN: 93493097000434

Open to Public

Schedule K (Form 990)

**Supplemental Information on Tax Exempt Bonds** ▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 24a. Provide descriptions,

explanations, and any additional information in Part VI.

► Attach to Form 990.

► See separate instructions.

Internal Revenue Service

Department of the Treasury

Name	e of the organization			Employer identification number											
Laj	olla Country Day School									95-	-18759	78			
Pa	art I Bond Issues			1						,					
	(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue	price	(f	<b>(f)</b> Descriptio	n of purpose	( <b>g)</b> De	feased	beh	On alf of suer		Pool ncing
										Yes	No	Yes	No	Yes	No
A	ABAG Finance Authority for Nonprofit Corporations	94-3130123	00037CQQ6	10-14-2010	29,85	50,000	Refu	unding of Prio	r Bonds		×		x		х
Pa	rtill Proceeds					•	<u> </u>								
 					Α	1		В			С			D	
1	A mount of bonds retired						0								
2	A mount of bonds legally defeased					0									
3	Total proceeds of issue			2	9,850,0	000									
4	Gross proceeds in reserve funds					0									
5	Capitalized interest from proceeds					0				_			_		
6	Proceeds in refunding escrows					0									
7	Issuance costs from proceeds	s					0								
8	Credit enhancement from proc	ceeds					0								
9	Working capital expenditures	from proceeds					0								
10	Capital expenditures from pro	oceeds					0								
11	Other spent proceeds				2	29,850,0	,850,000								
12	O ther unspent proceeds						0								
13	Year of substantial completion	n					•					•			
ı —					Yes	No		Yes	No	Yes	N	lo	Yes		No
14	Were the bonds issued as part	rt of a current refundi	ng issue?		X						Π				
15	Were the bonds issued as part	rt of an advance refur	nding issue?			Х									
16	Has the final allocation of prod	ceeds been made?				Х									
17	Does the organization maintai allocation of proceeds?	ın adequate books ar	nd records to suppo	rt the final	Х				_			_			
Pa	rt 💵 Private Business U	Jse													
					A			В			С			D	
1	14/ the current and a new trans		ambanafan II	Cb.ah.aumad	Yes	No	_	Yes	No	Yes	N	lo	Yes		No
1	Was the organization a partne	ir in a partnersnip, or	ra member of an LL	C, which owned		Х		1							

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

property financed by tax-exempt bonds?

financed property?

Χ

Sche	Schedule K (Form 990) 2012									۵	Page 2
Par	<pre>iii Private Business Use (Continued)</pre>			_					-		
		ı	Yes	2	Yes	2	Yes	<b>₽</b> ∪_	Yes	a s	9
æ	Are there any management or service contracts that may result in private busines of bond-financed property?	Jasn ssause		×							
q	If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts relating to the financed property?	ther outside sed									
υ	Are there any research agreements that may result in private business use of bon financed property?	of bond-		×							
ਰ	If "Yes" to line 3c, does the organization routinely engage bond counsel or other outsid counsel to review any research agreements relating to the financed property?	ther outside ?									
4	Enter the percentage of financed property used in a private business use by entities other than a section $501(c)(3)$ organization or a state or local government	entities •		%0		%			%		%
īv	Enter the percentage of financed property used in a private business use as a resi unrelated trade or business activity carried on by your organization, another secti (c)(3) organization, or a state or local government	a result of section 501		%		%			%		0/0
9	Total of lines 4 and 5			%		%			%		%
_	Does the bond issue meet the private security or payment test?			×							
8a	Has there been a sale or disposition of any of the bond financed property to a nongovernmental person other than a $501(c)(3)$ organization since the bonds were issued?	s were		×							
q	If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed	sposed of		%		%			%		%
U	If "Yes" to line 8a, was any remedial action taken pursuant to Regulations section 1 141-12 and 1 145-2 $^{\circ}$	ctions		×							
6	Has the organization established written procedures to ensure that all nonqualified bonds of the issue are remediated in accordance with the requirements under Regulations sections 1 141-12 and 1 145-2?	alified r	×								
Par	Part IV Arbitrage					_					
		4		9		-	ہ			ا	
	Has the issuer filed Form 8038-T2	Yes	<b>2</b> >	Yes	2	Yes		2	Yes		2
7 7	If "No" to line 1, did the following apply?		<							-	
g	Rebate not due yet?	×									
q	Exception to rebate?										
U	No rebate due?										
	If you checked "No rebate due" in line 2c, provide in Part VI the date the rebate computation was performed										
m	Is the bond issue a variable rate issue?	×									
各	Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue?		×								
Ф	Name of provider										
U	Term of hedge										
₽	Was the hedge superintegrated?										
Ø	Was a hedge terminated?										
								Sch	Schedule K (Form 990) 2012	orm 990	) 2012

Part IV Arbitrage (Continued)

			A		В		C		D	
			Yes	No	Yes	No	Yes	No	Yes	No
2a	Were gross proceeds invested in a guaranteed investment contract (GIC)?	n a guaranteed investment		×						
q	Name of provider		0							
v	Term of GIC									
٥	Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?	or establishing the fair market								
9	Were any gross proceeds investoperiod?	Were any gross proceeds invested beyond an available temporary period?	×							
	Has the organization established written procedures to monitor the requirements of section $148^{ 2}$	d written procedures to monitor	×							
Par	Part V Procedures To Unde	Procedures To Undertake Corrective Action								
			A		g		C		Q	
			Yes	No	Yes	No	Yes	No	Yes	No
<b>ਜ</b>	Has the organization established written procedures to ensure that violations of federal tax requirements are timely identified and corrected through the voluntary closing agreement prograr self-remediation is not available under applicable regulations?	Has the organization established written procedures to ensure that violations of federal tax requirements are timely identified and corrected through the voluntary closing agreement program if self-remediation is not available under applicable regulations?	×							
Pa	Part VI Supplemental Info	Supplemental Information. Complete this part to provide additional information for responses to questions on Schedule K (see instructions)	ovide addition	al informatio	n for respon	ses to quest	ions on Sche	dule K (see	instructions)	_
	Identifier	Return Reference				Explanation	tion			
Sche	Schedule K, Part I, Column F	0 \$2 \$2	The date of issual \$214,386 of unsp	f issuance of the bonds refunded were $6/29/2006$ and $7/12/2007$ Schedule K, Part II There were of unspent proceeds at the time of the 2010 refunding that were expended in the normal course of	Is refunded we at the time of t	re 6/29/2006 he 2010 refui	and 7/12/200 nding that were	)7 Schedule k e expended in	<ol> <li>Part II There</li> <li>the normal count</li> </ol>	were rse of

Schedule K (Form 990) 2012

business

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DLN: 93493097000434

OMB No 1545-0047

**Inspection** 

Department of the Treasury Internal Revenue Service

**SCHEDULE M** 

(Form 990)

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

**Noncash Contributions** 

Name of the organization La Jolla Country Day School

**Employer identification number** 

					95-1875978			
Pa	Types of Property	<u> </u>		Τ				
		(a) Check ıf applıcable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line	(c Method of d noncash contrib	letermi	_	ts
	Art—Works of art							
	Art—Historical treasures .							
	Art—Fractional interests							
	Books and publications	X		2,290	Fair Market Value			
5	Clothing and household							
6	goods							
	Boats and planes							
	Intellectual property							
	Securities—Publicly traded .	X	6	47.406	Fair Market Value			
	Securities—Closely held stock			,				
	Securities—Partnership, LLC, or trust interests							
.2	Securities—Miscellaneous							
	Q ualified conservation contribution—Historic							
	structures							
	Qualified conservation contribution—Other							
	Real estate—Residential .							
	Real estate—Commercial							
	Real estate—Other							
	Collectibles		2	1.040	F= N4 =l. = 4 . V = l =			
	Food inventory	X	3	1,848	Fair Market Value			
	Drugs and medical supplies .							
	Taxıdermy							
	Scientific specimens							
	Archeological artifacts							
•	Sports							
25	Other ► ( Equipment )	X	1	1,199	Fair Market Value			
26	Other ► ( Miscellaneous )	Х	3	785	Fair Market Value			
27	O ther ▶()							
28	O ther ▶ ()							
	Number of Forms 8283 received							
	for which the organization comple	eted Form 8	283, Part IV, Donee Acknowledge	owledgement [	29			
							Yes	No
30a	During the year, did the organiza							
	must hold for at least three year			on, and which is not require	d to be used			
	for exempt purposes for the enti					30a		No
Ь	If "Yes," describe the arrangem	ent in Part I	I					
31	Does the organization have a gift					31	Yes	
32a	Does the organization hire or us contributions?	e third parti	es or related organizations	to solicit, process, or sell i	noncash • • •	32a		Νo
b	If "Yes," describe in Part II							
	If the organization did not report describe in Part II	an amount	ın column (c) for a type of	property for which column (	a) is checked,			

Page 2

Schedule M	(Form 990) (201:
Part II	Supplem

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

Identifier Return Reference Explanation

Schedule M (Form 990) (2012)

# 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 to provide any additional information.

▶ Attach to Form 990 or 990-EZ.

OMB No 1545-0047

2012

Open to Public Inspection

lame	of the	orga	nızatıon
a Jolla	Countr	y Day	School

**Employer identification number** 

95-1875978

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section A, Line 2		
Form 990, Part VI, Section B, Line 11 and Part XII, Line 2c		The School's Form 990 is prepared by an outside accounting firm based upon information pro vided by the school. The full copy is reviewed by internal management of the School for ac curacy and completeness. The audit committee, which has responsibility for oversight of the audit and selection of an independent accountant, then reviews the full form 990. The last step in the review process, an electronic public disclosure copy of the form 990 is made available for viewing to each voting member of the school's governing body via a passw or d-protected web site before it is filed with the IRS
Form 990, Part VI, Section B, Line 12c		The organization regularly and consistently monitors and enforces compliance with the conf lict of interest policy by having an annual written confirmation by all affected individua ls who are also instructed to notify the school of any subsequent changes
Form 990, Part VI, Section B, Line 15		The process for determining compensation of the School's Head of School and other key employees involves the following (1) Identification of key employees, (2) Review and approval by a subcommittee of the governing body and the board of trustees, (3) Use of data as to comparable compensation for similarly qualified persons in functionally comparable positions at similarly situated organizations, and (4) Contemporaneous documentation and recordke eping with respect to deliberations and decisions regarding the compensation arrangement
Form 990, Part VI, Section C, Line 19		The governing documents, conflict of interest policy and financial statements are not published
Form 990, Part XI, Line 9		Change in Value of Interest Rate Swaps \$3,922,979 Change in Value of Beneficial Interest in Perpetual Trust 2,948 Total \$3,925,927