

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



DLN: 93493072001104

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)

| **2**01

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 08-01-2012 , 2012, and ending 07-3	L-2013			
		pplicable	C Name of organization SAINT ANN'S SCHOOL		D Employe	er identificati	on number
	dress cl	_	Doing Business As		11-260	6681	
_	me cha	_					
_	tıal retu		Number and street (or P O box if mail is not delivered to street address) Room/sui 129 PIERREPONT STREET	te	E Telephone	e number	_
	rmınate				(718)5	22-1660	
_	ended		City or town, state or country, and ZIP + 4 BROOKLYN, NY 11201				
J Ap	plication	n pending			G Gross rec	eıpts \$ 87,078,	609
			F Name and address of principal officer VINCENT TOMPKINS		this a group refiliates?		Yes 🔽 No
			129 PIERREPONT STREET	u i	illiaces.	,	1637 140
			BROOKLYN,NY 11201		re all affiliates		
Ta	x-exen	npt status	▼ 501(c)(3)	11	"No," attach a	list (see in	structions)
	ebsite	e: ► WW	W SAINTANNSNY ORG	H(c) G	roup exemptio	n number ►	
V For	m of or	an pization	✓ Corporation Trust Association Other ►	L Voor	of formation 1965	M State of	legal domicile NY
	rt I		mary	L fear c	or formation 1963	State of	legal dofficile NT
			escribe the organization's mission or most significant activities				
			HEDULE O				
မ ပ							
Œ							_
Governance	2	Check th	is box দ if the organization discontinued its operations or disposed o	f more tha	ın 25% of ıts n	et assets	
ŝ					ı	1	
25	1		of voting members of the governing body (Part VI, line 1a)		-	3	17
Activities &	1		of independent voting members of the governing body (Part VI, line 1b)		-	4	16
	1		mber of individuals employed in calendar year 2012 (Part V, line 2a)		F	5	499
ĕ	1		mber of volunteers (estimate if necessary)			6 7a	90
			lated business taxable income from Form 990-T, line 34		: : : -	7a	0
					rior Year		rent Year
ē	8	Contri	butions and grants (Part VIII, line 1h)		4,552,66		15,734,056
	9		m service revenue (Part VIII, line 2g)		32,961,89	_	35,537,084
Revenue	10	_	ment income (Part VIII, column (A), lines 3, 4, and 7d)		384,02	_	363,887
æ	11		revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		89,04	19	48,182
	12		evenue—add lines 8 through 11 (must equal Part VIII, column (A), line		27.007.63		F1 602 200
	13		and similar amounts paid (Part IX, column (A), lines 1–3)	-	37,987,63	_	51,683,209 6,942,981
	14		ts paid to or for members (Part IX, column (A), line 4)		0,073,72	0	0,942,961
	15		es, other compensation, employee benefits (Part IX, column (A), lines			1	
88	13	5-10)			23,100,52	29	24,810,554
Expenses	16a	Profes	sional fundraising fees (Part IX, column (A), line 11e)		120,10	8	30,000
ਡੋ	Ь	Total fu	ndraising expenses (Part IX, column (D), line 25) - 770,701				
	17		expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		5,815,34	_	6,091,124
	18		expenses Add lines 13–17 (must equal Part IX, column (A), line 25)		35,109,70		37,874,659
. 07	19	Reven	ue less expenses Subtract line 18 from line 12	_	2,877,92	_	13,808,550
Net Assets or Fund Balances				Begin	ning of Current Year	End	of Year
esse Bafa	20	Totala	assets (Part X, line 16)		57,776,40) 3	73,537,647
2 E	21	Totall	iabilities (Part X, line 26)		17,105,96	54	17,741,689
	22		sets or fund balances Subtract line 21 from line 20		40,670,43	39	55,795,958
Unde my k	nowle	alties of p	ature Block Derjury, I declare that I have examined this return, including accompan Delief, it is true, correct, and complete Declaration of preparer (other the nowledge				
 Sigr	•	***** Signa	** ture of officer		2014-03-13 Date		
Her		VINC	ENT TOMPKINS HEAD OF SCHOOL				
_			or print name and title				
					CHECK! II _	PTIN P00543209	
Paid		F	ım's name ► O'CONNOR DAVIES LLP		self-employed Firm's EIN ► 27-:		
	pare	r _					
Use	On	ly ^F	ım's address ► 665 FIFTH AVENUE		Phone no (212)	286-2600	
			NEW YORK, NY 10022				
May	the IR	S discus	s this return with the preparer shown above? (see instructions)				✓ Yes 🗆 No

Forn	n 990 (2012)					Page :
Par		ement of Program Servi k if Schedule O contains a resp			I	
1	Briefly desc	rıbe the organızatıon's mıssıon				
SEE	SCHEDULE C)				
2		nızatıon undertake any sıgnıfica m 990 or 990-EZ?		ervices during the yea	r which were not listed on	
	If "Yes," des	cribe these new services on Sc	hedule O			
3	_	nızatıon cease conductıng, or n	-	_	onducts, any program	
	If "Yes," des	cribe these changes on Schedi	ile O			
4	expenses S	e organization's program service ection 501(c)(3) and 501(c)(4 enses, and revenue, if any, for) organızatıon	s are required to repoi		
4a	(Code) (Expenses \$	25,154,659	ıncludıng grants of \$) (Revenue \$	33,962,148)
	ACCOMPLISH ASSOCIATED SUPPORT COS	E O FOR INSTRUCTIONAL AND EDUCA THE GOALS AS STATED IN THE SCHOO WITH EDUCATIONAL PROGRAMS TOG STS, WHICH INCLUDE EVERY COST AN A FURTHER 23% OF THE BUDGET	L'S MISSION STA ETHER THESE DI	TEMENT THIS INCLUDES RECT INSTRUCTIONAL COS	SALARY AND BENEFITS FOR FACULT TS ACCOUNT FOR 69% OF THE SCI	Y AND DIRECT COSTS HOOL'S BUDGET THE STUDENT
4b	(Code) (Expenses \$	6,942,981	including grants of \$	6,942,981) (Revenue \$)
70	SEE SCHEDUL	E O FOR SCHOLARSHIPS AND OTHER JT OF AN ENROLLMENT OF 1,086 (179	ASSISTANCE TO	STUDENTSFOR FISCAL YEA	R 2013 WE BUDGETED \$3 6 MILLION	
4 c	(Code) (Expenses \$	214,269	including grants of \$) (Revenue \$	1,574,936)
	STUDENT-GEI	E O FOR CO-CURRICULAR ACTIVITIES NERATED ENDEAVORS RANGING FROM THE SCHOOL AND ITS SUCCESS IN AC	THE ARTISTIC A	AND SCIENTIFIC TO RECRE		
	· · · · · · · · · · · · · · · · · · ·					
4d		ram services (Describe in Sche				
	(Expenses	\$ incl	uding grants o	of \$) (Revenue \$)

32,311,909

Total program service expenses ►

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	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If</i> "Yes," complete Schedule C, Part II	4		No
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part 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
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 🕏	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 🥦	13	Yes	
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		No
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		No
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17	Yes	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	Yes	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		No
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		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	Yes	
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If</i> "Yes," complete Schedule L, Part IV	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule 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		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? 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	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If</i> "Yes," complete Schedule R, Part V, line 2	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37	_	No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	
		F	orm 99 ((2012)

αı	Statements Regarding Other 1RS Fillings and Tax Compliance			-
	Check if Schedule O contains a response to any question in this Part V	•	Yes	No
3	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable 1a 40		. 03	.40
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			
	gaming (gambling) winnings to prize winners?	1c		
a	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			
)	by this return	2b	Yes	
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		N (
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
1	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		N
	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			
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		N (
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		N
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			
		5c		
1	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		Z
	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
	Organizations that may receive deductible contributions under section 170(c).	OD		
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	Yes	
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Yes	
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to			
	file Form 8282?	7c		N
	If "Yes," indicate the number of Forms 8282 filed during the year			
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit			
	contract?	7e		N
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		N
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?			
	Sponsoring organizations maintaining donor advised funds.	8		
	Did the organization make any taxable distributions under section 4966?	9a		
	Did the organization make any taxable distributions under section 49667	9a 9b		
	Section 501(c)(7) organizations. Enter	טפ		
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the			
	year			
	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O	13a		
	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
	Enter the amount of reserves on hand	Į į	1	
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		N
	If "Yes " has it filed a Form 720 to report these payments? If "No " provide an explanation in Schedule 0	14h		1

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		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? .	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No
6	Did the organization have members or stockholders?	6		No
7a	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	ie Code	e.)
			Yes	No
	Did the organization have local chapters, branches, or affiliates?	10a		No_
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		No
	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	12a	Yes	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes	
13	Did the organization have a written whistleblower policy?	13	Yes	
14	Did the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b	Yes	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
16a				
	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		Νο

Section C. Disclosure

- 17 List the States with which a copy of this Form 990 is required to be filed
- 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 ►MATTHEW BLOOM DIRECTOR OF FINANCE & ADMIN 129 PIERREPONT STREET BROOKLYN, NY (718) 522-1660

Part VIII 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

									(=)	
(A) Name and Title	(B) A verage hours per week (list any hours for related organizations below dotted line)	more pers	than on is	one bot rect	not box h ar or/tr	checker Highest compensated	ess er e)	(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 organizations
			č			# ⊕ 				
(1) MARC MAYER	5 00									
TREASURER		×		Х				0	0	0
(2) ELIOT NOLEN	5 00							_	_	
VICE PRESIDENT		X		Х				0	0	0
(3) JONATHAN WELD	5 00	,		х				0		•
PRESIDENT		X		X				U	0	0
(4) HILLIARD FARBER	1 00	×		х				0	0	0
ASSISTANT TREASURER THRU 6/30/13								0	0	
(5) DAN BERGNER	1 00	×		x				0	0	0
SECRETARY				L^				Ŭ	0	
(6) PETER DAVIDSON	1 00	x						0	0	0
TRUSTEE								_	_	
(7) PETER DARROW	5 00	×						0	0	0
TRUSTEE THRU 6/30/13										
(8) MARJORIE COLEMAN	5 00	x		х				0	0	0
(9) MICHAEL POLLACK	1.00									
,	1 00	×						0	0	0
TRUSTEE (10) BAHIA RAMOS-SYNOTT	1.00									
	1 00	x						0	0	0
TRUSTEE THRU 6/30/13 (11) LAURIE SACKLER	1 00									
	1 00	x						0	0	0
TRUSTEE THRU 6/30/13 (12) DANIEL STONE	1 00									
TRUSTEE		x						0	0	0
(13) LAURA WALKER	1 00									
TRUSTEE		×						0	0	0
(14) MARY P WATSON	1 00	 					T			_
TRUSTEE		X						0	0	0
(15) HAMILTON CHASE	1 00									-
TRUSTEE		×						0	0	0
(16) MICHAEL HADDAD	1 00	, , , , , , , , , , , , , , , , , , ,								
TRUSTEE		X						0	0	0
(17) JIDE ZEITLIN	1 00	,								•
TRUSTEE		Х			<u></u>			0	0	0
										Form 990 (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 pers	than on is	one bot	note boo	chec x, unle n offic rustee	ess er	(D) Reportable compensation from the organization (W- 2/1099-	(E) Reportable compensation from related organizations	5	(F Estim amount o compen from	ated of other sation the
	organizations below dotted line) organizations below dotted line) organizations compensated lighest compensated linetitutional Trustee					(W- 2/1099- MISC)		organiz	lated			
(18) PATTI GREANEY	1 00	×						0		0		(
TRUSTEE (19) STEPHEN CASSELL	1 00									\dashv		
TRUSTEE		X						0		0		(
(20) ALEX GOOR	1 00	х						0		0		
TRUSTEE								9		<u> </u>		
(21) CARMINE CAPOSSELA	1 00	×						0		0		(
TRUSTEE (22) LINDA KAUFMAN	40 00									\dashv		
ASSOCIATE HEAD	10 00			х				163,327		0		23,953
(23) VINCENT TOMPKINS	40 00			l						_		
HEAD OF SCHOOL				Х				383,885		0		236,683
(24) MATTHEW BLOOM	40 00			X				165,958		0		28,104
DIRECTOR OF FINANCE & ADMIN		_		ļ		<u> </u>		100,500		4		
(25) DANA OKESON	40 00					×		105,444		o		66,01
HEAD OF HIGH SCHOOL (26) ROBERT SWACKER	40 00				\vdash	+				\dashv		
DEAN OF FACULTY						×		112,794		0		16,406
(27) GABRIELLE HOWARD	40 00					.		1.15.157				46.50
HEAD OF LOWER SCHOOL						Х		145,167		0		16,586
(28) JOHN CONNOLLY	40 00					l x		104,561		0		62,653
DIRECTOR OF TECHNOLOGY	40.00				_			,		\dashv		
(29) ANTHONY SMITH	40 00					x		113,393		0		30,630
DIR - BUILDING & GROUNDS										\dashv		
1b Sub-Total						<u> </u> ►		<u> </u>		\dashv		
to Total from continuation sheets to Parl			•	•		<u> </u>				+		
d Total (add lines 1b and 1c)	·-			٠.		►		1,294,529	0			481,024
Total number of individuals (including to \$100,000 of reportable compensation				ed a	bov	e) who	rec	eived more than		1		
											Yes	No
3 Did the organization list any former off on line 1a? If "Yes," complete Schedule 2						yee, o		= -	d employee	3		No
4 For any individual listed on line 1a, is to organization and related organizations individual									om the	4	Yes	
5 Did any person listed on line 1a receive	e or accrue com	pensat	tion f	rom	any	unrel	lated	d organization or ii	ndividual for	-	1.55	
services rendered to the organization?		-						_		5		No
Section B. Independent Contracto	ors											
1 Complete this table for your five highes		ındene	nder	nt co	ntra	actors	tha	t received more th	nan \$100 000	o f		

Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization Report compensation for the calendar year ending with or within the organization's tax year

(A)	(B)	(C)
Name and business address	Description of services	Compensation
JC FOOD CONSULTANTS INC 636 KENWOOD RD RIDGEWOOD NJ 07450	FOOD SERVICES	585,143
CITYWIDE BUILDING RESTORIATION 844 CASTLETON AVE STATEN ISLAND NY 10310	CONSTRUCTION	326,808
PROMENET INC 42 BROADWAY 16TH FLOOR NEW YORK NY 100043808	CONSULTING	261,401
SCHOOL BUS BY SUPERIOR INC 431 NORTH COURTLAND STREET EAST STROUDSBURG PA 18301	TRANSPORTATION	124,373
CONCEPT TOURS 155 W 72ND ST 302 NEW YORK NY 10023	TRAVEL AGENCY FEES	120,406

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

Form 99		<u> </u>						Page 9
Part V	/##		of Revenue ule O contains a respor	nse to any question i	n this Part VIII			
		Check if Sched	ule o comunis a respon	ise to any question	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512,513,or 514
χ£	1a	Federated cam	paigns 1a					
Contributions, Gifts, Grants and Other Similar Amounts	ь	Membership du	ıes 1b					
ي ق	С	Fundraising ev	ents 1c	337,908				
fts, FA	d	Related organiz	zations 1d					
jg i⊑		Government grant						
ns, Sin	e	_			ļ	ļ		
er.	f	All other contribute similar amounts no	ons, gifts, grants, and 1f ot included above	15,396,148				
년 된 본	g		ons included in lines	1,647,958	į	i		
ont od (h	1a-1f \$ Total. Add line:	c 1 2 - 1 f		15,734,056			
<u>ਹ =</u>		Total. Add filles	5 1a-11	•	15,751,656			
ē	2-	TUITION INCOME		Business Code	22.062.440	22.062.440		
wer	2a	TUITION INCOME	IAMC	611600	33,962,148	33,962,148		
<u>2</u> 2	b	AUXILLARY PROGR		611600	721,837	721,837		
Program Serwoe Revenue	d	EDU SCHOOL TRI SUMMER SCHOOL		611600	423,831	423,831		
Š				611600	291,649	291,649		
Ē	e	AFTER SCHOOL IN	am service revenue	611600	137,619	137,619		
ទ្	f	All other progra	alli service revenue					
	g		s 2a-2f		35,537,084			
	3		come (including dividen ar amounts)		263,338			263,338
	4		stment of tax-exempt bond					
	5	Royalties .		🕨				
			(ı) Real	(II) Personal				
	6a	Gross rents						
	b	Less rental expenses						
	С	Rental income or (loss)						
	d	• •	me or (loss)					
			(ı) Securities	(II) O ther				
	7a	Gross amount from sales of assets other than inventory	35,355,817					
	ь	Less cost or other basis and	35,255,268					
	_	sales expenses Gaın or (loss)	100,549					
	d d		ss)		100,549			100,549
	8a		from fundraising	· · · · · · · · · · · · · · · · · · ·	223,233			
Other Revenue		events (not inc \$337						
3 €		See Part IV, lir						
<u>-</u>			а	98,847				
Ě	b		penses b	140,132	-41,285			-41,285
·	C		(loss) from fundraising from gaming activities	events 🛌	-41,265			-41,265
	"		ne 19					
			а					
	Ь		penses b					
	10a		(loss) from gaming acti	vities				
	104	Gross sales of returns and allo						
	b c		oods sold b (loss) from sales of inv	entory 🛌				
		Mıscellaneou	s Revenue	Business Code				
	11a	INSURANCE	DIVIDENDS	900099	63,793			63,793
	b	REIMBURSEM	ENTS	900099	18,497			18,497
	С	MISCELLANE	ous	900099	7,177			7,177
	d		ue					
	е	Total. Add lines	s 11a-11d		89,467			
	12	Total revenue.	See Instructions .	· · · · •	51,683,209	35,537,084	0	412,069

	Statement of Functional Expenses	athor	lone must see	lata agluma (A)	
section	on 501(c)(3) and 501(c)(4) organizations must complete all columns. All			iete column (A)	
	Check if Schedule O contains a response to any question in this Part include amounts reported on lines 6b, p, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States See Part IV, line 21		скрепосо	general expenses	скрепосо
2	Grants and other assistance to individuals in the United States See Part IV, line 22	6,942,981	6,942,981		
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	1,015,654	429,572	522,962	63,120
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$				
7	Other salaries and wages	19,156,081	16,395,661	2,360,026	400,394
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	743,208	644,382	83,879	14,947
9	Other employee benefits	2,175,548	1,904,756	240,576	30,216
10	Payroll taxes	1,720,063	1,445,223	236,820	38,020
11	Fees for services (non-employees)				
а	Management				
b	Legal	80,201		80,201	
c	Accounting	77,069		77,069	
d	Lobbying				
e	Professional fundraising services See Part IV, line 17	30,000			30,000
f	Investment management fees				
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on	222,952	145,179	74,220	3,553
12	Schedule O)	39,385	143,179	39,385	3,333
13	Office expenses	1,412,775	1,138,332	189,930	84,513
14	Information technology	157,093	78,467	70,779	7,847
15	Royalties	137,093	70,407	70,779	7,047
16	Occupancy	583,282	482,719	81,423	19,140
17	Travel	464,836	454,900	9,788	148
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	404,030	434,900	9,700	140
19	Conferences, conventions, and meetings	4,959	4,959		
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	1,759,069	1,460,027	246,270	52,772
23	Insurance	225,424	197,726	22,810	4,888
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
a	BAD DEBT	273,166		273,166	
b	REPAIRS AND MAINTENANCE	272,080	226,011	37,958	8,111
С	STUDENT ACT & AUX SVCS	214,269	214,269		
d	INSTRUCTIONAL COSTS	92,192	92,192		
е	All other expenses	212,372	54,553	144,787	13,032
25	Total functional expenses. Add lines 1 through 24e	37,874,659	32,311,909	4,792,049	770,701
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

1 Cash—non-interest-bearing 2 Savings and temporary cash investments 3 Pledges and grants receivable, net 4 Accounts receivable, net 5 Loans and other receivables from current and former officers, dire employees, and highest compensated employees Complete Part Schedule L 6 Loans and other receivables from other disqualified persons (as 4958 (f)(1)), persons described in section 4958 (c)(3)(B), and co and sponsoring organizations of section 501 (c)(9) voluntary employees of section 501 (c)(9) voluntary employees organizations (see instructions) Complete Part II of Schedule L 7 Notes and loans receivable, net 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D b Less accumulated depreciation 11 Investments—publicly traded securities 12 Investments—publicly traded securities 13 Investments—program-related See Part IV, line 11 14 Intangible assets 15 Other assets See Part IV, line 11 16 Total assets. Add lines 1 through 15 (must equal line 34) 17 Accounts payable and accrued expenses 18 Grants payable 19 Deferred revenue 20 Tax-exempt bond liabilities 21 Escrow or custodial account liability Complete Part IV of Schedule L 22 Loans and other payables to current and former officers, director key employees, highest compensated employees, and disqualifie persons Complete Part II of Schedule L 23 Secured mortgages and notes payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 25 Other liabilities (including federal income tax, payables to relate and other liabilities not included on lines 17-24) Complete Part D 26 Total liabilities. Add lines 17 through 25 27 Unrestricted net assets 28 Temporarily restricted net assets 29 Permanently restricted net assets 29 Permanently restricted net assets 29 Permanently restricted net assets 30 Organizations that do not follow SFAS 117 (ASC 958), check her complete lines 30 through 34.	Part X			
2 Savings and temporary cash investments 3 Pledges and grants receivable, net 4 Accounts receivable, net 5 Loans and other receivables from current and former officers, dire employees, and highest compensated employees Complete Part Schedule L 6 Loans and other receivables from other disqualified persons (as 4958(f)(1)), persons described in section 4958(c)(3)(B), and co and sponsoring organizations of section 501(c)(9) voluntary employees organizations (see instructions) Complete Part II of Schedule L 7 Notes and loans receivable, net 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D b Less accumulated depreciation 11 Investments—publicly traded securities 12 Investments—program-related See Part IV, line 11 13 Investments—program-related See Part IV, line 11 14 Intangible assets 15 Other assets See Part IV, line 11 16 Total assets. Add lines 1 through 15 (must equal line 34) 17 Accounts payable and accrued expenses 18 Grants payable 19 Deferred revenue 20 Tax-exempt bond liabilities 21 Escrow or custodial account liability Complete Part IV of Sched Rey employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L 23 Secured mortgages and notes payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 25 Other liabilities (including federal income tax, payables to relate and other liabilities not included on lines 17-24) Complete Part D 26 Total liabilities. Add lines 17 through 25 27 Unrestricted net assets 28 Temporarily restricted net assets 29 Permanently restricted net assets 29 Permanently restricted net assets 30 Organizations that do not follow SFAS 117 (ASC 958), check here complete lines 30 through 34.		(A) Beginning of year		(B) End of year
3 Pledges and grants receivable, net 4 Accounts receivable, net 5 Loans and other receivables from current and former officers, dir employees, and highest compensated employees Complete Part Schedule L 6 Loans and other receivables from other disqualified persons (as 4958(f)(1)), persons described in section 4958(c)(3)(B), and co and sponsoring organizations of section 501(c)(9) voluntary emi organizations (see instructions) Complete Part II of Schedule L 7 Notes and loans receivable, net 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D b Less accumulated depreciation 11 Investments—publicly traded securities 12 Investments—program-related See Part IV, line 11 13 Investments—program-related See Part IV, line 11 14 Intangible assets 15 Other assets See Part IV, line 11 16 Total assets. Add lines 1 through 15 (must equal line 34) 17 Accounts payable and accrued expenses 18 Grants payable 19 Deferred revenue 20 Tax-exempt bond liabilities 21 Escrow or custodial account liability Complete Part IV of Schedule L 22 Loans and other payables to current and former officers, director key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L 23 Secured mortgages and notes payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 25 Other liabilities (including federal income tax, payables to relate and other liabilities not included on lines 17-24) Complete Part D 26 Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117 (ASC 958), check here Fines 27 through 29, and lines 33 and 34. 27 Unrestricted net assets 28 Temporarily restricted net assets Organizations that do not follow SFAS 117 (ASC 958), check here complete lines 30 through 34.		10,020,956		9,920,308
A Accounts receivable, net Loans and other receivables from current and former officers, diremployees, and highest compensated employees Complete Part Schedule L Loans and other receivables from other disqualified persons (as 4958(f)(1)), persons described in section 4958(c)(3)(B), and co and sponsoring organizations of section 501(c)(9) voluntary employers of section 4958(c)(3)(B), and co and sponsoring organizations of section 4958(c)(3)(B), and cot and sponsoring organizations of sections of section 4958(c)(3)(B), and cot and sponsoring organizations of sections of section 4958(c)(3)(B), and cot and sponsoring organizations of sections of section 501(c)(9) voluntary employers of section 50		1,998,869	2	1,597,933
A Accounts receivable, net Loans and other receivables from current and former officers, diremployees, and highest compensated employees Complete Part Schedule L Loans and other receivables from other disqualified persons (as 4958(f)(1)), persons described in section 4958(c)(3)(B), and co and sponsoring organizations of section 501(c)(9) voluntary employers of section 4958(c)(3)(B), and co and sponsoring organizations of section 4958(c)(3)(B), and cot and sponsoring organizations of sections of section 4958(c)(3)(B), and cot and sponsoring organizations of sections of section 4958(c)(3)(B), and cot and sponsoring organizations of sections of section 501(c)(9) voluntary employers of section 50		3,511,828	3	10,151,478
### Schedule L Coans and other receivables from other disqualified persons (as 4958(f)(1)), persons described in section 4958(c)(3)(B), and co and sponsoring organizations of section 501(c)(9) voluntary emplorganizations (see instructions) Complete Part II of Schedule L 7		1,491,279	4	1,451,939
4958(f)(1)), persons described in section 4958(c)(3)(B), and co and sponsoring organizations of section 501(c)(9) voluntary emplorganizations (see instructions) Complete Part II of Schedule L 7 Notes and loans receivable, net	ectors, trustees, key t II of		5	
Prepaid expenses and deferred charges	ontributing employers		6	
Prepaid expenses and deferred charges			7	
9 Prepaid expenses and deferred charges			8	
Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D b Less accumulated depreciation		459.967	9	347,316
b Less accumulated depreciation	10a 45,079,180	,	9	347,310
Investments—publicly traded securities	10b 17,752,563	27,965,814	100	27,326,617
Investments—other securities See Part IV, line 11		12,327,690		22,742,056
Intrangible assets		12,021,000	12	
14 Intangible assets Other assets See Part IV, line 11 16 Total assets. Add lines 1 through 15 (must equal line 34) 17 Accounts payable and accrued expenses			13	
15 Other assets See Part IV, line 11			14	
16 Total assets. Add lines 1 through 15 (must equal line 34) 17 Accounts payable and accrued expenses			15	
Accounts payable and accrued expenses 18 Grants payable		57,776,403	16	73,537,647
18 Grants payable		1,677,149		1,518,558
Tax-exempt bond liabilities It is crow or custodial account liability Complete Part IV of Sched Loans and other payables to current and former officers, director key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L		1,077,149	18	1,510,558
20 Tax-exempt bond liabilities		15,288,016		16,132,124
Escrow or custodial account liability. Complete Part IV of Schedular Loans and other payables to current and former officers, director key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule Loans. Secured mortgages and notes payable to unrelated third parties. Unsecured notes and loans payable to unrelated third parties. Other liabilities (including federal income tax, payables to relate and other liabilities not included on lines 17-24). Complete Part Doans. Total liabilities. Add lines 17 through 25		13,200,010	20	10, 132, 124
Loans and other payables to current and former officers, director key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L			21	
24 Unsecured notes and loans payable to unrelated third parties 25 Other liabilities (including federal income tax, payables to relate and other liabilities not included on lines 17-24) Complete Part D				
24 Unsecured notes and loans payable to unrelated third parties 25 Other liabilities (including federal income tax, payables to relate and other liabilities not included on lines 17-24) Complete Part D	ed			
24 Unsecured notes and loans payable to unrelated third parties 25 Other liabilities (including federal income tax, payables to relate and other liabilities not included on lines 17-24) Complete Part D			22	
25 Other liabilities (including federal income tax, payables to relate and other liabilities not included on lines 17-24) Complete Part D			23	
and other liabilities not included on lines 17-24) Complete Part D			24	
26 Total liabilities. Add lines 17 through 25	: X of Schedule	140,799	25	91,007
Organizations that follow SFAS 117 (ASC 958), check here Foliones 27 through 29, and lines 33 and 34. 27 Unrestricted net assets		17,105,964	26	17,741,689
complete lines 30 through 34.				
complete lines 30 through 34.		26,137,837	27	32,604,323
complete lines 30 through 34.		8,367,850	28	16,770,651
complete lines 30 through 34.		6,164,752	29	6,420,984
• I	re ▶ ┌ and			
The state of the s			30	I
31 Paid-in or capital surplus, or land, building or equipment fund.			31	
30 Capital stock or trust principal, or current funds			32	
33 Total net assets or fund balances		40,670,439	33	55,795,958
34 Total liabilities and net assets/fund balances		57,776,403	34	73,537,647

Par	Reconcilliation of Net Assets Check if Schedule O contains a response to any question in this Part XI				୮
1	Total revenue (must equal Part VIII, column (A), line 12)	1		51,6	583,209
2	Total expenses (must equal Part IX, column (A), line 25)	2		37.8	374,659
3	Revenue less expenses Subtract line 2 from line 1	3			308,550
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))				
5	Net unrealized gains (losses) on investments	5		·	370,439 316,969
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			0
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		55,7	795,958
Par	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII				. 区
				Yes	No
1	Accounting method used to prepare the Form 990				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or review a separate basis, consolidated basis, or both	wed on			
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a 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 oversign 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	n			
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?	e	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	require	3b		

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493072001104

Employer identification number

OMB No 1545-0047

SCHEDULE A

(Form 990 or 990EZ)

Name of the organization

Department of the Treasury Internal Revenue Service

SAINT ANN'S SCHOOL

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

									11-2606		
Pai				blic Charity Sta						ınstruction	S.
The o	rganı			te foundation becaus			= -				
1	<u>_</u>		-	on of churches, or a				section 170	(b)(1)(A)(i)	•	
2	고			in section 170(b)(1			•				
3		A hosp	ital or a coo	perative hospital se	rvice organiz	ation desc	rıbed ın secti	on 170(b)(1)(A)(iii).		
4	Г		dical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the								
5	_			ty, and state erated for the benefi	t of a colloge	or univers	ity owned or	anaratad by	, a governme	ntal unit doc	cribad in
5	ı					or univers	ity owned or	operated by	a governine	iitai uiiit des	scribed iii
_	_			A)(iv). (Complete P	•			Lian 170/b)	(4)(4)()		
6	<u> </u>			local government or							
7	 -	describ	ed in sectio	at normally receives on 170(b)(1)(A)(vi).	(Complete F	art II)		-	nentai unit or	rrom the ge	nerai public
8 9	<u>'</u>		-	described in sectior at normally receives				-	ibutions moi	mharchin fac	os and grass
9	'			ities related to its e							
				oss investment inco	•	-					
				ganization after June						ı tax/nomi	74311163363
10	\vdash			ganized and operated							
11	<u>'</u>	_		ganized and operated							t the nurnoses of
	,			ly supported organiz							
		the box	that descr	bes the type of supp	orting organ	ızatıon and	complete lin	es 11e thro	ugh 11h		
			• •	b			, -	·			, -
e	Γ			ox, I certify that the on managers and otl							
_			1509(a)(2)								
f			rganization this box	received a written de	etermination	from the 11	KS that it is a	ı ıype ı, ıy	pe II, or I yp	e III suppoi	ting organization,
g				2006, has the organi	ızatıon accep	ted any gif	t or contribu	tion from an	y of the		•
			ng persons?								
				rectly or indirectly o	•		_	h persons d	escribed in (i		Yes No
				governing body of th		_	nn?				lg(i)
				er of a person descri							g(ii)
_				lled entity of a perso						111	g(iii)
h		Provide	e the followi	ng information about	the supporte	ed organiza	tion(s)				
) Nam	ne of	(ii) EIN	(iii) Type of	(iv) Is	the	(v) Did yo	u notify	(vi) I:	s the	(vii) A mount of
_	uppor		(, = 1	organization	organizati		the organ	•	organiza		monetary
or	ganiza	ation		(described on	col (i) lis		ın col (i)		col (i) or		support
				lines 1 - 9 above	your gove		suppo	ort?	ın the	US?	
				or IRC section (see	docume	nt /					
				instructions))	V	N.	V	N' -	V		\dashv
					Yes	No	Yes	No	Yes	No	
								-			
 Total											

Sch	edule A (Form 990 or 990-EZ) 2012							Page 2
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	<u>iplete Pa</u>	rt III.)	
	endar year (or fiscal year beginning					1		
	in) ►	(a) 2008	(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	Total. 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) Public support. Subtract line 5 from							
	line 4							
S	ection B. Total Support							
Cal	endar year (or fiscal year beginning	(a) 2008	(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	First five years. If the Form 990 is this box and stop here							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 stop here. The organization qua				me 1 1 13 33 1/3/0	or more,	JIICCK CI	► □
b	33 1/3% support test—2011. If the				and line 15 is 33	3 1/3% or n	nore, ch	eck this
	box and stop here. 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	,	▶ □
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							▶ ┌

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	Total. Add lines 1 through 5						
	Amounts included on lines 1, 2,						
<i>7</i> 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) 2009	(c) 2010	(d) 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

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

DLN: 93493072001104

OMB No 1545-0047

SCHEDULE D (Form 990)

Department of the Treasury

Supplemental Financial Statements

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

► Attach to Form 990. ► See separate instructions.

Open to Public Inspection

coma	F Attacii to Foi	ili 990. F See Separate Histructions.		Znopection
	me of the organization NT ANN'S SCHOOL			oloyer identification number
Pa	rt I Organizations Maintaining Donor Adv			2606681 or Accounts. Complete if the
	organization answered "Yes" to Form 990	(a) Donor advised funds		(b) Funds and other accounts
1	Total number at end of year			(-,
2	Aggregate contributions to (during year)			
3	Aggregate grants from (during year)			
4	Aggregate value at end of year			
5	Did the organization inform all donors and donor advis- funds are the organization's property, subject to the or		nor adv	rsed ∀es
6	Did the organization inform all grantees, donors, and dused only for charitable purposes and not for the bene			er purpose
_	conferring impermissible private benefit?	· II I !!\\	- F	Yes No
	rt II Conservation Easements. Complete if		to Forr	n 990, Part IV, line 7.
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) Preservation of a		rically important land area d historic structure
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
	easement on the last day of the tax year			Held at the End of the Year
а	Total number of conservation easements		2a	Tield at the Lind of the Teal
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) accomistoric 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
	the tax year 🛌			
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	f violations, and Yes No
6	Staff and volunteer hours devoted to monitoring, inspe	cting, and enforcing conservation ease	ments (during the year
7	A mount 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 se	ction 1	70(h)(4)(B)(ı)
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	e footnote to the organization's financia		
Par	Complete if the organization answered "Y		or Ot	her Similar Assets.
1a	If the organization elected, as permitted under SFAS 1 works of art, historical treasures, or other similar assesservice, provide, in Part XIII, the text of the footnote to	ets held for public exhibition, education,	or rese	earch in furtherance of public
b	If the organization elected, as permitted under SFAS 1 works of art, historical treasures, or other similar assesservice, provide the following amounts relating to thes	ets held for public exhibition, education,		
	(i) Revenues included in Form 990, Part VIII, line 1			► \$
	(ii) Assets included in Form 990, Part X			▶ \$
2	If the organization received or held works of art, histor following amounts required to be reported under SFAS			'
а	Revenues included in Form 990, Part VIII, line 1	· -		▶ - \$

b Assets included in Form 990, Part X

3								r Similar i			
_	Using the organization's acquisition, access collection items (check all that apply)	ion, and other record	ds, ch			_			ise of	ıts	
а	Public exhibition		d	j L	oan or e	xchange prog	rams				
b	Scholarly research		e	Γ	ther						
c	Preservation for future generations										
4	Provide a description of the organization's co Part XIII	ollections and expla	ın how	v they f	urther th	e organizatioi	ı's ex	empt purpos	e in		
5	During the year, did the organization solicit							ıılar	_		_
	assets to be sold to raise funds rather than		-		_				,	Yes	No
Par	Part IV, line 9, or reported an ar					ion answere	a "Y	es" to Forn	990	',	
1a	Is the organization an agent, trustee, custoo included on Form 990, Part X?	lian or other interme	diary	for cor	trıbutıor	s or other ass	etsı	not	Γ	Yes	┌ No
b	If "Yes," explain the arrangement in Part XI	I and complete the	follow	ıng tab	le	-					
									Amou	nt	
С	Beginning balance						1c				
d	Additions during the year						1d				
e	Distributions during the year						1e				
f	Ending balance						1 f				
2a	Did the organization include an amount on Fe	orm 990, Part X, line	21?						Γ	Yes	┌ No
b	If "Yes," explain the arrangement in Part XII	I Check here if the	expla	nation	has beer	n provided in f	art >	KIII			Γ
Pa	rt V Endowment Funds. Complete										
		(a)Current year	(b) P	Prior yea		:)Two years back	+		-		ears back
1a	Beginning of year balance	6,848,332		5,630		5,349,52	+	5,165,5	_		5,016,035
b	Contributions	1,042,236		1,21	,490	287,317	<u>'</u>	221,2	17		149,513
С	Net investment earnings, gains, and losses	374,705		399	,399			-37,2	70		
d	Grants or scholarships										
e	Other expenditures for facilities and programs	240,819		399	,399						
f	Administrative expenses										
g	End of year balance	8,024,454		6,84	,332	5,636,842	2	5,349,5	25		5,165,548
2	Provide the estimated percentage of the cur	rent year end balanc	e (line	e 1g, c	olumn (a)) held as					
а	Board designated or quasi-endowment 🕨	17 510 %									
b	Permanent endowment > 80 020 %										
С	Temporarily restricted endowment ► 2 4	70 %									
	The percentages in lines 2a, 2b, and 2c sho	uld equal 100%									
За	The percentages in lines 2a, 2b, and 2c sho Are there endowment funds not in the posse		ation t	:hat are	held an	d admınıstere	d for	the			
	The percentages in lines 2a, 2b, and 2c sho Are there endowment funds not in the posse organization by		ation t	hat are	held an	d admınıstere	d for	the		Yes	No
	Are there endowment funds not in the posse	ssion of the organiza		that are	held an	d administere	d for	[3	Ba(i)	Yes	No
3 a	Are there endowment funds not in the posse organization by (i) unrelated organizations	ssion of the organiza	٠.				d for	[3	Ba(ii)	Yes	
3a b	Are there endowment funds not in the posse organization by (i) unrelated organizations	ssion of the organization	 d on S	chedul	 e R? .		d for	[3		Yes	No
3a b 4	Are there endowment funds not in the posse organization by (i) unrelated organizations	ssion of the organization of the organization of the organization's end	 d on S	chedul ent fun	 e R? . ds		d for	[3	Ba(ii)	Yes	No
3a b 4	Are there endowment funds not in the posse organization by (i) unrelated organizations	ssion of the organization of the organization of the organization's end	 d on S	chedul ent fun rt X, I	 e R? . ds	r (b) Cost or o		[3	3b ted		No
3a b 4 Par	Are there endowment funds not in the posse organization by (i) unrelated organizations	ssion of the organization of the organization of the organization's end	 d on S	chedul ent fun rt X, I	e R? . ds ne 10. est or othe	r (b) Cost or o basis (other		(c) Accumula	3b ted		No No ok value
b 4 Par	Are there endowment funds not in the posse organization by (i) unrelated organizations	ssion of the organization of the organization of the organization's end	 d on S	chedul ent fun rt X, I	e R? . ds ne 10. est or othe	r (b) Cost or o basis (other	ther:r)	(c) Accumula	3b ted	(d) Bo	No No No bk value
3a b 4 Par	Are there endowment funds not in the posse organization by (i) unrelated organizations (ii) related organizations If "Yes" to 3a(ii), are the related organization Describe in Part XIII the intended uses of the tyle Land, Buildings, and Equipment Description of property Land	ssion of the organization of the organization of the organization's end	 d on S	chedul ent fun rt X, I	e R? . ds ne 10. est or othe	r (b) Cost or o basis (other	ther:r)	(c) Accumula depreciatio	3b ted	(d) Bo	No No ok value
3a b 4 Par 1a b c	Are there endowment funds not in the posse organization by (i) unrelated organizations	ssion of the organization of the organization of the organization's end	 d on S	chedul ent fun rt X, I	e R? . ds ne 10. est or othe	r (b) Cost or o basis (other	ther er) 0,400	(c) Accumula depreciatio	3b ted n ,611 ,928	(d) Bo	No No Dk value 179,400 55,445,656
3a b 4 Par 1a b c d	Are there endowment funds not in the posse organization by (i) unrelated organizations	ssion of the organization of the organization of the organization's end	on S dowme 0, Pa	chedul ent fun rt X, I	e R? . ds ne 10. est or othe	r (b)Cost or or basis (other	ther er) 0,400 0,267 0,854	(c) Accumula depreciatio	3b ted n ,611 ,928	(d) Boo	No No No bk value 179,400 5,445,656 156,926

Part VIII Investments—Other Securities. See	Form 990, Part X, line 12	2.	
(a) Description of security or category	(b)Book value		d of valuation
(including name of security)		Cost or end-or	f-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)		_	
Part VIII Investments—Program Related. Se			
(a) Description of investment type	(b) Book value		d of valuation
		Cost or end-or	f-year market value
Total (Column (h) must equal Form 990, Part X, col.(R) line 13.)			
Total. (Column (b) must equal Form 990, Part X, col (B) line 13) Part DX Other Assets See Form 990, Part X lu			
Part IX Other Assets. See Form 990, Part X, II	ne 15.		(b) Book value
	ne 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, II	ne 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, II	ne 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, II	ne 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, II	ne 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, II	ne 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, II	ne 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, II	ne 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, II	ne 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, II	ne 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, II	ne 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, II	ne 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, II	ne 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, II	ne 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, II	ne 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, II	ne 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, II	ne 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, II (a) Descri	ne 15. ption		(b) Book value
Part IX Other Assets. See Form 990, Part X, In (a) Descri	ne 15. ption		(b) Book value
Part IX Other Assets. See Form 990, Part X, In (a) Description of liability Other Liability Other Liability	ne 15. otion i.)		(b) Book value
Part IX Other Assets. See Form 990, Part X, In (a) Description of liability Federal income taxes	i.) (, line 25. (b) Book value		(b) Book value
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 DEFERRED RENT	i.) (, line 25. (b) Book value		(b) Book value
Part IX Other Assets. See Form 990, Part X, In (a) Description of liability Federal income taxes	i.) (, line 25. (b) Book value		(b) Book value
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 DEFERRED RENT	i.) (, line 25. (b) Book value		(b) Book value
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 DEFERRED RENT	i.) (, line 25. (b) Book value		(b) Book value
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 DEFERRED RENT	i.) (, line 25. (b) Book value		(b) Book value
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 DEFERRED RENT	i.) (, line 25. (b) Book value		(b) Book value
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 DEFERRED RENT	i.) (, line 25. (b) Book value		(b) Book value
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 DEFERRED RENT	i.) (, line 25. (b) Book value		(b) Book value
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 DEFERRED RENT	i.) (, line 25. (b) Book value		(b) Book value
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 DEFERRED RENT	i.) (, line 25. (b) Book value		(b) Book value
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 DEFERRED RENT	i.) (, line 25. (b) Book value		(b) Book value
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 DEFERRED RENT	i.) (, line 25. (b) Book value		(b) Book value
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 DEFERRED RENT	i.) (, line 25. (b) Book value		(b) Book value
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 DEFERRED RENT	i.) (, line 25. (b) Book value		(b) Book value
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 DEFERRED RENT	i.) (, line 25. (b) Book value		(b) Book value

Part	Reconciliation of Revenue per Audited Financial Statements With Revenue	per R	eturn
1	Total revenue, gains, and other support per audited financial statements	1	45,912,001
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 2a through 2d	2e	1,355,219
3	Subtract line 2e from line 1	3	44,556,782
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)	1	
c	Add lines 4a and 4b	4c	7,126,427
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	51,683,209
Part	Reconciliation of Expenses per Audited Financial Statements With Expense	s per	
1	Total expenses and losses per audited financial statements	1	30,786,482
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	1	
d	Other (Describe in Part XIII)		
e	Add lines 2a through 2d	2e	38,250
3	Subtract line 2e from line 1	3	30,748,232
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)	1	
С	Add lines 4a and 4b	4c	7,126,427
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5	37,874,659

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

Identifier	Return Reference	Explanation
DESCRIPTION OF INTENDED USE OF ENDOWMENT FUNDS	PART V, LINE 4	THE SCHOOL CLASSIFIES AS PERMANENTLY RESTRICTED NET ASSETS (A) THE ORIGINAL VALUE OF ALL GIFTS DONATED TO THE PERMANENT ENDOWMENT, AND (B) ACCUMULATIONS TO THE PERMANENT ENDOWMENT MADE IN ACCORDANCE WITH THE DIRECTION OF THE APPLICABLE DONOR GIFT INSTRUMENT AT THE TIME THE ACCUMULATION IS ADDED TO THE FUND OBJECTIVES FOR DONOR RESTRICTIVE ENDOWMENTS FUNDS ARE GENERATING INCOME TO SUPPORT THE SCHOOLS ACTIVITIES AND PRESERVATION OF CAPITAL INVESTMENT EARNINGS ARE TO BE USED FOR THEIR TEMPORARILY RESTRICTED PURPOSES
DESCRIPTION OF UNCERTAIN TAX POSITIONS UNDER FIN 48	PART X, LINE 2	THE SCHOOL RECOGNIZES THE EFFECT OF INCOME TAX POSITIONS ONLY IF THOSE POSITIONS ARE MORE LIKELY THAN NOT TO BE SUSTAINED MANAGEMENT HAS DETERMINED THAT THE SCHOOL HAD NO UNCERTAIN TAX POSITIONS THAT WOULD REQUIRE FINANCIAL STATEMENT RECOGNITION OR DISCLOSURE THE SCHOOL IS NO LONGER SUBJECT TO EXAMINATION BY THE APPLICABLE TAXING JURISDICTIONS FOR TAX YEARS PRIOR TO JULY 31, 2010
PART XI, LINE 2D - OTHER ADJUSTMENTS		ADDITIONAL SPECIAL EVENT EXPENSES REPORTED ON PART VIII LINE 8B 38,250
PART XI, LINE 4B - OTHER ADJUSTMENTS		SCHOLARSHIPS NETTED AGAINST REVENUE 6,853,261 BAD DEBT EXPENSE NETTED AGAINST REVENUE 273,166
PART XII, LINE 2D - OTHER ADJUSTMENTS		ADDITIONAL SPECIAL EVENT EXPENSES REPORTED ON PART VIII LINE 8B 38,250
PART XII, LINE 4B - OTHER ADJUSTMENTS		SCHOLARSHIPS NETTED AGAINST REVENUE 6,853,261 BAD DEBT EXPENSE NETTED AGAINST REVENUE 273,166

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493072001104

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

SAINI	ANN'S SCHOOL	-2606681			
Pa	rt I	-2000031	T	YES	NO
1	Does the organization have a racially nondiscriminatory policy toward students by statement in its o	charter, bylaws,			
	other governing instrument, or in a resolution of its governing body?		1	Yes	
2	Does the organization include a statement of its racially nondiscriminatory policy toward students in brochures, catalogues, and other written communications with the public dealing with student admis programs, and scholarships?	sions,	2	Yes	
3	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcas the period of solicitation for students, or during the registration period if it has no solicitation progra that makes the policy known to all parts of the general community it serves? If "Yes," please descriplease explain If you need more space use Part II	m, ın a way be If "No,"	3	Yes	
				163	
4	Does the organization maintain the following?				
а	Records indicating the racial composition of the student body, faculty, and administrative staff?	4	1a	Yes	
b	Records documenting that scholarships and other financial assistance are awarded on a racially nor basis?		4b	Yes	
c	Copies of all catalogues, brochures, announcements, and other written communications to the public with student admissions, programs, and scholarships?	-	4c	Yes	
d	Copies of all material used by the organization or on its behalf to solicit contributions?	4	1d	Yes	
	If you answered "No" to any of the above, please explain If you need more space, use Part II				
5 a	Does the organization discriminate by race in any way with respect to Students' rights or privileges?		5a		No
b	Admissions policies?	_ 5	5b		No
c	Employment of faculty or administrative staff?	_ 5	5c		Νo
d	Scholarships or other financial assistance?	<u> </u>	5d		Νo
e	Educational policies?	5	5e		Νo
f	Use of facilities?	_ 5	5f		Νo
g	Athletic programs?	5	5g		No
h	Other extracurricular activities? If you answered "Yes" to any of the above, please explain If you need more space, use Part II		5h		No
	Does the organization receive any financial aid or assistance from a governmental agency? Has the organization's right to such aid ever been revoked or suspended?		5a 5b		No No
	If you answered "Yes" to either line 6a or line 6b, explain on Part II Does the organization certify that it has complied with the applicable requirements of sections 4 01				110
	of Rev Proc 75-50, 1975-2 C B 587, covering racial nondiscrimination? If "No," explain on Part I	I .	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 PUBLICATION	SCHEDULE E, PART I, LINE 3	THE SCHOOL'S NON DISCRIMINATORY POLICIES ARE AVAILABLE ON ITS WEBSITE, INCLUDED IN THE SCHOOL'S CATALOGUE, CURRICULUM BOOK, APPLICATIONS MATERIALS, THE FACULTY AND STAFF HANDBOOK AND ADVERTISED ANNUALLY IN THE LOCAL PRESS

Schedule E (Form 990 or 990-EZ) 2012

DLN: 93493072001104

OMB No 1545-0047

SCHEDULE G (Form 990 or 990-EZ) **Supplemental Information Regarding**

Fundraising or Gaming Activities

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

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

Open to Public Inspection

Name of the organization SAINT ANN'S SCHOOL

Department of the Treasury

Internal Revenue Service

Employer identification number

11-2606681

Pa	rt I Fundraising Act	tivities. Complete	ıf the oı	ganızatı	on answered "Yes" t	o Form 990, Part IV,	line 17.
1 a b c d 2a b	Indicate whether the organ Mail solicitations Internet and email sol Phone solicitations In-person solicitations Did the organization have a or key employees listed in If "Yes," list the ten highes to be compensated at leas	nization raised funds to icitations s a written or oral agree Form 990, Part VII) st paid individuals or	ement with or entity entities (f nization	ny of the f e f g n any indi in connect undraiser	following activities Che Solicitation of non Solicitation of gov Special fundraising vidual (including officer stion with professional forms) pursuant to agreeme	ck all that apply government grants ernment grants g events s, directors, trustees undraising services? ents under which the fun	V Yes
	individual or entity (fundraiser)		custo	ser have ody or rol of outions?	from activity	(or retained by) fundraiser listed in col (i)	(or retained by) organization
			Yes	No			
	COMMUNITY COUNSELING SERVICE CO LLC 461 FIFTH AVENUE - 3RD FLOOR	CAMPAIGN MANAGEMENT SERVICES		No	0	30,000	-30,000
	NEW YORK, NY 10017						
Tota	il			.		30,000	-30,000
3	List all states in which the licensing	organization is regist	cered or li	censed to	solicit funds or has be	en notified it is exempt	from registration or

Sche	edule	G (Form 990 or 990-EZ) 2012				Page 2
Pa	rt II	Fundraising Events. Commore than \$15,000 of fundrevents with gross receipts of	aising event contribut			
		эт э	(a) Event #1	(b) Event #2	(c) Other events	(d) Total events (add col (a) through
			WINTER GALA (event type)	SHORTS IN WINTER (event type)	(total number)	col (c))
₽	1	Gross receipts	415,433	8,305	13,017	436,755
Revenue	2	Less Contributions	337,908	3		337,908
쟢	3	Gross income (line 1 minus line 2)	77,525		13,017	
	4	Cash prizes				
Direct Expenses	5	Noncash prizes				
	6	Rent/facility costs	77,619			77,619
	7	Food and beverages .	72	2	6,231	6,303
	8	Entertainment	500	299)	799
ā	9	Other direct expenses .	49,187	,	6,224	55,411
	10	Direct expense summary Add lir	nes 4 through 9 in column	(d)		(140,132)
	11	Net income summary Combine I	ine 3, column (d), and line	10	•	-41,285
Par	t II	Gaming. Complete if the o \$15,000 on Form 990-EZ, li		"Yes" to Form 990, Pa	art IV, line 19, or repo	rted more than
Revenue			(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
<u>-8</u>	1	Gross revenue				
မှ	2	Cash prizes				
sesuedy	3	Non-cash prizes				
Direct B	4	Rent/facility costs				
<u>ā</u>	5	Other direct expenses				
	6	Volunteer labor	Г Yes Г Nо	Г Yes Г Nо	Г Yes Г No	_
	7	Direct expense summary Add line	es 2 through 5 in column (d)		
	8	Net gaming income summary Con	nbine lines 1 and 7 in colu	ımn (d)		
9 a b	Ist	er the state(s) in which the organiz the organization licensed to operate No," explain	e gamıng actıvıtıes ın eac	h of these states?		. 「Yes 「No
10a b	Wei	re any of the organization's gaming Yes," explain	licenses revoked, susper	nded or terminated during	the tax year?	

oes	the organization operate gaming activities with nonmembers?
.2	Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity
	formed to administer charitable gaming?
.3	Indicate the percentage of gaming activity operated in
а	The organization's facility
b	An outside facility
4	Enter the name and address of the person who prepares the organization's gaming/special events books and records
	Name ►
	Name 🟲
	Address ►
.5a	Does the organization have a contract with a third party from whom the organization receives gaming
	revenue?
b	If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ and the
	amount of gaming revenue retained by the third party ▶ \$
c	If "Yes," enter name and address of the third party
	Name 🟲
	Address ►
6	Gaming manager information
	Name ▶
	Gaming manager compensation * \$
	Description of services provided 🟲
	□ Director/officer □ Employee □ Independent contractor
7	Mandatory distributions
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to
	retain the state gaming license?
b	Enter the amount of distributions required under state law distributed to other exempt organizations or spent
	in the organization's own exempt activities during the tax year 🕨 \$

part to provide any additional information (see instructions).

I dentifier	Return Reference	Explanation
EXPLANATION OF FUNDRAISING PAYMENTS	COLUMN (V)	COMMUNITY COUNSELLING SERVICE CO, LLC ("CCS") AND SAINT ANN'S SCHOOL HAVE AN AGREEMENT FOR CAMPAIGN MANAGEMENT SERVICES FEES WILL BE BILLED DURING THE MONTH IN WHICH THE SERVICES ARE PROVIDED SAINT ANN'S SCHOOL SHALL PAY CCS ON THE 15TH DAY OF EACH MONTH SAINT ANN'S SCHOOL SHALL PAY CCS A TOTAL FEE OF \$30,000 FOR THEIR TERM OF THIS AGREEMENT FEES WILL BE BILLED DURING THE MONTH IN WHICH THE SERVICES ARE PROVIDED SAINT ANN'S SCHOOL SHALL PAY CCS \$7,500 ON THE 15TH OF EACH MONTH BEGINING SEPTEMBER THROUGH DECEMBER THE OBLIGATION OF SAIN ANN'S SCHOOL TO PAY THESE PROFESSIONAL FEES IS NOT DEPENDENT ON THE AMOUNT OF FUNDS RAISED, FEES ARE FOR SERVICES PRESENTED IN THIS AGREEMENT

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

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.

OMB No 1545-0047

DLN: 93493072001104

Open to Public

Department of the Treasury Internal Revenue Service Name of the organization

Schedule I

(Form 990)

Attach to Form 990

Inspection Employer identification number SAINT ANN'S SCHOOL 11-2606681 Part I General Information on Grants and Assistance Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and √ Yes Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. (f) Method of (a) Name and address of **(b)** EIN (d) A mount of cash (g) Description of (h) Purpose of grant (c) IRC Code (e) A mount of nonvaluation non-cash assistance or assistance organization section grant cash or government if applicable assistance (book, FMV, appraisal, other)

2	Enter total number of section $501(c)(3)$ and government organizations listed in the line 1 table.	•	•	•	•
---	--	---	---	---	---

Enter total number of other organizations listed in the line 1 table

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

(a)Type of grant or assistance	(b) Number of recipients	(c) A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
(1) SCHOLARSHIPS-RETURNING STUDENTS	182	3,583,096			
(2) TUITION REMISSION	116	3,270,165			
(3) SUMMER SCHOOL SCHOLARSHIPS	18	25,480			
(4) TRIP SCHOLARSHIPS	27	64,240			

Part IV Supplemental Information.

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

Identifier	Return Reference	Explanation
PROCEDURE FOR MONITORING GRANTS IN THE U S	PART I, LINE 2	SCHEDULE I, PART I, LINE 2 SAINT ANN'S SCHOOL AWARDS GRANTS TO STUDENTS IN THE FORM OF SCHOLARSHIPS THE SCHOLARSHIP IS A REDUCTION OF THE TUITION CHARGE FOR THE ACADEMIC YEAR
		FAMILIES APPLYING FOR FINANCIAL AID SUBMIT AN APPLICATION TO THE SCHOOL SCHOLARSHIP SERVICE (SSS) OF THE NATIONAL ASSOCIATION OF INDEPENDENT SCHOOLS THE SSS PERFORMS AN ANALYSIS OF INCOME, ASSETS, AND LIABILITIES IN ORDER TO ARRIVE AT AN ESTIMATED AMOUNT WHICH THEY CONSIDER THE FAMILY CAN AFFORD FOR INDEPENDENT EDUCATION THESE DATA ARE SENT TO SAINT ANN'S AND USED BY ADMINISTRATORS IN THEIR DECISION MAKING THE ADMINISTRATION'S OVERALL DECISIONS ARE REVIEWED BY A BOARD COMMITTEE TO WHOM THE BOARD HAS DELEGATED AUTHORITY TO APPROVE FINANCIAL AID AWARDS EACH YEAR THE SCHOOL ACCEPTS AT LEAST FOUR STUDENTS FROM PREP FOR PREP, AN ORGANIZATION THAT PREPARES AND SUPPORTS ECONOMICALLY DISADVANTAGED MINORITY STUDENTS SEEKING AN INDEPENDENT SCHOOL EDUCATION THESE STUDENTS ARE GRANTED SUBSTANTIAL NEED-BASED FINANCIAL AID, WHICH REDUCES THE FAMILY'S CONTRIBUTION OFTEN TO \$500 ANNUALLY FOR FISCAL YEAR 2013 WE BUDGETED \$3 6 MILLION FOR SCHOLARSHIPS AND OTHER ASSISTANCE TO STUDENTS 182 STUDENTS OUT OF AN ENROLLMENT OF 1,086 (17%) RECEIVED SCHOLARSHIP AID ALLOWING THE SCHOOL TO PROGRESS IN ITS OBJECTIVE OF MAINTAINING A DIVERSE STUDENT POPULATION

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

DLN: 93493072001104

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**

Compensation Information

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

► Attach to Form 990. ► See separate instructions.

Open to Public Inspection

Name of the organization SAINT ANN'S SCHOOL

Employer identification number

11-2606681

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

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

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

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

(A) Name and Title		(B) Breakdown of	f W-2 and/or 1099-MIS	SC 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)LINDA KAUFMAN ASSOCIATE HEAD	(i) (ii)		0	4,620 0	11,482 0	12,471 0	. 187,280 0	0
(2)VINCENT TOMPKINS HEAD OF SCHOOL	(i) (ii)	379,265 0	0	4,620 0	10,102	226,579 0	620,566	0
(3)MATTHEW BLOOM DIRECTOR OF FINANCE & ADMIN	(i) (ii)	165,958 0	0	0	1,840 0	26,264 0	194,062	0
(4)DANA OKESON HEAD OF HIGH SCHOOL	(i) (ii)	105,444	0	0	6,142 0	59,869 0	171,455	0
(5)GABRIELLE HOWARD HEAD OF LOWER SCHOOL	(i) (ii)	140,547	0	4,620 0	9,2 4 5 0	7,341 0	. 161,753	0
(6)JOHN CONNOLLY DIRECTOR OF TECHNOLOGY	(i) (ii)	104,561	0	0	6,685 0	55,968 0	167,214	0

Schedule J (Form 990) 2012

Part III Supplemental Information

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

Also complete this part for any addition	onal information	
Identifier	Return Reference	Explanation
	PART I, LINE 1A	AS A CONDITION OF HIS EMPLOYMENT, IN ORDER TO FULFILL THE CONTRACTUAL OBLIGATIONS OF HIS EMPLOYMENT, VINCENT TOMPKINS IS PROVIDED WITH HOUSING BY THE ORGANIZATION THE VALUE OF THE HOUSING PROVIDED IN CALENDAR YEAR 2012 WAS \$142,400
	PART I, LINE 7	THE FOLLOWING EMPLOYEES RECEIVED NON-FIXED PAYMENTS FROM THE ORGANIZATION LINDA KAUFMAN, GABRIELLE HOWARD, AND VINCENT TOMPKINS THE PAYMENTS WERE FOR TAXABLE FRINGE BENEFITS SUCH AS PARKING THAT WERE PAID BY THE ORGANIZATION, AND NOT INCLUDED IN THE EMPLOYEE'S CONTRACT NOR DETERMINED BY A FIXED AMOUNT
SUPPLEMENTAL INFORMATION	PART III	SCHEDULE J, PART II, COLUMN D VINCENT TOMPKINS, DANA OKESON AND JOHN CONNOLLY RECEIVED TUITION REMISSION FROM THE ORGANIZATION FOR THEIR CHILDREN THAT ATTEND SAINT ANN'S SCHOOL, WHICH IS ALSO BEING REPORTED IN COLUMN D IN 2012, VINCENT TOMPKINS RECEIVED \$57,915, DANA OKESON RECEIVED \$31,725 AND JOHN CONNOLLY RECEIVED \$27,000 IN TUITION REMISSION

Schedule J (Form 990) 2012

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493072001104

Employer identification number

OMB No. 1545-0047

OMB No 1545-0047

2012

Open to Public Inspection

Schedule L

(Form 990 or 990-EZ)

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

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

Transactions with Interested Persons

Name of the organization SAINT ANN'S SCHOOL

SAINT ANN'S SCHOOL Excess Benefit Transactions (section 501(c)(3) and section 501(c)(4) organizations only). Part I Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b (a) Name of disqualified person (b) Relationship between disqualified (c) Description of transaction (d) Corrected? person and organization Yes No 2 Enter the amount of tax incurred by organization managers or disqualified persons during the year under section 3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization Part II Loans to and/or From Interested Persons. Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a, or Form 990, Part IV, line 26, or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22 (b) Relationship (c) Purpose (d) Loan to (e)Original (f)Balance (i)Written (a) Name of (h) **(g)** In interested with organization of loan or from the principal due default? Approved agreement? person organization? amount by board or committee? Τо From Yes No Yes No Yes No Total \$ Part III Grants or Assistance Benefitting Interested Persons. Complete if the organization answered "Yes" on Form 990, Part IV, line 27. (a) Name of interested (b) Relationship between (c) A mount of assistance (d) Type of assistance (e) Purpose of assistance person interested person and the organization

Business Transactions J			- 20- 20 20-		
Complete if the organization	<u>on answered "Yes" on I</u>	<u>-orm 990, Part IV, lin</u>	e 28a, 28b, or 28c.		
(a) Name of Interested person	(b) Relationship between interested person and the organization	(c) A mount of transaction	(d) Description of transaction	(e) Sh of organiz reveni	f zatıon'
				Yes	No
(1) HANA SACKLER	DAUGHTER OF LAURIE SACKLER, TRUSTEE OF THE ORGANIZATION	41,354	HANA IS A PRESCHOOL TEACHER		No
(2) KATHERINE DREW MCGHEE	WIFE OF PETER DAVIDSON, TRUSTEE OF THE ORGANIZATION	83,449	KATHERINE IS A TEACHER AT THE SCHOOL		No
(3) LISA DEWHURST	DAUGHTER OF LINDA KAUFMAN, ASSOCIATE HEAD OF THE ORGANIZATION		LISA IS A TEACHER AT THE SCHOOL		No
(4) PHILIP DEWHURST	SON-IN-LAW OF LINDA KAUFMAN, ASSOCIATE HEAD OF THE ORGANIZATION	,	PHILIP IS A SECURITY GUARD AT THE SCHOOL		No

Part V Supplemental Information

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

		Es to questions on schedule E (see instructions	
Identifier	Return Reference	Explanation	

Schedule L (Form 990 or 990-EZ) 2012

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

DLN: 93493072001104

OMB No 1545-0047

Noncash Contributions

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.

Open to Public Inspection

	ie of the organization FANN'S SCHOOL				Employer identification number
JALIN I	TANN 3 SCHOOL				11-2606681
Pa	rt I Types of Property			<u>'</u>	
		(a) Check If applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
	Art—Works of art	X	10	8,140	FAIR MARKET VALUE
_	Art—Historical treasures .				
_	Art—Fractional interests				
	Books and publications	Х		1,675	FAIR MARKET VALUE
	Clothing and household goods	Х		51,895	FAIR MARKET VALUE
	Cars and other vehicles				
	Boats and planes				
	Intellectual property				
	Securities—Publicly traded .	X	11	1,487,700	FAIR MARKET VALUE
	Securities—Closely held stock . Securities—Partnership, LLC,				
	or trust interests				
13	Qualified conservation contribution—Historic structures				
14	Qualified conservation contribution—Other				
	Real estate—Residential .				
	Real estate—Commercial				
	Real estate—Other	.,			
	Collectibles	X	2	2,625	FAIR MARKET VALUE
	Food inventory				
	Drugs and medical supplies .				
	Taxidermy				
	Scientific specimens				
	Archeological artifacts				
	Other ► (PIANO)	Х	1	26 000	FAIR MARKET VALUE
	Other ► (DINING)	X	32	·	FAIR MARKET VALUE
	TICKETS & GIFT			- 1,1-1-1	
27	Other►(<u>CERTIFICATES</u>)	Х	23	11,402	FAIR MARKET VALUE
28	Other►(<u>VACATIONS</u>)	X	16	24,455	FAIR MARKET VALUE
	Other►(<u>JEWERLY</u>)	Х	5	4,235	FAIR MARKET VALUE
	BEHIND THE SCENES				
	Other ► (TOURS) UNIQUE	X	10	7,600	FAIR MARKET VALUE
	Other►(<u>EXPERIENCES</u>) PHOTO	Х	3	5,541	FAIR MARKET VALUE
20	Other ► (<u>SESSIONS</u>) Number of Forms 8283 received	X by the orga	5		FAIR MARKET VALUE
29	for which the organization comple				29 1 Yes No
30a	During the year, did the organiza				1-28 that it
	must hold for at least three year for exempt purposes for the enti			on, and which is not require	to to be used 30a No
b	If "Yes," describe the arrangem				
31	Does the organization have a gif	•		•	
	Does the organization hire or us contributions?	e third parti	es or related organizations	to solicit, process, or sell	noncash
	If "Yes," describe in Part II If the organization did not report	t an amount	: in column (c) for a type of	property for which column ((a) is checked,

describe in Part II

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

Harriser of Refine Fe	cerrea, er a compination er betin	The complete the part for any additional information
Identifier	Return Reference	Explanation
METHOD FOR DETERMINING NUMBER OF CONTRIBUTIONS	, , , ,	THE ORGANIZATION IS REPORTING THE NUMBER OF CONTRIBUTORS IN PART I COLUMN (B)

Schedule M (Form 990) (2012)

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493072001104

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.

2012

Open to Public Inspection

Name of the organization SAINT ANN'S SCHOOL

Employer identification number

11-2606681

Identifier R	Return Reference	Explanation
ACTIVITIES PA	PAGE 1, PART I, LINE	AT SAINT ANN'S SCHOOL WE EDUCATE CHILDREN IN THE ACADEMIC DISCIPLINES AND THE ART'S FROM PRESCHOOL THROUGH 12TH GRADE. THROUGH THE EFFORTS OF MORE THAN TWO HUNDRED AND FIFTY FACULTY AND STAFF, WE BNGAGE CURIOUS, SELF-MOTIVATED STUDENTS IN AN EDUCATIONAL JOURNEY, INSTILLING A LOVE OF LEARNING THAT REMAINS WITH THEM THROUGHOUT THEIR LIVES. THE ACCOMPLISHMENTS OF OUR STUDENTS ARE ROUTINELY RECOGNIZED BY NATIONAL AND INTERNATIONAL INSTITUTIONS. EIGHTY-TWO GRADUATES OF THE CLASS OF 2013 GAINED ACCEPTANCE AT MORE THAN ONE HUNDRED SELECTIVE COLLEGES AND UNIVERSITIES. THIRTY-ONE MEMBERS OF THE CLASS OF 2013 WERE RECOGNIZED BY THE COLLEGE BOARD FOR HAVING ACHIEVED OUTSTANDING ACADEMIC PERFORMANCE ON ADVANCED PLACEMENT EXAMS ONE STUDENT WAS NAMED A NATIONAL AP SCHOLAR, ELEVEN STUDENTS WERE NAMED AP SCHOLARS WITH DISTINCTION, TEN WERE NAMED AP SCHOLARS WITH HONOR, AND NINE WERE NAMED AP SCHOLARS (NB. AP COURSES, AS SUCH, ARE NOT OFFERED AT SAINT ANN'S.) THIRTY-TWO PERCENT OF THE STUDENTS IN THE CLASS OF 2013 WERE NATIONAL MERIT, NATIONAL ACHIEVEMENT, OR NATIONAL HISPANIC SCHOLARS, FINALISTS, SEMIFINALISTS, COMBENDED STUDENTS OR OUTSTANDING PARTICIPANTS, ONE NATIONAL MERIT SCHOLARSHIP WAS AWARDED TO A MEMBER OF THIS CLASS.) AT THE NATIONAL LEVEL OF THE SCHOLASTIC AWARDS PROGRAMS, 1 GOLD MEDAL AND 1 SILVER MEDAL FOR ART WERE AWARDED TO MEMBERS OF THIS CLASS, ALONG WITH 6 GOLD MEDALS, 1 SILVER MEDAL WITH DISTINCTION AND 4 SILVER MEDALS FOR WRITING REGIONAL SCHOLASTIC AWARDS INCLUDED 10 GOLD KEYS AND 24 SILVER KEYS FOR ART, ALONG WITH 45 GOLD KEYS AND 38 SILVER KEYS FOR WRITING ONE STUDENT IN THE CLASS OF 2013 WON A GOLD MEDAL AND ANOTHER WON A SILVER MEDAL IN THE 2013 GREATER METROPOLITAN NEW YORK MATH FAIR, AND ONE STUDENT WAS INVITED TO BE A PART OF THE NEW YORK CITY MATH TEAM BY THE AMERICAN REGIONS MATHEMATICS LEAGUE. TWO STUDENTS WERE MEMBERS OF THIS CLASS RECEIVED HONORABLE MENTITIONS AND ONE WAS A FINALIST IN THE CLASS OF 2013 WONE A GOLD MEDBLE AND ONE WAS A FINALIST IN THE JAPANESE LANGUAGE CATEGORY IN THE 2013 UNIS

ldentifier	Return Reference	Explanation
ORGANIZATION'S MISSION STATEMENT	FORM 990, PAGE 2, PART III, LINE 1	SAINT ANN'S SCHOOL IS AN INDEPENDENT, NON-SECTARIAN DAY SCHOOL OFFERING INSTRUCTION TO OVER A THOUSAND STUDENTS IN PRESCHOOL THROUGH 12TH GRADE WE BELIEVE EDUCATION IS A RICH AND SUBTLE EXPLORATION AND QUESTIONING OF THE WORLD, NOT A MEANS TO AN END SINCE 1965 SAINT ANN'S SCHOOL HAS BROUGHT TOGETHER GIFTED CHILDREN AND PASSIONATE TEACHERS IN A FIERCE PURSUIT OF KNOWLEDGE, SKILL AND ARTISTRY WE CULTIVATE A JOY FOR LEARNING THROUGH A DEEP AND RIGOROUS CURRICULUM, IN WHICH THE ARTS ARE AN ESSENTIAL PRESENCE SO THAT EVERY CHILD WILL FLOURISH, WE ESCHEW GRADES AND RANKINGS IN FAVOR OF ONGOING DIALOGUE AND TEACHER REPORTS AT SAINT ANNS WE OFFER OUR DREAMS TO THOSE WHO WILL SHARE THEIRS WITH US SAINT ANN'S EDUCATION IMPARTS THE BEST OF HUMAN TRADITIONS AND DISCOVERIES WHILE NURTURING INTELLECTUAL ADVENTURE OUR STUDENTS ARE GIVEN GREAT FREEDOM - CERTAINLY TO ACHIEVE, ALSO TO TRUST THEMSELVES AND TO FIND DEEP SATISFACTION IN LEARNING FOR ITS OWN SAKE IN ANECDOTAL REPORTS, THE CLASSROOM, AT SPORTS EVENTS, OR ON STAGE, WE HOLD CENTRAL THE CELEBRATION OF OUR STUDENTS TEACHERS AT SAINT ANN'S ARE CHOSEN FOR THEIR STRONG INTELLECTUAL AND ARTISTIC INTERESTS AND THEIR COMMUNICATE THEIR EDUCATION OF OUR CHILDREN FACULTY ARE GIVEN THE OPPORTUNITY TO COMMUNICATE THEIR ENTHUSIASM, TO USE WHATEVER THEY FIND PRACTICAL IN AN EFFORT TO DRAW OUT THE MOST AUTHENTIC AND EXCEPTIONAL WORK FROM THEIR STUDENTS OUR TEACHERS 'LEADERSHIP IN THE CLASSROOM AND OUT ARISES FROM THEIR INTELLECT, ACCOMPLISHMENT, AND PROFOUND SENSE OF HUMANITY OUR CURRICULUM IS A REALM OF POSSIBILITIES WHERE WE MEET OUR STUDENTS IT IS A SUBSTANTIVE AND DYNAMIC MEANS TO ENGAGE EVERY CHILD IT IS FLEXIBLE AND RESPONSIVE, SO THAT WHENEVER FEASIBLE, OUR STUDENTS UNDERTAKE ACCELERATED OR SPECIALIZED WORK IN SUBJECT AREAS RANGING FROM MUSIC TO CALCULUS TO CHINESE, BASED UPON TALENTS AND INTERESTS RATHER THAN AGE OR GRADE WE ARE A GENUINE COMMUNITY, OPERATING SEVEN DAYS A WEEK, CONSTANTLY REINVENTED AS OUR MEMBERS MOVE FROM ROLE TO ROLE, SUSTAINED BY A COMMUNITY TO EACH OTHER

	Return eference	Explanation
PAF SEC	RT VI, CTION B, IE 11	THE DIRECTOR OF FINANCE AND ADMINISTRATION AND THE CONTROLLER, ALONG WITH OTHER SCHOOL ADMINISTRATORS AND THE SCHOOL'S AUDITORS, ARE RESPONSIBLE FOR THE PREPARATION AND SUBMISSION OF THE DRAFT FORM 990. THIS FIRST DRAFT IS EMAILED TO A TEAM CONSISTING OF THE HEAD OF SCHOOL, THE AUDITORS, THE PRESIDENT OF THE BOARD, THE CHAIR OF THE AUDIT COMMITTEE AND THE TREASURER (THE ONLY PARTICIPANT WHO IS NOT A MEMBER OF THE AUDIT COMMITTEE) FOR REVIEW AND COMMENT THE CONTROLLER COORDINATES THE FLOW OF INFORMATION BETWEEN THE SCHOOL AND ITS AUDITORS THE AUDITORS RESPOND WITH AN OPEN ITEMS LIST FOR THE SCHOOL'S ADMINISTRATION TO ADDRESS THE SCHOOL ADDRESSES THE OPEN ITEMS AND THE NEXT DRAFT, IS SENT TO THE AUDITORS, PRESIDENT OF THE BOARD, MEMBERS OF THE AUDIT COMMITTEE AND THE TREASURER ONCE ALL OF THE AUDITORS' OPEN ITEMS AND ANY ISSUES RAISED BY SCHOOL OFFICIALS HAVE BEEN ADDRESSED, THE DRAFT IS RETURNED TO THE AUDITORS FOR REVIEW BY THEIR EXEMPT ORGANIZATION TAX AND ADVISORY SERVICES GROUP THIS GROUP IN TURN GENERATES A LIST OF OPEN ITEMS THAT THE SCHOOL'S ADMINISTRATION RESPONDS TO ONCE THIS FINAL DRAFT IS COMPLETE, THE AUDITORS PRESENT IT TO A MEETING OF THE FULL AUDIT COMMITTEE A REDACTED DRAFT OF THE 990 IS MAILED TO THE BOARD OF DIRECTORS FOR REVIEW AND DISCUSSION PRIOR TO FILING THE DIRECTOR OF FINANCE RECEIVES AUTHORITY FROM THE AUDIT COMMITTEE ACTING ON THE AUTHORITY ASSIGNED TO THEM BY THE BOARD OF TRUSTEES TO SUBMIT THE FORM 990 A FULL COPY IS MADE AVAILABLE TO THE BOARD UPON COMPLETION OF THE RETURN

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 12C	THE CONFLICT OF INTEREST POLICY APPLIES AS FOLLOWS ANY TRUSTEE, OFFICER, MEMBER OF THE ADMINISTRATION, OR MEMBER OF A COMMITTEE WITH POWERS DELEGATED BY THE GOVERNING BOARD, WHO HAS A DIRECT OR INDIRECT FINANCIAL INTEREST, AS DEINED BY THE SCHOOLS CONFLICT OF INTEREST POLICY IS AN INTERESTED PERSON IF A PERSON IS AN INTERESTED PERSON WITH RESPECT TO ANY AFFILIATE OF THE ORGANIZATION, HE OR SHE IS AN INTERESTED PERSON WITH RESPECT TO ALL AFFILIATES DUTY TO DISCLOSE IN CONNECTION WITH ANY ACTUAL OR POSSIBLE CONFLICT OF INTEREST TO ALL AFFILIATES DUTY TO DISCLOSE ALL MATERIAL FACTS TO THE TRUSTEES AND MEMBERS OF COMMITTEES WITH POWERS DELEGATED BY THE GOVERNING BOARD, OR TO OTHERS CONSIDERING THE PROPOSED TRANSACTION OR ARRANGEMENT DETERMINING WHETHER A CONFLICT OF INTEREST EXISTS AFTER DISCLOSURE OF THE FINANCIAL INTEREST AND ALL MATERIAL FACTS, AND AFTER ANY DISCUSSION WITH THE INTERESTED PERSON, HE'SFE SHALL LEAVE THE GOVERNING BOARD OR COMMITTEE MEETING WHILE THE DETERMINATION OF CONFLICT OF INTEREST IS DISCUSSED AND VOTED UPON THE REMAINING BOARD OR COMMITTEE METING WHILE THE DETERMINATION OF CONFLICT OF INTEREST IS DISCUSSED AND VOTED UPON THE REMAINING BOARD OR COMMITTEE MEETING WHILE THE DETERMINATION OF CONFLICT OF INTEREST OF INTEREST EXISTS PROCEQUIESE FOR ADDRESSING THE CONFLICT OF INTEREST THE CHAPTER ON OF THE COVERNING BOARD OR COMMITTEE SHALL, IF APPROPRIATE, APPOINT A DISINTERESTED PERSON OR COMMITTEE SHALL DECIDE FA CONFLICT OF INTEREST THE CHAPTER ON OR THE COVERNING BOARD OR COMMITTEE SHALL DECIDE FA CONFLICT OF INTEREST THE CHAPTER ON OR THE COVERNING BOARD OR COMMITTEE SHALL DECIDE FA CONFLICT OF INTEREST THE CHAPTER OF THE DISTORMING BOARD OR COMMITTEE SHALL DECIDE FA CONFLICT OF INTEREST THE CHAPTER OF THE DISTORMING BOARD OR COMMITTEE SHALL DECIDE FA CONFLICT OF INTEREST THE CHAPTER OR THE COVERNING BOARD OR COMMITTEE SHALL DETERMINE WHITH PER THE SCHOOL CAN DETERMINE THE THE

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 15	THE HEAD OF SCHOOL'S COMPENSATION IS DECIDED ACCORDING TO TERMS SPECIFIED IN HIS CONTRACT THE FULL BOARD (INDEPENDENT DIRECTORS) USING ITS INDEPENDENT RESEARCH APPROVES THE COMPENSATION OF THE HEAD OF SCHOOL THE HEAD OF SCHOOL SETS ALL OTHER COMPENSATION, INCLUDING SALARIES OF EVERY EMPLOYEE, SUBJECT TO THE REVIEW AND APPROVAL OF THE FINANCE COMMITTEE AND THE PRESIDENT OF THE BOARD WHEN THE ANNUAL BUDGET IS FIXED THE HEAD OF SCHOOL, THE PRESIDENT OF THE BOARD, TREASURER AND SENIOR ADMINISTRATORS RECEIVE NY SAIS AND GUILD OF INDEPENDENT SCHOOLS SURVEY DATA REGARDING SALARIES THE HEAD OF SCHOOL USES THESE DATA WHEN SETTING SALARY LEVELS THE COMPENSATION PROCESS OCCURS ANNUALLY THE COMPENSATION REVIEW PROCESS WAS LAST UNDERTAKEN IN MARCH 2013

Identifier	Return Reference	Explanation
	VI, SECTION C,	THE SCHOOL MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS AVAILABLE UPON REQUEST OR FOR INSPECTION AT THE SCHOOL'S FINANCE OFFICE. IT ALSO MAKES ITS FORM 990 AVAILABLE FOR PUBLIC INSPECTION AS REQUIRED UNDER SECTION 6104 OF THE INTERNAL REVENUE CODE. THE FORM 990 IS ALSO AVAILABLE ON GUIDESTAR ORG AND SIMILAR WEBSITES

ldentifier	Return Reference	Explanation
OVERSIGHT OF AUDIT AND SELECTION OF AN INDEPENDENT ACCOUNTANT	FORM 990, PART XII, LINE 2C	THE PRESIDENT AND TREASURER OF THE BOARD OF DIRECTORS AS WELL AS THE AUDIT COMMITTEE AND THE CONTROLLER OF SAINT ANN'S SCHOOL ASSUMES RESPONSIBILITY FOR THE OVERSIGHT OF THE AUDIT OF ITS FINANCIAL STATEMENTS AND THE SELECTION OF AN INDEPENDENT ACCOUNTANT THE PROCESS HAS NOT CHANGED SIGNIFICANTLY FROM THE PRIOR YEAR

Software ID: Software Version:

EIN: 11-2606681

Name: SAINT ANN'S SCHOOL

Form 990, Part VII - Compensation of Compensated Employees, and Indepe	Officers, Dir	ectors	s,Tru	uste	ees,	, Key	/ En	nployees, Highe	st	
(A) Name and Title	(B) Average hours per week (list any	Positio more unless an dire	than pers office ctor/	o not one son i er an trust	box s bo 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
	hours for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former			organizations
MARC MAYER TREASURER	5 00	х		×				0	0	0
ELIOT NOLEN VICE PRESIDENT	5 00	х		х				0	0	0
JONATHAN WELD PRESIDENT	5 00	х		х				0	0	0
HILLIARD FARBER ASSISTANT TREASURER THRU 6/30/13	1 00	х		х				0	0	0
DAN BERGNER SECRETARY	1 00	х		х				0	0	0
PETER DAVIDSON TRUSTEE	1 00	х						0	0	0
PETER DARROW TRUSTEE THRU 6/30/13	5 00	х						0	0	0
MARJORIE COLEMAN EXECUTIVE COMMITTEE MEMBER	5 00	х		х				0	0	0
MICHAEL POLLACK TRUSTEE	1 00	х						0	0	0
BAHIA RAMOS-SYNOTT TRUSTEE THRU 6/30/13	1 00	х						0	0	0
LAURIE SACKLER TRUSTEE THRU 6/30/13	1 00	х						0	0	0
DANIEL STONE TRUSTEE	1 00	х						0	0	0
LAURA WALKER TRUSTEE	1 00	х						0	0	0
MARY P WATSON TRUSTEE	1 00	х						0	0	0
HAMILTON CHASE TRUSTEE	1 00	х						0	0	0
MICHAEL HADDAD TRUSTEE	1 00	х						0	0	0
JIDE ZEITLIN TRUSTEE	1 00	х						0	0	0
PATTI GREANEY TRUSTEE	1 00	х						0	0	0
STEPHEN CASSELL TRUSTEE	1 00	х						0	0	0
ALEX GOOR TRUSTEE	1 00	х						0	0	0
CARMINE CAPOSSELA TRUSTEE	1 00	х						0	0	0
LINDA KAUFMAN ASSOCIATE HEAD	40 00			х				163,327	0	23,953
VINCENT TOMPKINS HEAD OF SCHOOL	40 00			х				383,885	0	236,681
MATTHEW BLOOM DIRECTOR OF FINANCE & ADMIN	40 00			х				165,958	0	28,104
DANA OKESON HEAD OF HIGH SCHOOL	40 00					x		105,444	0	66,011

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

40 00

ANTHONY SMITH

DIR - BUILDING & GROUNDS

(A) Name and Title	(B) A verage hours per week (list	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)					(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and
	any hours for related organizations below dotted line)	Individual trustee or director	Institutional Trustee		Former Highest compensated employee Key employee		related organizations		
ROBERT SWACKER DEAN OF FACULTY	40 00					х	112,794	0	16,406
GABRIELLE HOWARD HEAD OF LOWER SCHOOL	40 00					х	145,167	0	16,586
JOHN CONNOLLY DIRECTOR OF TECHNOLOGY	40 00					х	104,561	0	62,653

113,393

30,630