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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 private foundations)

Do not enter Social Security numbers on this form as it may be made public By law, the IRS generally cannot redact the information on the form

► Information about Form 990 and its instructions is at <u>www.IRS.gov/form990</u>

OMB No 1545-0047

2013

Open to Public Inspection

A Fo	r the	2013	cale	endar year, or tax year beginning	07-01-2013 , 2013, and end	ding 06-3	0-2014			
B Ch	eck if a	applica	able	C Name of organization THE CHESTNUT HILL SCHOOL				D Emplo	yer ider	ntification number
☐ Add	lress c	hange	:					04-21	78868	3
☐ Na	me cha	ange		Doing Business As						
Init	ıal retu	ım		Number and street (or P O box if ma	all is not delivered to street address)) Room/su	ııte	E Telepho	ne num	ber
Tei				428 HAMMOND STREET				(617)	566-4	394
☐ Am	ended	returi	n	City or town, state or province, coun CHESTNUT HILL, MA 024671229	try, and ZIP or foreign postal code	•		(017)	300 1	
☐ Apı	olicatio	n pen	dıng	CHESTNOT HILL, MA 024071225				G Gross r	eceıpts \$	5 14,352,954
				F Name and address of prin	cıpal officer			s this a group	return	
				DR STEVEN TOBOLSKY 428 HAMMOND STREET			s	ubordinates?		Γ Yes Γ No
				CHESTNUT HILL, MA 0246	71229		H(b) △	re all subordi	nates	┌ Yes ┌ No
							1	ncluded?		
	x-exer			▼ 501(c)(3)	nsert no) 494/(a)(1) or !	52/	1			(see instructions)
	ebsit	e: ►	ww	W TCHS ORG			H(c) (Group exempt	ion nur	mber 🟲
		rganız	ation	Corporation Trust Association	Other 🕨		L Year	of formation 19	19 M	State of legal domicile MA
Pa	rt I	S	um	mary						
				escribe the organization's missio				CHMMED C	4 M D D	DO CDAMC
		FDU	CAI	IONAL INSTRUCTION FOR PR	ESCHOOL, GRADES K-6, AF	TERSCE	IOOL ANI	SUMMER C.	AMP P	ROGRAMS
ည										
莲										
<u>ā</u>	2	Che	ck th	is box দ if the organization dis	continued its operations or di	isposed o	of more th	an 25% of its	net as	sets
Activities & Governance				,						
2 5	3	Num	ber	of voting members of the governi	ng body (Part VI, line 1a) .				3	26
<u>କ</u>	4	Num	ber	of independent voting members o	f the governing body (Part VI	, line 1b))		4	24
톧	5	Tota	l nur	mber of individuals employed in c	alendar year 2013 (Part V , lı	ne 2a)			5	221
្ន	6	Tota	l nur	mber of volunteers (estimate if ne	ecessary)				6	225
-	7a	Tota	l unr	elated business revenue from Pa	rt VIII, column (C), line 12				7a	0
	b	Net	unre	lated business taxable income fr	om Form 990-T, line 34 .				7b	0
								Prior Year		Current Year
	8	C	ntrıl	butions and grants (Part VIII, lin	e 1 h)			738,0	049	1,402,880
를	9	9 Program service revenue (Part VIII, line 2g)						9,307,26		9,537,791
Rayenue	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)					106,3		149,493	
ά	11	01	her	revenue (Part VIII, column (A), l	ines 5, 6d, 8c, 9c, 10c, and 1	11e)		67,9	986	163,343
	12			evenue—add lines 8 through 11	•		e	10 210 /		11 252 507
	4.5							10,219,6		11,253,507
	13			and similar amounts paid (Part)				1,456,3		1,404,336
	14			ts paid to or for members (Part I)			•		0	0
88	15		ilarie -10)	es, other compensation, employe	e benefits (Part IX, column (A	A), lines		5,338,2	281	5,599,617
Expenses	16a		-	sional fundraising fees (Part IX, e	column (A), line 11e)		. 🗀		0	0
<u>₹</u>	Ь	To	tal fur	ndraising expenses (Part IX, column (D)	. line 25) •286,858					
ш	17			expenses (Part IX, column (A), li				2,604,9	79	2,802,014
	18			expenses Add lines 13–17 (mus				9,399,6		9,805,967
	19			ue less expenses Subtract line 1				820,0		1,447,540
ያ ው				·				ning of Curre		End of Year
Net Assets or Fund Balances								Year		
4.55 Base	20			assets (Part X, line 16)				20,164,8		21,395,865
2 m	21			iabilities (Part X, line 26)			•	13,098,9		12,603,892
	22	_		sets or fund balances Subtract I	ine 21 from line 20			7,065,8	392	8,791,973
Pa	rt II	S	ign	ature Block						
				perjury, I declare that I have exa						
				pelief, it is true, correct, and com nowledge	plete Declaration of preparer	(other th	han officer	r) is based on	all info	rmation of which
prepa	1161 11	a 5 a 1	IY KI	lowleage						
		TK	****	**				2015-02-19		
Sigr				ture of officer				Date		
Her		1.	_	TEVEN TOBOLSKY HEAD OF SCHOOL						
				or print name and title						
		<u> </u>	Р	rınt/Type preparer's name	Preparer's signature		ate	Check If	PTIN	
Paid	4		М	ATTHEW P STONE CPA		2	015-02-19	self-employed	P00034	
Pre		2 r	F	ırm's name 🕨 STONE & COMPANY LLC				Firm's EIN 🟲 20	0-801404	49
	On		F	ırm's address ► 57 BEDFORD ST STE 22	5			Phone no (781) 863-63	300

LEXINGTON, MA 024204443

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

✓ Yes ☐ No

Form 990 (2013)

art TV	Check	list of	Required	Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	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? If "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		Νo
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV.	9		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 $\sqrt{2}$	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
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		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		No
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		No
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 other assistance to or for any foreign organization? 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 other assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV</i>	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		No
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 or other assistance to any domestic organization or government 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 or 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 25a	24a	Yes	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		Νo
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		No
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		Νo
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	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so, complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27	Yes	
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	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? <i>If "Yes," complete Schedule N, Part II</i>	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? <i>If "Yes," complete Schedule R, Part I</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 "Yes," complete Schedule R, Part V, line 2</i>	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 990	(2013)

- 11	Statements Regarding Other 1RS Fillings and Tax Compliance			_
	Check if Schedule O contains a response or note to any line in this Part V		Yes	. J No
a	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable 1a 27		1 65	140
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			
	gaming (gambling) winnings to prize winners?	1c	Yes	
	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return			
)	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
ı	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За		No
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, 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			
ı	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		N
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	- -		
		5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		N
	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
	Organizations that may receive deductible contributions under section 170(c).	_	.,	
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	Yes	
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Yes	
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		N
	If "Yes," indicate the number of Forms 8282 filed during the year			
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		N
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		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?	8		
	Sponsoring organizations maintaining donor advised funds.			
	Did the organization make any taxable distributions under section 4966?	9a		
	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
	Section 501(c)(7) organizations. Enter			
	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		
ı	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
	Enter the amount of reserves on hand			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		N
	If "Yes" has it filed a Form 720 to report these payments? If "No" provide an explanation in Schedule O	14h		<u> </u>

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

Se	ection A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax 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	ıe Cod	e.)
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		No
	Did the organization have local chapters, branches, or affiliates?	10a 10b		No
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,		Yes	No
b 11a	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing	10b	Yes	No
b 11a b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	10b	Yes	No
b 11a b 12a	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990	10b		No
b 11a b 12a b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	10b 11a 12a	Yes	No
b 11a b 12a b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	10b 11a 12a 12b	Yes	No
b 11a b 12a b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	10b 11a 12a 12b	Yes Yes	No
b 11a b 12a b c	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy?	10b 11a 12a 12b 12c 13	Yes Yes Yes	No
b 11a b 12a c 13 14	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	10b 11a 12a 12b 12c 13	Yes Yes Yes	No
b 11a b 12a c 13 14 15	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes	No
b 11a b 12a c 13 14 15	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official	10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes	
b 11a b 12a c 13 14 15 a b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official	10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes	
b 11a b 12a c 13 14 15 a b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a	10b 11a 12a 12b 12c 13 14 15a 15b	Yes Yes Yes Yes Yes	No
b 11a b 12a c 13 14 15 a b 16a b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the	10b 11a 12a 12b 12c 13 14 15a 15b	Yes Yes Yes Yes Yes	No
b 11a b 12a c 13 14 15 a b 16a b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	10b 11a 12a 12b 12c 13 14 15a 15b	Yes Yes Yes Yes Yes	No

Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of

State the name, physical address, and telephone number of the person who possesses the books and records of the organization

interest policy, and financial statements available to the public during the tax year

►THE ORGANIZATION 428 HAMMOND STREET CHESTNUT HILL, MA 024671229 (617) 566-4394

<u>Part VII</u> 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	more pers	than on is	one bot	not box h an	offic ustee	ess er e)	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation from the organization and related organizations	
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)		
(1) DR STEVEN TOBOLSKY	40 00	х		х				220,831	0	24,250	
HEAD OF SCHOOL (2) RUSSELL PYLE	2 00										
	2 00	х		х				0	0	0	
PRESIDENT (3) OMAR SIMMONS	2 00										
	200	х		х				0	0	0	
VICE PRESIDENT (4) RENA CLARK	2 00										
	2 00	х		х				0	0	0	
VICE PRESIDENT (5) CYNTHIA GEORGE	2 00										
SECRETARY		Х		х				0	0	0	
(6) CHARLES HEBARD	2 00										
TREASURER		Х		Х				0	0	0	
(7) JULIAN BRAXTON	2 00										
TRUSTEE		Х						0	0	0	
(8) RAYMOND CHUNG	2 00										
TRUSTEE		Х						0	0	0	
(9) MO COWAN	2 00										
TRUSTEE		Х						0	0	0	
(10) OUSMANE DIOP	2 00										
TRUSTEE		Х						0	0	0	
(11) CATHERINE CAPPELLI	2 00										
TRUSTEE		Х						0	0	0	
(12) HASSAN CHOWDHRY	2 00	· ·						_	_	-	
TRUSTEE		Х						0	0	0	
(13) JEFF HAWKINS	2 00	V									
TRUSTEE		Х						0	0	0	
(14) CHARLES JOBSON	2 00	V						0	0	0	
TRUSTEE		Х						<u> </u>	0		
(15) KRISTI ECKERT	2 00	х						0	0	0	
TRUSTEE		_^_						Ů	Ŭ		
(16) KEVIN MENDIK	2 00	х						0	0	0	
(10) KEVIN TENDIK		. ^		I	1	l		ı "I	U	U	
TRUSTEE										<u> </u>	
	2 00	×						0	0	0	

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 and	than on is	one bot rect	not bo: h ar or/ti	check , unle n office rustee	ess er	(D) Reportable compensation from the organization	on n	(E) Reportable compensation from related organizations		(F) Estimated amount of oth compensatio from the organizatior	
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	(W- 2/1099 MISC)	<i>y</i> -	(W- 2/1099- MISC)		organiz and re organiz	lated
(18) DEAN KOLBAS	2 00	х							0		0		0
TRUSTEE (19) LAURIE EWALD	2 00										+		
TRUSTEE	2 00	x							o		0		0
(20) DAN KOSTYK	2 00										+		
TRUSTEE		X							0		0		0
(21) GREG SHELL	2 00	х							0		0		0
TRUSTEE		<u> </u>							_ ĭ				
(22) SANJAY SHETTY	2 00	x							o		o		0
TRUSTEE (23) LORNA LOWE	2 00										+		
TRUSTEE		X							0		0		0
(24) EMILY STAVIS	2 00	х							0		0		0
TRUSTEE											1		
(25) KATHERINE RONAN	2 00	x							o		o		0
TRUSTEE (26) MUSTAFA SAHIN	2 00	-									+		
TRUSTEE		X							0		0		0
(27) KATHLEEN CHERY	40 00			\ ,				124	200				22.012
BUSINESS MANAGER				Х				124	,309		0		22,813
(28) JERI GOETZ	40 00					x		101	,108		0		12,098
DIRECTOR OF DEVELOPMENT													
1b Sub-Total			•			▶							
c Total from continuation sheets to Par	t VII, Section A					- □							
		•		•		•		446,248		0			59,161
Total number of individuals (including l \$100,000 of reportable compensation				ed al	bove	e) who	rec	eived more th	an				
2 Delthe consumer to the best former of					1					4		Yes	No
3 Did the organization list any former off on line 1a? If "Yes," complete Schedule.				y en •	ibio.	yee, o	r nig	nest compens	• •	ı	3		No
4 For any individual listed on line 1a, is to organization and related organizations	he sum of report greater than \$1	table c 50,000	ompe	ensa <i>"Ye</i> s	ition s," c	and o	the te So	r compensatio chedule J for su	n fro	<u> </u>			
ındıvıdual			•	•	٠	•	•		•		4	Yes	
5 Did any person listed on line 1a receiv services rendered to the organization?									or in		5		No
Section B. Independent Contract	ors												
1 Complete this table for your five highes		ındepe	nder	nt co	ntra	ctors	tha	t received mo	re th	an \$100,000 o	f		
compensation from the organization R		tion for	the	cale	nda	r year	enc	ling with or wit			n's ta		
Name and	(A) business address							Des		(B) in of services		(C Comper	
											+		
											1		
											+		
2 Total number of independent contractors	s (including but i	not lım	ited	to th	iose	listed	abo	ove) who rece	ved	more than			

		Check if Schedi	ule O contains a respon	se or note to any lir	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
	1a	Federated cam	paigns 1a					
nts Ints	ь	Membership du	es 1b					
3ra not				1,650				
s, (An	С	Fundraising eve						
Sift lar	d	Related organiz	rations 1d					
s, (imi	e	Government grants	s (contributions) 1e					
ution ier Si	f	All other contribution	ons, gifts, grants, and 1f ot included above	1,401,230				
Contributions, Gifts, Grants and Other Similar Amounts	g	1a-1f \$	ons included in lines	217,480				
Co an	h	Total. Add lines	s 1 a - 1 f	▶	1,402,880			
-e				Business Code				
nue	2a	TUITION		611710	7,449,966	7,449,966		
Se	ь	CAMP, AFTERSCHO	OOL AND OTHER	611710	2,034,766	2,034,766		
Pe l	С							
er vi	d							
ල	е							
Tran	f	All other progra	ım service revenue		53,059	53,059		
Program Serwce Revenue						.,		
	g		s 2a-2f		9,537,791			
	3		ome (including dividend ar amounts)		94,351			94,351
	4		tment of tax-exempt bond p	L.				
	5	Royalties		🕨				
			(ı) Real	(II) Personal				
		Gross rents						
	Ь	Less rental expenses						
	С	Rental income or (loss)						
	d	· · ·	me or (loss)					
			(ı) Securities	(II) Other				
	7a	Gross amount from sales of assets other	3,086,680					
		than inventory						
	Ь	Less cost or other basis and	3,031,538					
	c	sales expenses Gaın or (loss)	55,142					
	d		s)		55,142			55,142
	8a	Gross income f	rom fundraising		· · · · · · · · · · · · · · · · · · ·			
Other Revenue		Ψ	,650 s reported on line 1c)	224.252				
Ē	ь	less direct ov	penses b	231,252 67,909				
₹	c		(loss) from fundraising (163,343			163,343
		Gross income f	rom gaming activities		·			·
	L	1000 4	a noncos h					
			penses b (loss) from gaming activ	vities				
		Gross sales of returns and allo	inventory, less owances .					
	ı.		a					
			oods sold b ((loss) from sales of inve	untory				
	-	Miscellaneous		Business Code				
	11a	i i i sectioneou:		Dasmess Code				
	b							
		_						
	, c	All other race						
	d e	All other reven	L	🕨				
				· · · · •				
	12	Total revenue.	See Instructions	• • • •	11,253,507	9,537,791	0	312,836

Part IX Statement of Functional Expenses

Section $501(c)(3)$ and $501(c)(4)$	\ organizations must complete all columns	All other organizations must complete column (A)
) organizations mast complete an columns	All other organizations must complete column (A)

Do not include 7b, 8b, 9b, and 1 Grants a	e amounts reported on lines 6b, d 10b of Part VIII. and other assistance to governments and organizations United States See Part IV, line 21 and other assistance to individuals in the States See Part IV, line 22 and other assistance to governments, sations, and individuals outside the United See Part IV, lines 15 and 16 s paid to or for members Insation of current officers, directors, trustees, and ployees Insation not included above, to disqualified persons and under section 4958(f)(1)) and persons and in section 4958(c)(3)(B) Isalaries and wages In plan accruals and contributions (include section 401(k) 3(b) employer contributions) Employee benefits	(A) Total expenses 1,404,336 527,252 3,926,895	(B) Program service expenses 1,404,336	(C) Management and general expenses	(D) Fundraising expenses
1 Grants a in the U 2 Grants a United S 3 Grants a organiza States 4 Benefits 5 Comper key emp 6 Comper (as defindescribe) 7 Other s 8 Pension and 403 9 Other e 10 Payroll 11 Fees for a Manage b Legal c Accoun d Lobbyin e Profess f Investin g Other (I column Schedul) 12 Advertis 13 Office e 14 Informa 15 Royaltie 16 Occupa	and other assistance to governments and organizations United States See Part IV, line 21 and other assistance to individuals in the States See Part IV, line 22 and other assistance to governments, lations, and individuals outside the United See Part IV, lines 15 and 16 s paid to or for members Insation of current officers, directors, trustees, and ployees Insation not included above, to disqualified persons and under section 4958(f)(1)) and persons and under section 4958(c)(3)(B) salaries and wages In plan accruals and contributions (include section 401(k) 3(b) employer contributions)	1,404,336 527,252	1,404,336	general expenses	,
In the U Grants a United S Grants a organiza States Benefits Comper key emple describe Comper (as defind describe) Other s Pension and 403 Other e Payroll Fees for a Manage b Legal c Accound Lobbyin e Profess f Investing Other (I column Schedul) Advertis Advertis Advertis Advertis Advertis Royaltie Royaltie Coccupa	and other assistance to individuals in the States See Part IV, line 22 and other assistance to governments, rations, and individuals outside the United See Part IV, lines 15 and 16 s paid to or for members insation of current officers, directors, trustees, and ployees Insation not included above, to disqualified persons and under section 4958(f)(1)) and persons and under section 4958(c)(3)(B) Is alaries and wages in plan accruals and contributions (include section 401(k) 3(b) employer contributions)	527,252			
3 Grants a organiza States 4 Benefits 5 Comper key emp 6 Comper (as defindescribe) 7 Other s 8 Pension and 403 9 Other e 10 Payroll 11 Fees for a Manage b Legal c Accound Lobbyin e Profess f Investing Gother (1) column Schedul 12 Advertis 13 Office e 14 Informa 15 Royaltie 16 Occupa	and other assistance to governments, sations, and individuals outside the United See Part IV, lines 15 and 16 s paid to or for members insation of current officers, directors, trustees, and ployees	527,252			
organiza States 4 Benefits 5 Comper key emp 6 Comper (as defindescribe) 7 Other s 8 Pension and 403 9 Other e 10 Payroll 11 Fees for a Manage b Legal c Accound Lobbyin e Profess f Investing 9 Other (I column Schedul) 12 Advertis 13 Office e 14 Informa 15 Royaltie 16 Occupa	sations, and individuals outside the United See Part IV, lines 15 and 16 s paid to or for members insation of current officers, directors, trustees, and ployees insation not included above, to disqualified persons and under section 4958(f)(1)) and persons and under section 4958(c)(3)(B) is alaries and wages in plan accruals and contributions (include section 401(k) 3(b) employer contributions) in the United Section 401(k)		395,438	131,814	
5 Comperkey emp 6 Comper (as defindescribe) 7 Other s 8 Pension and 403 9 Other e 10 Payroll 11 Fees for a Manage b Legal c Accound Lobbyin e Profess f Investing Other (I column Schedul) 12 Advertis 13 Office e 14 Informa 15 Royaltie 16 Occupa	nsation of current officers, directors, trustees, and ployees		395,438	131,814	
key emp Comper (as defindescribe Comper (as defindescribe Cothers Pension and 403 Gother e Respons Accoun Accoun Accoun Cobbyin Profess Finvestr Gother (I Column Schedul Lobbyin Column Schedul Lober Royaltie Royaltie Coccupa	ployees		395,438	131,814	
(as defindescribe describe 7 Other's 8 Pension and 403 9 Other'e 10 Payroll 11 Fees for a Manage b Legal c Accoun d Lobbyin e Profess f Investr g Other (I column Schedul 12 Advertis 13 Office e 14 Informa 15 Royaltie 16 Occupa	ined under section 4958(f)(1)) and persons sed in section 4958(c)(3)(B) salaries and wages n plan accruals and contributions (include section 401(k) 3(b) employer contributions)	3,926,895			
 8 Pension and 403 9 Other e 10 Payroll 11 Fees for a Manage b Legal c Accound d Lobbyin e Profess f Investm g Other (I column Schedul) 12 Advertis 13 Office e 14 Informa 15 Royaltie 16 Occupa 	n plan accruals and contributions (include section 401(k) 3(b) employer contributions)	3,926,895			
and 403 9 Other e 10 Payroll 11 Fees for a Manage b Legal c Accoun d Lobbyin e Profess f Investin g Other (I column Schedul 12 Advertis 13 Office e 14 Informa 15 Royaltie 16 Occupa	3(b) employer contributions)		3,136,786	790,109	
 10 Payroll 11 Fees for a Manage b Legal c Accoun d Lobbyin e Profess f Investm g Other (I column Schedul) 12 Advertis 13 Office e 14 Informa 15 Royaltie 16 Occupa 	employee benefits	213,412	150,660	62,752	
 11 Fees for a Manage b Legal c Accoun d Lobbyin e Profess f Investm g Other (I column Schedul) 12 Advertis 13 Office e 14 Informa 15 Royaltie 16 Occupa 		576,254	576,254		
 a Manage b Legal c Accoun d Lobbyin e Profess f Investm g Other (I column Schedul 12 Advertis 13 Office e 14 Informa 15 Royaltie 16 Occupa 	taxes	355,804	266,853	88,951	
b Legal c Accoun d Lobbyin e Profess f Investn g Other (I column Schedul 12 Advertis 13 Office e 14 Informa 15 Royaltie 16 Occupa	r services (non-employees)				
c Accound d Lobbyin e Profess f Investm g Other (Incolumn Schedul 12 Advertis 13 Office e 14 Informa 15 Royaltie 16 Occupa	ement				
d Lobbyin e Profess f Investm g Other (I column Schedul 12 Advertis 13 Office e 14 Informa 15 Royaltie 16 Occupa		17,204		17,204	
e Profess f Investm g Other (I column Schedul 12 Advertis 13 Office e 14 Informa 15 Royaltie 16 Occupa	nting	26,000		26,000	
f Investm g Other (I column Schedul 12 Advertis 13 Office e 14 Informa 15 Royaltie 16 Occupa	ng				
g Other (I column Schedul 12 Advertis 13 Office e 14 Informa 15 Royaltie 16 Occupa	sional fundraising services See Part IV, line 17				
column Schedul 12 Advertis 13 Office e 14 Informa 15 Royaltie 16 Occupa	ment management fees				
12 Advertis13 Office e14 Informa15 Royaltie16 Occupa	If line 11g amount exceeds 10% of line 25, (A) amount, list line 11g expenses on ile O)	47,991		47,991	
13 Office e14 Informa15 Royaltie16 Occupa	ising and promotion	27,530	20,647	6,883	
14 Informa15 Royaltie16 Occupa	expenses	276,404	20,011	276,404	
15 Royaltie 16 Occupa	ation technology	,		,	
16 Occupa	es				
	ancy	359,556	269,667	89,889	
1 / IIavei		5,757	5,757		
18 Paymen	nts of travel or entertainment expenses for any federal, or local public officials	·	,		
	ences, conventions, and meetings				
20 Interest	t	403,421	302,566	100,855	
21 Paymen	nts to affiliates				
22 Depreci	iation, depletion, and amortization	472,383	354,287	118,096	
23 Insuran	nce	48,711	36,533	12,178	
mıscella	expenses Itemize expenses not covered above (List aneous expenses in line 24e If line 24e amount exceeds 10% 25, column (A) amount, list line 24e expenses on Schedule O)				
a <u>IN</u> STRU	UCTION AND STUDENT	587,423	587,423		
b FUNDRA	AISING EXPENSES	286,858			286,858
c BAD DE	EBTS	176,085		176,085	
d DIVERS	SITY	27,858	27,858		
e All othe	er expenses	38,833	5,552	33,281	
25 Total fu	unctional expenses. Add lines 1 through 24e	9,805,967	7,540,617	1,978,492	286,858
reported education	osts. Complete this line only if the organization d in column (B) joint costs from a combined ional campaign and fundraising solicitation. Check If following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

Pair	rt X	Check if Schedule O contains a response or note to any line in	thıs P	art X			
					(A) Beginning of year		(B) End of year
	1	Cash-non-interest-bearing			2,471,065	1	2,602,751
	2	Savings and temporary cash investments			1,358,927	2	1,366,440
	3	Pledges and grants receivable, net			612,175	3	798,740
	4	Accounts receivable, net			149,984	4	108,760
	5	Loans and other receivables from current and former officers, employees, and highest compensated employees Complete P Schedule L	art II	of		5	
Assets	6	Loans and other receivables from other disqualified persons (a $4958(f)(1)$), persons described in section $4958(c)(3)(B)$, and and sponsoring organizations of section $501(c)(9)$ voluntary e organizations (see instructions) Complete Part II of Schedule	contri mploy	buting employers		6	
82	7	Notes and loans receivable, net			5,615		3,329
ď	8	Inventories for sale or use			3,515	8	
	9	Prepaid expenses and deferred charges			354,885	ĽТ	242,567
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D		47.504.047	,		<u> </u>
	Ь	Less accumulated depreciation	10b	6,496,703	11,370,591	10c	11,097,514
	11	Investments—publicly traded securities		3,692,804	11	5,033,534	
	12	Investments—other securities See Part IV, line 11	43,051	12	43,116		
	13	Investments—program-related See Part IV, line 11				13	
	14	Intangible assets				14	
	15	Other assets See Part IV, line 11			105,717	15	99,114
	16	Total assets. Add lines 1 through 15 (must equal line 34) .	20,164,814	16	21,395,865		
	17	Accounts payable and accrued expenses			642,456	17	611,774
	18	Grants payable				18	
	19	Deferred revenue			2,287,234	19	2,590,902
	20	Tax-exempt bond liabilities			10,169,232	20	9,401,216
, a	21	Escrow or custodial account liability Complete Part IV of Sch				21	
Liabilities	22	Loans and other payables to current and former officers, direct key employees, highest compensated employees, and disqual	ors, tı				
æ		persons Complete Part II of Schedule L				22	
\exists	23	Secured mortgages and notes payable to unrelated third partie	es .			23	
	24	Unsecured notes and loans payable to unrelated third parties				24	
	25	Other liabilities (including federal income tax, payables to rela and other liabilities not included on lines 17-24) Complete Pa	art X o	f Schedule		25	
	26	D			13,098,922	26	12,603,892
— «	20	Organizations that follow SFAS 117 (ASC 958), check here ► lines 27 through 29, and lines 33 and 34.			10,000,022	20	12,000,002
Ĭ	27	Unrestricted net assets			6,049,001	27	7,575,289
<u> 8</u>	28	Temporarily restricted net assets			949,091	28	1,148,884
	29	Permanently restricted net assets			67,800	29	67,800
or Fund Balance		Organizations that do not follow SFAS 117 (ASC 958), check is complete lines 30 through 34.					
<u> </u>	30	Capital stock or trust principal, or current funds	_			30	
Assets	31	Paid-in or capital surplus, or land, building or equipment fund				31	
\$ S.	32	Retained earnings, endowment, accumulated income, or other		- 3 -		32	
Net /	33	Total net assets or fund balances			7,065,892		8,791,973
ž	34	Total liabilities and net assets/fund balances			20,164,814	34	21,395,865
	1	Total habilities and het assets/land balances		• •	1 20, 104,014		Z1,393,603

Par	Reconcilliation of Net Assets Check if Schedule O contains a response or note to any line in this Part XI				r
1	Total revenue (must equal Part VIII, column (A), line 12)	1		11,	253,507
2	Total expenses (must equal Part IX, column (A), line 25)	2		9,8	305,967
3	Revenue less expenses Subtract line 2 from line 1	3		1,4	147,540
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		7,0	065,892
5	Net unrealized gains (losses) on investments	5		;	278,541
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		8,7	791,973
Par	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				. দ
				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 sepa basis, consolidated basis, or both	rate			
	▼ Separate basis				
c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversigh audit, review, or compilation of its financial statements and selection of an independent accountant?	t of the	2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	า			
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?	е	За		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the		3b		

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As Filed Data -

DLN: 93493058006115

OMB No 1545-0047

SCHEDULE A

(Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

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

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

▶ Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Open to Public **Inspection**

Name of the organization THE CHESTNUT HILL SCHOOL

Employer identification number

_									_	
			blic Charity Sta						<u>nstructions</u>	
ganız —		-	e foundation becaus	•		-	· ·			
<u> </u>		-	•				ection 170(b)(1)(A)(i).		
굣	A scho	ol described	I in section 170(b)(1	l)(A)(ii). (At	tach Sched	ule E)				
Γ	A hosp	ıtal or a coo	perative hospital se	rvice organiz	atıon descr	ıbed ın sectio	n 170(b)(1)	(A)(iii).		
Γ	A medi	cal researcl	n organization operat	ted ın conjun	ction with a	hospital desc	cribed in se	ction 170(b)((1)(A)(iii). E	nter the
_										
l	_	·		_	or universi	ty owned or o	perated by	a governmen	tal unit desc	ribed in
	sect ion	170(b)(1)(A)(iv). (Complete P	art II)						
Γ										
Г	····									
Г						nplete Part II)			
_						-	-	outions, mem	bership fees	and gross
	_		·			* *		•	-	-
				•	-		•	• •		
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\vdash										
<u>'</u>	_		•			•			o carry out t	the nurnoses of
,										
		•	,							(, (-, -,
	aΓ	Type I	b	┌ Type II	I - Function	ally integrate	d d	Type III - N	on-functiona	illy integrated
Γ	By che	cking this b	ox, I certify that the	organization	ıs not conti	rolled directly	or indirect	ly by one or r	nore disqual	ıfıed persons
			on managers and otl	her than one	or more pub	olicly support	ed organiza	tions describ	ed in sectioi	n 509(a)(1) or
					f th - ID	C +b-+ .b :	T T T	- II T	TIT accordan	
		_	received a written di	etermination	from the 1K	S that it is a	iype i, iyp	e II, or i ype	III Supporti	ing organization,
			2006, has the organi	ızatıon accer	ited any giit	or contribution	on from any	of the		ı
		ig persons?	2006, has the organi	ızatıon accep	ited any giit	or contributi	on from any	of the		
	(i) A pe	• .	2006, has the organi rectly or indirectly o	•						Yes No
	. , .	erson who d		controls, eith	er alone or t	together with) 11g	
	and (III)	erson who d) below, the	rectly or indirectly o	controls, eith ne supported	er alone or t organization	together with				(i)
	and (III)	erson who d) below, the amily memb	rectly or indirectly o governing body of th	controls, eith le supported lbed in (i) abo	er alone or t organization	together with			11g	(i) (ii)
	and (III) (ii) A fa (iii) A 3	erson who do below, the amily memb 35% contro	rectly or indirectly o governing body of th er of a person descri	controls, eith ne supported ibed in (i) abo n described	er alone or t organization ove? in (i) or (ii) a	together with n? above?			11g 11g	(i) (ii)
	and (III) (ii) A fa (iii) A 3	erson who do below, the amily memb 35% contro	rectly or indirectly or governing body of th er of a person descri lled entity of a perso	controls, eith ne supported ibed in (i) abo n described	er alone or t organization ove? in (i) or (ii) a	together with n? above?			11g 11g	(i) (ii)
	and (III) (ii) A fa (iii) A 3 Provide	erson who do below, the amily memb 35% contro	rectly or indirectly or governing body of th er of a person descri lled entity of a perso	controls, eith ne supported ibed in (i) abo n described	er alone or i organization ove? in (i) or (ii) a ed organizat	together with n? above? ion(s) (v) Did you	persons de	scribed in (ii)	11g 11g 11g((i) (ii)
ppor	and (iii) A fa (iii) A 3 Provide	erson who d) below, the amily memb 35% contro the followi	rectly or indirectly of governing body of the er of a person described entity of a person ginformation about (iii) Type of organization	controls, eith ne supported nbed in (i) abo n described the supporte (iv) Is to	er alone or i organization ove? in (i) or (ii) i ed organizat the on in	together with n? above? ion(s) (v) Did you the organia	persons de notify zation	scribed in (ii) (vi) Is organizat	11g 11g 11g(the	(ii) (iii) (vii) A mount of monetary
ppor	and (III) (ii) A fa (iii) A 3 Provide	erson who d) below, the amily memb 35% contro the followi	rectly or indirectly of governing body of the er of a person described entity of a person ginformation about (iii) Type of organization (described on	controls, eith ne supported ibed in (i) abo n described the supporte (iv) Is to organizati col (i) listo	er alone or i organization ove? in (i) or (ii) i ed organizati the on in	together with n? above? ion(s) (v) Did you the organiz in col (i) o	persons de notify zation f your	(vi) Is organizat col (i) org	11g 11g(11g(the ion in anized	(i) (ii) (iii) (vii) A mount of
ppor	and (iii) A fa (iii) A 3 Provide	erson who d) below, the amily memb 35% contro the followi	rectly or indirectly of governing body of the er of a person described entity of a person ginformation about (iii) Type of organization (described on lines 1-9 above	controls, eith ne supported abed in (i) about the supporte (iv) Is to organizati col (i) list your gove	er alone or i organization ove? in (i) or (ii) i ed organizat the on in ted in rning	together with n? above? ion(s) (v) Did you the organia	persons de notify zation f your	scribed in (ii) (vi) Is organizat	11g 11g(11g(the ion in anized	(ii) (iii) (vii) A mount of monetary
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ppor	and (iii) A fa (iii) A 3 Provide	erson who d) below, the amily memb 35% contro the followi	rectly or indirectly of governing body of the er of a person described entity of a person ginformation about (iii) Type of organization (described on lines 1-9 above or IRC section	controls, eith le supported lbed in (i) abo on described the supporte (iv) Is i organizati col (i) list your gove docume	er alone or torganization ove? In (i) or (ii) and organization or the continuity of the continuity on the continuity on the continuity of	together with n? above? ion(s) (v) Did you the organiz in col (i) o suppor	notify zation f your t?	(vi) Is organizat col (i) org	the ion in anized S ?	(ii) (iii) (vii) A mount of monetary
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ppor	and (iii) A fa (iii) A 3 Provide	erson who d) below, the amily memb 35% contro the followi	rectly or indirectly of governing body of the er of a person described entity of a person ginformation about (iii) Type of organization (described on lines 1-9 above or IRC section (see	controls, eith le supported lbed in (i) abo on described the supporte (iv) Is i organizati col (i) list your gove docume	er alone or torganization ove? In (i) or (ii) and organization or the continuity of the continuity on the continuity on the continuity of	together with n? above? ion(s) (v) Did you the organiz in col (i) o suppor	notify zation f your t?	(vi) Is organizat col (i) org	the ion in anized S ?	(ii) (iii) (vii) A mount of monetary
, , , ,	- - -	A scho A hosp A medi hospita An orga section A feder An orga describ A comm An orga receipt its sup acquire An orga one or i the box a By cher other th section If the o check to	A school described A hospital or a coo A medical research hospital's name, ci An organization op section 170(b)(1)(A federal, state, or An organization that described in section A community trust An organization that receipts from activ its support from gra acquired by the organization org	A school described in section 170(b)(1 A hospital or a cooperative hospital se A medical research organization operation hospital's name, city, and state An organization operated for the benefit section 170(b)(1)(A)(iv). (Complete P) A federal, state, or local government of An organization that normally receives described in section 170(b)(1)(A)(vi). A community trust described in section An organization that normally receives receipts from activities related to its exits support from gross investment inco acquired by the organization after June An organization organized and operated one or more publicly supported organization or more publicly supported organization box that describes the type of support a Type I b Type II c By checking this box, I certify that the other than foundation managers and ot section 509(a)(2) If the organization received a written decheck this box	A school described in section 170(b)(1)(A)(ii). (At A hospital or a cooperative hospital service organized A medical research organization operated in conjunt hospital's name, city, and state An organization operated for the benefit of a college section 170(b)(1)(A)(iv). (Complete Part II) A federal, state, or local government or government An organization that normally receives a substantial described in section 170(b)(1)(A)(vi). (Complete PA community trust described in section 170(b)(1)(A) An organization that normally receives (1) more the receipts from activities related to its exempt function its support from gross investment income and unreleacquired by the organization after June 30, 1975. So An organization organized and operated exclusively one or more publicly supported organizations described box that describes the type of supporting organ a Type I b Type II c Type II. By checking this box, I certify that the organization other than foundation managers and other than one section 509(a)(2). If the organization received a written determination	A school described in section 170(b)(1)(A)(ii). (Attach Schedic A hospital or a cooperative hospital service organization described in section 170(b) (1)(A) (iv). (Complete Part II) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(vi). (Complete Part II) A community trust described in section 170(b)(1)(A)(vi) (Complete Part II) A community trust described in section 170(b)(1)(A)(vi) (Complete Part II) An organization that normally receives (1) more than 331/3% or receipts from activities related to its exempt functions—subject its support from gross investment income and unrelated busine acquired by the organization after June 30, 1975. See section 1975. An organization organized and operated exclusively for the ben one or more publicly supported organizations described in sect the box that describes the type of supporting organization and a Type I b Type II c Type III - Function By checking this box, I certify that the organization is not controther than foundation managers and other than one or more publication from the IR	A school described in section 170(b)(1)(A)(ii). (Attach Schedule E) A hospital or a cooperative hospital service organization described in section A medical research organization operated in conjunction with a hospital describes hospital's name, city, and state An organization operated for the benefit of a college or university owned or of section 170(b)(1)(A)(iv). (Complete Part II) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(vi). (Complete Part II) A community trust described in section 170(b)(1)(A)(vi) (Complete Part II) An organization that normally receives (1) more than 331/3% of its support receipts from activities related to its exempt functions—subject to certain exits support from gross investment income and unrelated business taxable in acquired by the organization after June 30, 1975 See section 509(a)(2). (C) An organization organized and operated exclusively to test for public safety An organization organized and operated exclusively to the benefit of, to perfone or more publicly supported organizations described in section 509(a)(1) the box that describes the type of supporting organization and complete line a Type I b Type II c Type III - Functionally integrate By checking this box, I certify that the organization is not controlled directly other than foundation managers and other than one or more publicly support section 509(a)(2) If the organization received a written determination from the IRS that it is a finite formula of the interest of the proper interest of the interest of th	A school described in section 170(b)(1)(A)(ii). (Attach Schedule E) A hospital or a cooperative hospital service organization described in section 170(b)(1) A medical research organization operated in conjunction with a hospital described in section section 170(b)(1) (a) (b) (b). (c)	A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(hospital's name, city, and state	A school described in section 170(b)(1)(A)(ii). (Attach Schedule E) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). E hospital's name, city, and state An organization operated for the benefit of a college or university owned or operated by a governmental unit described in 170(b)(1)(A)(iv). (Complete Part II) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the gendescribed in section 170(b)(1)(A)(vi). (Complete Part II) A community trust described in section 170(b)(1)(A)(vi) (Complete Part II) An organization that normally receives (1) more than 331/3% of its support from contributions, membership fees receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 331, its support from gross investment income and unrelated business taxable income (less section 511 tax) from business to the organization organization after June 30, 1975 See section 509(a)(2). (Complete Part III) An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 5 the box that describes the type of supporting organization and complete lines 11e through 11h a Type I b Type II c Type III - Functionally integrated d Type III - Non-functionally checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqual other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(2) If the organization received a written determination from the IRS that it is a Type II, Type II, or Type III support

Sch	edule A (Form 990 or 990-EZ) 2013						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 failed	to qualify under
_	Part III. If the organiza ection A. Public Support	tion fails to qu	alify under the	tests listed bel	low, please con	iplete Part .	.111.)
	endar year (or fiscal year beginning	(-) 2000	(1-) 2010	(-) 2011	(4) 2012	(-) 201	(5) T. I.
	in) ►	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 201:	3 (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						
3	behalf The value of services or facilities						
3	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						
	(f)						
6	Public support. Subtract line 5 from line 4						
S	ection B. Total Support	I	<u> </u>		I		I
	endar year (or fiscal year beginning	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
	in) ►	(a) 2009	(6) 2010	(6) 2011	(u) 2012	(e) 2013	(I) I otal
7	A mounts from line 4						
8	Gross income from interest,						
	dividends, payments received on securities loans, rents, royalties						
	and income from similar						
	sources						
9	Net income from unrelated						
	business activities, whether or not the business is regularly carried						
	on						
10	Other income Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part IV)						
11	Total support (Add lines 7 through 10)						
12	Gross receipts from related activities	es, etc (see inst	ructions)	•		12	1
13	First five years. If the Form 990 is t	for the organizati	on's first, second	l, thırd, fourth, or	fifth tax year as a	501(c)(3) o	rganızatıon, check
	this box and stop here				<u> </u>	<u> </u>	<u></u>
	ection C. Computation of Pub			4.4 1 (5)			
14	Public support percentage for 2013			11, column (f))		14	
15	Public support percentage for 2012	· ·	•			15	_
16a	33 1/3% support test—2013. If the condition have				line 14 is 33 1/3%	or more, che	ck this box
b	and stop here. The organization qua 33 1/3% support test—2012. If the				and line 15 is 33	8 1/3% or more	
	box and stop here. The organization				, 10 00	. 40.001111011	► F
17a	10%-facts-and-circumstances test-	-2013. If the org	anızatıon dıd not	check a box on lı			
	is 10% or more, and if the organizat						
	in Part IV how the organization mee	ts the "facts-and	d-circumstances'	test The organ	ızatıon qualıfıes a	s a publicly s	
Ь	organization 10%-facts-and-circumstances test-	-2012 . If the ora	anization did not	check a hov on li	ne 13 16a 16b	or 17a and L	▶ 厂
	15 is 10% or more, and if the organ						
	Explain in Part IV how the organizat						ublicly
	supported organization				4-71		▶ □
18	Private foundation. If the organizat instructions	ion aid not check	k a box on line 13	, 16a, 16b, 1/a,	or 1/p, check thi	s pox and se	e ▶□
							г,

Schedule A (Form 990 or 990-EZ) 2013 Part III Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.) Section A. Public Support

Cale	ndar year (or fiscal year beginning in) 🟲	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not						
2	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						
4	business under section 513 Tax revenues levied for the						
•	organization's benefit and either						
	paid to or expended on its						
_	behalf The value of services or facilities						
5	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
7a	A mounts included on lines 1, 2,						
	and 3 received from disqualified persons						
ь	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						
c	Add lines 7a and 7b						
8	Public support (Subtract line 7c						
	from line 6) ction B. Total Support						
	ndar year (or fiscal year beginning	() 2000	(1) 2010	() 2011	(1) 2012	() 2012	(C) T
				(A) 2011 I	(d) 2012	(e) 2013	(f) Total
	in) ►	(a) 2009	(b) 2010	(c) 2011	(4) 2012	(-,	(-,
9	in) ► A mounts from line 6	(a) 2009	(B) 2010	(6) 2011	(4) 2012	(5, 2222	(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	in) ► A mounts from line 6 Gross income from interest,	(a) 2009	(B) 2010	(6) 2011	(4) 2012	(0, 2000	(7,7,5,5,1)
9	in) ► A mounts from line 6	(a) 2009	(b) 2010	(6) 2011	(4) 2012	(5,232	
9	in) A mounts from line 6 Gross income from interest, dividends, payments received on	(a) 2009	(b) 2010	(6) 2011	(4) 2322		
9 10a	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	(a) 2009	(b) 2010	(6) 2011	(4) 2322		
9	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable	(a) 2009	(b) 2010	(6) 2011	(4) 2012		
9 10a	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	(a) 2009	(b) 2010	(6) 2011	(4) 2322		
9 10a	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975	(a) 2009	(b) 2010	(6) 2011	(4) 2322		
9 10a b	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b	(a) 2009	(b) 2010	(6) 2011	(4) 2012		
9 10a b	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated	(a) 2009	(b) 2010	(6) 2011	(4) 2012		
9 10a b	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b	(a) 2009	(b) 2010	(6) 2011	(4) 2322		
9 10a b c 11	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on	(a) 2009	(b) 2010	(6) 2011	(4) 2322		
9 10a b	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include	(a) 2009	(b) 2010	(6) 2011			
9 10a b c 11	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of	(a) 2009	(b) 2010	(c) 2011			
9 10a b c 11	In) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)	(a) 2009	(b) 2010	(6) 2011			
9 10a b c 11	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c,	(a) 2009	(b) 2010	(c) 2011			
9 10a b c 11	In) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
9 10a b c 11 12	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here	or the organizati	on's first, second				
9 10a b c 11 12 13 14	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here	or the organizati	on's first, second	, thırd, fourth, or		a 501(c)(3) orga	nization,
9 10a b c 11 12 13 14 Se 15	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here ction C. Computation of Publ Public support percentage for 2013	or the organizati ic Support Pe (line 8, column (on's first, second ercentage f) divided by line	, thırd, fourth, or		a 501(c)(3) orga	nization,
9 10a b c 11 12 13 14 Se 15 16	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here ction C. Computation of Publ Public support percentage from 201	or the organization of the	on's first, second ercentage f) divided by line art III, line 15	, third, fourth, or		a 501(c)(3) orga	nization,
9 10a b c 11 12 13 14 Se 15 16 Se	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here ction C. Computation of Publ Public support percentage from 201 ction D. Computation of Inve	or the organization of the	on's first, second ercentage f) divided by line art III, line 15 me Percenta	, third, fourth, or 13, column (f))	fifth tax year as a	a 501(c)(3) orga 15 16	nization,
9 10a b c 11 12 13 14 Se 15 16 Se 17	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here ction C. Computation of Publ Public support percentage from 201 ction D. Computation of Inve	or the organization ic Support Performance (line 8, column (2 Schedule A, Paragraphic Performance) colors (line 10c, colors)	on's first, second ercentage f) divided by line art III, line 15 me Percentagolumn (f) divided	, third, fourth, or 13, column (f)) ge by line 13, colum	fifth tax year as a	15 16	nization,
9 10a b c 11 12 13 14 Se 15 16 Se 17 18	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here ction C. Computation of Publ Public support percentage from 201 ction D. Computation of Inve	or the organization of the organization of the organization of the second of the secon	on's first, second ercentage f) divided by line art III, line 15 me Percentago olumn (f) divided A, Part III, line 1	, third, fourth, or 13, column (f)) ge by line 13, column	fifth tax year as a	15 16	nization,

33 1/3% support tests—2012. 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

			on. Provide the explanations required by Part II, ling lso complete this part for any additional information	
			Facts And Circumstances Test	
	Return Referen	ice	Explanation	
•			Sch	adula A (Form 990 or 990-E7) 201

DLN: 93493058006115

OMB No 1545-0047

SCHEDULE C

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ.

► See separate instructions. ► Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Inspection

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

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

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

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

If the organization answered "Yes" to Form 990, Part IV, Line 5 (Proxy Tax) or Form 990-EZ, Part V, line 35c (Proxy Tax), then ◆ Section 501(c)(4), (5), or (6) organizations Complete Part III Name of the organization **Employer identification number** THE CHESTNUT HILL SCHOOL 04-2178868 Complete if the organization is exempt under section 501(c) or is a section 527 organization. Provide a description of the organization's direct and indirect political campaign activities in Part IV 2 Political expenditures 3 Volunteer hours Part I-B Complete if the organization is exempt under section 501(c)(3). Enter the amount of any excise tax incurred by the organization under section 4955 2 Enter the amount of any excise tax incurred by organization managers under section 4955 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? 3 Was a correction made? ☐ Yes □ No If "Yes," describe in Part IV Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3). Enter the amount directly expended by the filing organization for section 527 exempt function activities Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b Did the filing organization file Form 1120-POL for this year? 4 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV **(c)** EIN (e) A mount of political (a) Name (b) Address (d) A mount paid from contributions received filing organization's and promptly and funds If none, enter -0directly delivered to a separate political organization If none, enter-0-

Sch	nedule C (Form 990 or 990-EZ) 2013					Page 2
Pä	art II-A Complete if the organization	is exempt under	section 501(c)(3) and file	ed Form 5768	
_	under section 501(h)).		Link in Doub TV an	- h - 66:1: - h - d		a adduses FIN
٠.	Check ► If the filing organization belongs to a expenses, and share of excess lobb		iist in Part IV ea	ch amiliated gro	up members nam	e, address, EIN,
3	Check ► ☐ If the filing organization checked bo		l" provisions app	ly		
	Limits on Lobbying E (The term "expenditures" means ar		l .)		(a) Filing organization's totals	(b) Affiliated group totals
La	Total lobbying expenditures to influence public o	pinion (grass roots lob	bying)			
ь	Total lobbying expenditures to influence a legisl	ative body (direct lobby	yıng)			
c	Total lobbying expenditures (add lines 1a and 1	o)		Γ		
d	O ther exempt purpose expenditures			Γ		
e	Total exempt purpose expenditures (add lines 1	c and 1d)		Γ		
f	Lobbying nontaxable amount Enter the amount is columns	rom the following table	ın both			
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontax	able amount is:			
	Not over \$500,000	20% of the amount on lir	ne 1e			
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the	e excess over \$500,0	00		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the	e excess over \$1,000	,000		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the	excess over \$1,500,0	000		
	Over \$17,000,000	\$1,000,000				
g	Grassroots nontaxable amount (enter 25% of lir	ue 1f)				
h	Subtract line 1g from line 1a If zero or less, ent	er-0-				
i	Subtract line 1f from line 1c If zero or less, ente	er - 0 -				
j	If there is an amount other than zero on either li section 4911 tax for this year?	ne 1h or line 1ı, did the	organization file	Form 4720 repo	orting	┌ Yes ┌ No
	(Some organizations that made a columns below. See t	he instructions fo	ection do not r lines 2a thro	havè to con ough 2f on p		ne five
	Lobbying Exp	enditures During	4-Year Avera ⊤	ging Period	1	1
	Calendar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) Total
2a	Lobbying nontaxable amount					
b	Lobbying ceiling amount (150% of line 2a, column(e))					
c	Total lobbying expenditures					
d	Grassroots nontaxable amount					

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

Grassroots lobbying expenditures

Ра	art II-B Complete if the organization is exempt under section 501(c)(3) a filed Form 5768 (election under section 501(h)).	nd has N	ОТ			rage =
			(a)		(b)	
	each "Yes" response to lines 1a through 11 below, provide in Part IV a detailed description of the lobbying ivity.	ng	Yes	No	Am	ount
1 a	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referends through the use of Volunteers?	ım,				
b c	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	F				
d	Mailings to members, legislators, or the public?					
е	Publications, or published or broadcast statements?					
f	Grants to other organizations for lobbying purposes?					
g	Direct contact with legislators, their staffs, government officials, or a legislative body?					
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?					
i	O ther activities?					
j	Total Add lines 1c through 1i					
2a	Did the activities in line 1 cause the organization to be not described in section $501(c)(3)$?		ĺ			
b	If "Yes," enter the amount of any tax incurred under section 4912		•			
c	If "Yes," enter the amount of any tax incurred by organization managers under section 4912					
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					
Par	rt III-A Complete if the organization is exempt under section $501(c)(4)$, s	section 5	01(c)	(5), o	r sec	tion
	501(c)(6).					N.
1	Were substantially all (90% or more) dues received nondeductible by members?			Г	1	es No
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			-	2	
3	Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political expenditures from the prior year?)		-	3	
	art III-B Complete if the organization is exempt under section 501(c)(4), s		01(c))(5) o	_	tion
Let	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are ans line 3, is answered "Yes."					
1	Dues, assessments and similar amounts from members		1			
2		olitical				
а	Current year		2a			
b	Carryover from last year		2b			
C			2c			
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) of		3			
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the					
	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying a political expenditure next year?	and	4			
5			5			
	Part IV Supplemental Information					
Pro	rovide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affi art II-B, line 1 Also, complete this part for any additional information	liated group	o list),	Part II	-A , line	2, and
	Return Reference Explanation					
PAR	RT II-B, LINE 1 DURING THE YEAR ENDED JUNE 30, 2014 THE CHESTNUDUES TO MEMBER ORGANIZATIONS WHICH MAY ENGAG PORTION OF MEMBERSHIP DUES MAY BE USED FOR LOB	E IN LOBB	YING	ACTIV		

201104410 0 (101111 330 01 330 12) 2013		i age -i
Part IV Supplemental Information	on <i>(continued)</i>	
Return Reference	Explanation	

Schedule D (Form 990) 2013

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DLN: 93493058006115

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. ► Information about Schedule D (Form 990)

Open to Public **Inspection**

and its instructions is at www.irs.gov/form990. Internal Revenue Service Name of the organization Employer identification number THE CHESTNUT HILL SCHOOL 04-2178868 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year Aggregate contributions to (during year) 3 Aggregate grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or education) Γ Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Year Total number of conservation easements 2a Total acreage restricted by conservation easements 2b Number of conservation easements on a certified historic structure included in (a) 2c Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register 2d Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year 🟲 Number of states where property subject to conservation easement is located *****___ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year A mount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(II)? In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items (i) Revenues included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items

Revenues included in Form 990, Part VIII, line 1

Assets included in Form 990, Part X

_	IIII Organizations Maintaining Co	liections of Art, H	istoricai	ırea	sures, or O	tner	Sillillai ASS	ets (co	<u>ntinuea)</u>
3	Using the organization's acquisition, access collection items (check all that apply)	on, and other records,	check any	of the f	following that a	ire a	significant use o	of its	
a	Public exhibition	d	I	anore	xchange progr	ams			
b	Scholarly research	e	e Γ Ot	her					
c	Preservation for future generations								
4	Provide a description of the organization's co	llections and explain h	now they fur	ther th	ie organization	's exe	empt purpose ın		
5	During the year, did the organization solicit of assets to be sold to raise funds rather than t							- Yes	□ No
Par		ements. Complete	ıf the org	anızat	ion answere		es" to Form 99	90,	·
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?					ets n		Yes	┌ No
b	If "Yes," explain the arrangement in Part XII	I and complete the foll	lowing table						
							Amo	ount	
C	Beginning balance					1c			
d	Additions during the year					1d			
e	Distributions during the year					1e			
f	Ending balance					1f			
2a	Did the organization include an amount on Fo	rm 990, Part X, line 2	1?				Г	Yes	┌ No
b	If "Yes," explain the arrangement in Part XII	I Check here if the ex	nlanation h	as bee	n provided in F	art X	III		Γ
Par	t V Endowment Funds. Complete		-						
			(b) Prior year		c) Two years back			(e) Four ye	ears back
1a	Beginning of year balance	67,800	42,	300	42,800		42,800		42,800
b	Contributions		25,	000					
C	Net investment earnings, gains, and losses	540		64	102	:	519		529
d	Grants or scholarships								
e	Other expenditures for facilities and programs	540		64	102	:	519		529
f	Administrative expenses								
g	End of year balance	67,800		300	42,800		42,800		42,800
2	Provide the estimated percentage of the curi	ent year end balance (line 1g, col	umn (a	i)) held as				
а	Board designated or quasi-endowment 🕨								
b	Permanent endowment ► 100 000 %								
c	Temporarily restricted endowment ► The percentages in lines 2a, 2b, and 2c show	ıld equal 100%							
_	Are there endowment funds not in the posses	ssion of the organization				l for t	he		
3a	•	ston of the organization	on that are r	ieid an	a administered				
3a	organization by	sololi or the organization	on that are r	ieid an	a administered			Yes	No
3a	organization by (i) unrelated organizations		on that are r	ield an	a administered	•	3a(i)	No
	organization by (i) unrelated organizations (ii) related organizations)	
	organization by (i) unrelated organizations		 n Schedule	 R? .			3a(i)	No
b	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 of	ns listed as required or e organization's endov	n Schedule vment funds	 R? .			3a(i 3a(ii 3b)	No No
b 4	organization by (i) unrelated organizations	ns listed as required or e organization's endov	n Schedule vment funds	R? .	nswered 'Yes	to f	3a(i 3a(ii 3b	t IV, lii	No No
b 4 Part	organization by (i) unrelated organizations	ns listed as required or e organization's endov	n Schedule vment funds organizat	R? .	nswered 'Yes ir (b)Cost or ot basis (othe	to f	3a(ii 3b Form 990, Par	t IV, lii	No No ne
b 4 Pari	organization by (i) unrelated organizations	ns listed as required or e organization's endov	n Schedule vment funds organizat	R? .	nswered 'Yes ir (b)Cost or ot basis (othe	to Fher r)	3a(ii 3b Form 990, Par	t IV, lu	No No ne ok value
b 4 Part	organization by (i) unrelated organizations	ns listed as required or e organization's endov	n Schedule vment funds organizat	R? .	nswered 'Yes (b)Cost or ot basis (othe	to Fher r)	3a(ii 3b Form 990, Par (c) Accumulated depreciation	t IV, lu	No No No ne bk value
b 4 Pari	organization by (i) unrelated organizations	ns listed as required or e organization's endov	n Schedule vment funds organizat	R? .	(b)Cost or ot basis (othe	to Fher r) ,000 ,285 ,546	3a(ii) 3a(iii) 3b Form 990, Par (c) Accumulated depreciation	t IV, lii	No No ne 12,000 9,613,551
b 4 Part 1a L b E c L d E	organization by (i) unrelated organizations	ns listed as required or e organization's endov	n Schedule vment funds organizat	R? .	(b)Cost or ot basis (othe 12,901, 1,782, 2,316	to Fher r) ,000 ,285 ,546	3a(ii) 3a(ii) 3b Form 990, Par (c) Accumulated depreciation 3,287,734 910,905	t IV, lii	No No No ne bk value 12,000 9,613,551 871,641

See Form 990, Part X, line 12. (a) Description of security or category	(b)Book value	(c) Method of valuation
(including name of security)	(2)2001. Turus	Cost or end-of-year market value
(1) Financial derivatives		
(2)Closely-held equity interests Other		
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	F	
Part VIII Investments—Program Related. C	omplete ıf the organızatı	ion answered 'Yes' to Form 990, Part IV, line 11c.
See Form 990, Part X, line 13. (a) Description of investment	(b) Book value	(c) Method of valuation
(a) Description of investment	(b) Book value	Cost or end-of-year market value
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)	+	
Part IX Other Assets. Complete if the organization		
(a) Descr	ription	(b) Book value
Total. (Column (b) must equal Form 990, Part X, col.(B) line 1		
Part X Other Liabilities. Complete if the organization of the organization of the property	anization answered 'Yes'	to Form 990, Part IV, line 11e or 11f. See
1 (a) Description of liability	(b) Book value	
Federal income taxes		
		-
	1	4
	+	-
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	<u> </u>	†
Total (Column (b) mast equal form 330, fart A, coll b) mic 23 /		

Par		Revenue per Audited Financial Statements With Revenue p wered 'Yes' to Form 990, Part IV, line 12a.	er R	eturn Complete If
1		er support per audited financial statements	1	10,195,622
2	A mounts included on line 1 b	ut not on Form 990, Part VIII, line 12		
а	Net unrealized gains on inves	tments		
ь	Donated services and use of	facilities		
c	Recoveries of prior year gran	ts		
d) 2d		
e	Add lines 2a through 2d	· 	2e	278,541
3	Subtract line 2e from line 1		3	9,917,081
4		90, Part VIII, line 12, but not on line 1		, ,
а		luded on Form 990, Part VIII, line 7b . 4a		
b) 4b 1,336,426		
c	•		4c	1,336,426
5		d 4c. (This must equal Form 990, Part I, line 12)	5	11,253,507
		Expenses per Audited Financial Statements With Expenses		<u> </u>
		nswered 'Yes' to Form 990, Part IV, line 12a.	. р о.	
1	Total expenses and losses pe	er audited financial statements	1	8,469,541
2	Amounts included on line 1 b	ut not on Form 990, Part IX, line 25		
а	Donated services and use of	facilities		
b	Prior year adjustments			
c	Other losses			
d	Other (Describe in Part XIII)		
e	Add lines 2a through 2d .	· · · · · · · · · · · · · · · · · · ·	2e	0
3	Subtract line 2e from line 1		3	8,469,541
4	Amounts included on Form 99	90, Part IX, line 25, but not on line 1:		
а		luded on Form 990, Part VIII, line 7b 4a		
b) 4b 1,336,426	1	
c	·	· · · · · · · · · · · · · · · · · · ·	4c	1,336,426
5		and 4c. (This must equal Form 990, Part I, line 18)	5	9,805,967
	XIII Supplemental In			3,000,000
Prov Part	ride the descriptions required fo	r Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b I, lines 2d and 4b, and Part XII, lines 2d and 4b Also complete this part to		de any additional
	Return Reference	Explanation		
	XI, LINE 4B - OTHER STMENTS	FINANCIAL AID AWARDS 1,404,336 DIRECT FUNDRAISING EXPEN	SE -6	7,910
	XII, LINE 4B - OTHER STMENTS	FINANCIAL AID AWARDS 1,404,336 DIRECT FUNDRAISING EXPEN	SE -6	7,910
PART	X, LINE 2	THE SCHOOL ACCOUNTS FOR THE EFFECT OF ANY UNCERTAIN TA "MORE LIKELY THAN NOT" THRESHOLD TO THE RECOGNITION OF BEING SUSTAINED BASED ON THE TECHNICAL MERITS OF THE POBY THE APPLICABLE TAXING AUTHORITY IF A TAX POSITION OR FOR RESULT IN UNCERTAINTIES OF THOSE POSITIONS, THE UNRECE IS ESTIMATED BASED ON A "CUMULATIVE PROBABILITY ASSESSME THE ESTIMATED TAX LIABILITY FOR ALL UNCERTAIN TAX POSITION IDENTIFIED ITS TAX STATUS AS A TAX EXEMPT ENTITY AS A TAX THE SCHOOL HAS DETERMINED THAT SUCH TAX POSITION DOES UNCERTAINTY REQUIRING RECOGNITION THE SCHOOL IS NOT CEXAMINATION BY ANY TAXING JURISDICTION THE SCHOOL'S FEE RETURNS ARE GENERALLY OPEN FOR EXAMINATION FOR THREE YED DATE FILED	THE TO SITION OF THE TO SITION OF THE TO SITE THE TO S	TAX POSITIONS ON UNDER SCRUTINY FIONS ARE DEEMED IZED TAX BENEFIT THAT AGGREGATES FHE SCHOOL HAS TION, HOWEVER, RESULT IN AN NTLY UNDER L AND STATE TAX

•	<u> </u>	
Part XIII	Supplemental Info	ormation (continued)
Ret	turn Reference	Explanation

Schedule D (Form 990) 2013

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As Filed Data -

DLN: 93493058006115

OMB No 1545-0047

2042

Schools

SCHEDULE E (Form 990 or 990-EZ)

> ►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.

Open to Public Inspection

Department of the Treasury Internal Revenue Service ► Information about Schedule E (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Name of the organization **Employer identification number** THE CHESTNUT HILL SCHOOL 04-2178868 Part I YES NO Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body? Yes Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships? Yes Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe If "No," please explain If you need more space use Part II Yes Does the organization maintain the following? a Records indicating the racial composition of the student body, faculty, and administrative staff? Yes 4a b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory 4b Yes c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships? 4c Yes 4d d Copies of all material used by the organization or on its behalf to solicit contributions? Yes If you answered "No" to any of the above, please explain If you need more space, use Part II 5 Does the organization discriminate by race in any way with respect to a Students' rights or privileges? 5a Νo **b** Admissions policies? 5b Νo c Employment of faculty or administrative staff? 5c Νo d Scholarships or other financial assistance? 5d Νo e Educational policies? 5e Νo f Use of facilities? 5f Νo g Athletic programs? 5g Νo h Other extracurricular activities? 5h Νo If you answered "Yes" to any of the above, please explain If you need more space, use Part II Νo 6a Does the organization receive any financial aid or assistance from a governmental agency? 6a b Has the organization's right to such aid ever been revoked or suspended? 6b Νo If you answered "Yes" to either line 6a or line 6b, explain on Part II 7 Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05 of Rev Proc 75-50, 1975-2 C B 587, covering racial nondiscrimination? If "No," explain on Part II

Part II Supplemental Information. 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)

Return Reference	Explanation
SCHEDULE E, PART I, LINE 3	ON AN ANNUAL BASIS THE CHESTNUT HILL SCHOOL PARTICIPATES IN A GROUP ADVERTISEMENT IN THE BOSTON GLOBE REAFFIRMING THEIR POLICY OF NON-DISCRIMINATORY ADMISSION OF STUDENTS

Schedule E (Form 990 or 990-EZ) 2013

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DLN: 93493058006115

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

(Form 990 or 990-EZ)

SCHEDULE G

Fundraising or Gaming Activities Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the

organization entered more than \$15,000 on Form 990-EZ, line 6a. Attach to Form 990 or Form 990-EZ.

Supplemental Information Regarding

Information about Schedule G (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

Name of the organization						Employer iden	tification number	
THE CHESTNUT HILL SCHOOL						04-2178868		
Part I Fundraising Activiti Form 990-EZ filers are					to Form	990, Part IV	, line 17.	
1 Indicate whether the organization	n raised funds t	hrough ar	ny of the f	ollowing activities Che	eck all tha	nt apply		
a Mail solicitations	e							
b Internet and email solicitati	ons		f	Solicitation of gov				
c Phone solicitations			g	Special fundraisin		_		
d				·	_			
2a Did the organization have a writt or key employees listed in Form							Г _{Yes} Г _{No}	
b If "Yes," list the ten highest pair to be compensated at least \$5,0			undraisei	rs) pursuant to agreem	ents unde	r which the fui	ndraiser is	
(i) Name and address of ındıvıdual or entity (fundraiser)	(ii) Activity	fundrais custo cont	Did ser have ody or rol of utions?	(iv) Gross receipts from activity	(or re fundraı	ount paid to tained by) ser listed in ol (i)	(vi) A mount paid to (or retained by) organization	
1		Yes	No					
1								
2								
3								
4								
5								
6								
7								
8								
9								
10								
			▶					
3 List all states in which the organ registration or licensing	nization is regist	ered or lu	censed to	solicit contributions o	I r has bee	n notified it is	l exempt from	

Part II Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or report more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. Lis events with gross receipts greater than \$5,000.								
		-	(a) Event #1 SPRING FLING (event type)	(b) Event #2 CARNIVAL (event type)	(c) O ther events 3 (total number)	(d) Total events (add col (a) through col (c))		
₽	1	Gross receipts	204,346	4,613	23,943	232,902		
Revenue	2	Less Contributions	1,650			1,650		
- <u>~</u>	3	Gross income (line 1 minus line 2)	202,696		23,943	231,252		
	4	Cash prizes						
£O.	5	Noncash prizes						
Expenses	6	Rent/facility costs						
<u>8</u>	7	Food and beverages .						
Direct	8	Entertainment						
占	9	Other direct expenses .	45,097	10,079	12,733	67,909		
	10	Direct expense summary Add lin	es 4 through 9 in column	(d)		(67,909)		
	11	Net income summary Subtract li	ne 10 from line 3, columr	ı (d)	•	163,343		
Par	t II	Gaming. Complete if the or \$15,000 on Form 990-EZ, lii		"Yes" to Form 990, Pa	rt IV, line 19, or repo	L		
Revenue			(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))		
	1	Gross revenue						
Ses	2	Cash prizes						
Expenses	3	Non-cash prizes						
	4	Rent/facility costs						
Direct	5	Other direct expenses						
	6	Volunteer labor	✓ Yes	✓ Yes	│ Yes			
	7	Direct expense summary Add lines	s 2 through 5 ın column (d)	•			
	8	Net gaming income summary Subt	ract line 7 from line 1, co	olumn (d)	<u> </u>			
9		er the state(s) in which the organiza						
a b		the organization licensed to operate						
10a b		re any of the organization's gaming Yes," explain	licenses revoked, susper	nded or terminated during				

						1:
Does	s the organization operate gaming activi	ties with nonmember	rs?		T Yes T No	
12	Is the organization a grantor, beneficia					
	formed to administer charitable gaming	g [,]			· Fyes [– No
13	Indicate the percentage of gaming act	ıvıty operated ın				
а	The organization's facility					%
b	An outside facility			13b		%
14	Enter the name and address of the per	son who prepares the	e organization's gaming/special e	vents books and reco	ords	
	Name ▶					
	Address 🟲					
15a b	Does the organization have a contract revenue?	evenue received by t	the organization 🟲 \$		· · 「Yes「	_ No
	amount of gaming revenue retained by	the third party 🟲 \$ _				
C	If "Yes," enter name and address of th	e thırd party				
	Name ▶					
	Address ►					
16	Gaming manager information					
	Name 🕨					
	Gaming manager compensation ► \$					
	Description of services provided					
	Director/officer	T Employee	☐ Independent cor	ntractor		
17	Mandatory distributions					
а	Is the organization required under stat	e law to make charit	able distributions from the gaming	g proceeds to		
	retain the state gaming license?				┌ Yes 「	— No
b	Enter the amount of distributions requi	red under state law (distributed to other exempt organi	ızatıons or spent		
	ın the organızatıon's own exempt actıv	ities during the tax y	∕ear ⊳ \$			
Pai		5b, 15c, 16, and 1	xplanations required by Part I 7b, as applicable. Also compl			and
	Return Reference		Explanat	ıon		
		<u> </u>	<u> </u>		rm 990 or 990-	7) 2012

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DLN: 93493058006115

OMB No 1545-0047

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

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

Open to Public **Inspection**

Department of the Treasury Internal Revenue Service Name of the organization

Schedule I

(Form 990)

▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.

Employer identification number

THE CHESTNUT HILL SCHOOL	04-2178868	04-2178868					
Part I General Information	on on Grants and	l Assistance					
 Does the organization maintain the selection criteria used to a Describe in Part IV the organization 	ward the grants or as	sıstance [?]					√Yes
Part II Grants and Other A Form 990, Part IV, lin							es" to
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grar or assistance
2 Enter total number of section 5							
3 Enter total number of other orga						. <u>-</u>	
	- Al T A Al	F 000		C-+ N- FOOFFD		C - L - J	- T /F 000\ 2012

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) FINANCIAL AID BASED ON DEMONSTRATED FINANCIAL NEED	54			FAIR MARKET VALUE OF PUBLISHED TUITION RATES	TUITION ASSISTANCE AWARDS

Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.

Return Reference	Explanation
SCHEDULE I, PART I, LINE 2	THE CHESTNUT HILL SCHOOL OFFERS FINANCIAL AID OR SCHOLARSHIP ASSISTANCE IN RELATION TO FINANCIAL NEED, INFORMATION
	ABOUT FAMILY CIRCUMSTANCES, AND THE AVAILABILITY OF SCHOOL FUNDS THE SCHOOL USES AN INDEPENDENT SERVICE
	ORGANIZATION TO DEVELOP AN OBJECTIVE MEASURE OF A FAMILY'S ABILITY TO CONTRIBUTE TO THE COST OF INDEPENDENT SCHOOL
	EDUCATION RESPONSIBILITY FOR ALL FINANCIAL AID AWARDS RESTS SOLELY WITH THE SCHOOL

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DLN: 93493058006115

OMB No 1545-0047

Open to Public

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

▶ Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990.

Inspection Employer identification number

Name of the organization THE CHESTNUT HILL SCHOOL					ployer identification number					
			04-2178868							
Pa	rt I Questions Regarding Compensation	n								
					Yes	No				
1a	Check the appropriate box(es) if the organization pro 990, Part VII, Section A, line 1a Complete Part III									
	First-class or charter travel	Г	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 or reimbursement or provision of all of the expenses de			1b						
2	Did the organization require substantiation prior to r directors, trustees, officers, including the CEO/Exec			2						
3	Indicate which, if any, of the following the filing organorganization's CEO/Executive Director Check all thused by a related organization to establish compens	nat appl	·							
	✓ Compensation committee	굣	Written employment contract							
	Independent compensation consultant	Г	Compensation survey or study							
	Form 990 of other organizations	<u>~</u>	Approval by the board or compensation committee							
4	During the year, did any person listed in Form 990, lor a related organization	Part VII	I, Section A, line $1 extstyle{a}$ with respect to the filing organization	ation						
а	Receive a severance payment or change-of-control	paymer	nt?	4a		Νo				
b	Participate in, or receive payment from, a supplement	ntal non	qualified retirement plan?	4b		Νo				
C	Participate in, or receive payment from, an equity-ba	ased co	mpensation arrangement?	4c		Νo				
	If "Yes" to any of lines 4a-c, list the persons and pr	ovide th	ne applicable amounts for each item in Part III							
	Only 501(c)(3) and 501(c)(4) organizations only mu	ıst com	plete lines 5-9.							
5	For persons listed in Form 990, Part VII, Section A, compensation contingent on the revenues of	, lıne 1a	, did the organization pay or accrue any							
а	The organization?			5a		No				
b	Any related organization?			5b		Νo				
	If "Yes," to line 5a or 5b, describe in Part III									
6	For persons listed in Form 990, Part VII, Section A compensation contingent on the net earnings of	, line 1a	, did the organization pay or accrue any							
а	The organization?			6a		No				
ь	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, payments not described in lines 5 and 6? If "Yes," of			7		No				
8	Were any amounts reported in Form 990, Part VII, psubject to the initial contract exception described in									
	ın Part III			8		No				
9	If "Yes" to line 8, did the organization also follow the section 53 4958-6(c)?	e rebutt	able presumption procedure described in Regulations	9						

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

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

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

I								
(A) Name and Title		(B) Breakdown of (i) Base compensation	W-2 and/or 1099-MIS (ii) Bonus & Incentive compensation	C compensation (iii) Other reportable compensation	(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(ı)-(D)	(F) Compensation reported as deferred in prior Form 990
(1)DR STEVEN TOBOLSKY HEAD OF SCHOOL	(i) (ii)	220,831 0	0	0 0	0	24,250 0	245,081 0	0

Schedule J (Form 990) 2013

Part III Supplemental Information

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

Return Reference Explanation

Schedule J (Form 990) 2013

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

DLN: 93493058006115

OMB No 1545-0047

Open to Public **Inspection**

Supplemental Information on Tax Exempt Bonds

► Complete if the organization answered "Yes" to Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Part VI.

► Attach to Form 990. ► See separate instructions.

▶Information about Schedule K (Form 990) and its instructions is at www.irs.gov/form990.

Department of the Treasury Internal Revenue Service

(Form 990)

	ne of the organization									Em	ployer id	lentifica	ation nur	nber			
IHE	E CHESTNUT HILL SCHOOL									04	-21788	68					
P	art I Bond Issues	_	T	1	.												
	(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue	price	(f	f) Description of purpose		(f) Description of purpose		(g) De	feased	beh			Pool ncing
										Yes	No	Yes	No	Yes	No		
A	MASS DEVELOPMENT FINANCE AGENCY	04-3431814		08-01-2011	9,1	55,000		UND PRIOR E REVENUE	VARIABLE BOND ISSUE		х		×		x		
Pa	Proceeds														1		
						4		В	,		С			D			
_1	A mount of bonds retired					9,045,	,000										
	A mount of bonds legally defeas	sed ————————————————————————————————————															
_3	Total proceeds of issue					110,	,000										
4	Gross proceeds in reserve fund																
_5																	
6																	
7						110,	,000										
8	Credit enhancement from proce																
9	Working capital expenditures fi	<u> </u>															
10	Capital expenditures from proc	eeds															
11	Other spent proceeds																
12	Other unspent proceeds																
13	Year of substantial completion											_					
					Yes	No	,	Yes	No	Yes	N	lo	Yes		No		
14	Were the bonds issued as part	of a current refundin	ıg ıssue?		Х												
15	Were the bonds issued as part	of an advance refund	ding issue?			Х											
16	Has the final allocation of proc	eeds been made?			Х												
17	allocation of proceeds?				Х												
Pa	rt IIII Private Business U	se							<u> </u>								
						A B		Yes No			D No.						
1	Was the organization a partner property financed by tax-exem		a member of an LL	C, which owned	Yes	No X		Yes	No	Yes		10	Yes		No		

financed property?

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

Χ

chedule i	((101111)	, 2013		
art III	Private	Business	Use	(Continued

			A		В		С	D	
		Yes	No	Yes	No	Yes	No	Yes	No
3a	Are there any management or service contracts that may result in private business use of bond-financed property?		Х						
b	If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts relating to the financed property?								
С	Are there any research agreements that may result in private business use of bond-financed property?		Х						
d	If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside counsel to review any research agreements relating to the financed property?								
4	Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government								
5	Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government								
6	Total of lines 4 and 5								
7	Does the bond issue meet the private security or payment test?		Х						
8a	Has there been a sale or disposition of any of the bond financed property to a nongovernmental person other than a 501(c)(3) organization since the bonds were issued?		х						
ь	If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of		•		•		•		
С	If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1 141-12 and 1 145-2?								
9	Has the organization established written procedures to ensure that all nonqualified bonds of the issue are remediated in accordance with the requirements under Regulations sections 1 141-12 and 1 145-2?		Х						
Pai	rt IV Arbitrage								
				В		_		_	

		Α		В		С		D	
		Yes	No	Yes	No	Yes	No	Yes	No
1	Has the issuer filed Form 8038-T?		Х						
2	If "No" to line 1, did the following apply?								
а	Rebate not due yet?		Х						
b	Exception to rebate?		Х						
С	No rebate due?		Х						
	If you checked "No rebate due" in line 2c, provide in Part VI the date the rebate computation was performed								
3	Is the bond issue a variable rate issue?		X						
4a	Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue?		x						
b	Name of provider								
С	Term of hedge								
d	Was the hedge superintegrated?								
е	Was the hedge terminated?								
							Sc	hedule K (Forn	n 990) 2013

Part IV Arbitrage (Continued)

Return Reference

	<u> </u>	Α		В		С		D	
		Yes	No	Yes	No	Yes	No	Yes	No
5a	Were gross proceeds invested in a guaranteed investment contract (GIC)?		×						
b	Name of provider								
С	Term of GIC								
d	Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?								
6	Were any gross proceeds invested beyond an available temporary period?		Х						
7	Has the organization established written procedures to monitor the requirements of section 148?		х						
Pa	rt V Procedures To Undertake Corrective Action								
		А		В		С		D	
		Yes	No	Yes	No	Yes	No	Yes	No
	Has the organization established written procedures to ensure that violations of federal tax requirements are timely identified and corrected through the voluntary closing agreement program if self-remediation is not available under applicable regulations?		Х						
Pa		nation for res	ponses to au	lestions on S	chedule K (s	ee instructio	ns).		

Explanation

Schedule K (Form 990) 2013

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DLN: 93493058006115

Employer identification number

OMB No 1545-0047

Schedule L (Form 990 or 990-EZ)

► 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.

Transactions with Interested Persons

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

► Attach to Form 990 or Form 990-EZ. ► See separate instructions. ▶Information about Schedule L (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

HE CHESINOI HI	ILL SCHOOL								04-21	78868					
) and section						4.0.5			
	e of disqual				on Form 990 hip between	O, Part IV, line		escription				(d) Cor	rected		
1 (a) Nam	e or arsquar	illed per	13011		n and organiz		(0)	escription	or tra	iisactioi	'				
													No		
													-		
													_		
											-		-		
													-		
													-		
2 Enterthe	mount of ta	v incur	red by ord	nanization n	nanagers or g	disqualified per	sone duru	ng the yea	runde	rsection			-		
			• •	• • •			• • •	ig the yea		F \$					
3 Enterthe a	amount of ta	x, if any	y, on line	2, above, re	eimbursed by	the organization	on			▶ \$					
					d Persons		l 20-	5	. O O D	T. / I.		6 &			
						90-EZ, Part V line 5, 6, or 22	, line 38a,	, or Form 9	90, Pa	art IV, II	ne 26,	orittine			
		(c)	(d) Loan t		(e)Original	(f)Balan	ce (g) In		(h)		(i)Written				
interested	Relations	hip Pu	urpose of			principal	due	defaul	default? App		'ed	agreement			
person	with organizat	ion	loan	organızatıo	n r	amount				by board	l '				
										or					
					Γ_	1			T	commi		+	T		
				То	From			Yes	No	Yes	No	Yes	No		
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tal			<u>► \$</u>												
						d Persons. Form 990, Pa	rt IV lin	ne 27							
(a) Name of ir				ıp between		nt of assistance		ype of ass	istanc	e (e) Purpo	se of as:	sıstanc		
perso			sted pers	on and the	` ′		` ´	, i		`	,				
`			organiza	ition		20.61	NEEDE	A CED EI	LANGI						
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Part IV Business Transactions II	nvolving Interested	i Persons.				
Complete if the organization	<u>n answered "Yes" on F</u>	<u>Form 990, Part IV, lın</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) Sharing of organization revenues?		
				Yes	No	

Part V Supplemental Information

Provide additional information for responses to questions on Schedule L (see instructions)

Schedule L (Form 990 or 990-EZ) 2013

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DLN: 93493058006115

OMB No 1545-0047

SCHEDULE M (Form 990)

Noncash Contributions

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

Open to Public

Department of the Treasury Internal Revenue Service

▶Information about Schedule M (Form 990) and its instructions is at www.irs.gov/form990. Name of the organization

Inspection Employer identification number

HE (CHESTNUT HILL SCHOOL				4-2178868			
Pa	rt I Types of Property			1.	1 21/0000			
		(a) Check If applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g				ınts
1	Art—Works of art							
2	Art—Historical treasures .							
3	Art—Fractional interests							
4	Books and publications							
5	Clothing and household							
	goods							
	Cars and other vehicles							
	Boats and planes							
	Intellectual property							
	Securities—Publicly traded .	X	10	217,48	0 MARKET VALUE	OFS	CURI	TY
	Securities—Closely held stock .							
	Securities—Partnership, LLC, or trust interests							
	Securities—Miscellaneous							
L3	Qualified conservation contribution—Historic structures							
L4	Qualified conservation contribution—Other							
L 5	Real estate—Residential .							
L6	Real estate—Commercial							
.7	Real estate—O ther							
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies .							
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts							
25	Other ► (Х	1	95	O FAIR MARKET V	ALUE		
	GNIFYING GL)	_						
	Other► (WORK)	_ X	1	45	0 FAIR MARKET V	ALUE		
27	O ther ▶()							
	O ther ► ()							
29	Number of Forms 8283 received by the for which the organization completed I				29		I I	
30a	During the year, did the organization	receive by	contribution any property r	reported in Part I, lines	1 through 28, that		Yes	No
	ıt must hold for at least three years f	rom the date	e of the initial contribution	, and which is not requir	ed to be used			
	for exempt purposes for the entire ho	ldıng period	17			30a		Νo
	If "Yes," describe the arrangement in							
31	Does the organization have a gift acc	eptance po	licy that requires the revie	w of any non-standard o	ontributions?	31	Yes	
32a	Does the organization hire or use this contributions?	•	related organizations to s	olicit, process, or sell n	oncash • • •	32a	Yes	
h	If "Yes," describe in Part II							
	If the organization did not report an a	imount in co	olumn (c) for a type of prop	erty for which column (a) is checked,			

describe in Part II

	hether the organization is reporting in Part I, column (b), the number of contributions, the ceived, or a combination of both. Also complete this part for any additional information.
Return Reference	Explanation
•	THE SCHOOL USES AN INVESTMENT COMPANY, UBS FINANCIAL SERVICES, INC , TO PROCESS AND SELL STOCK GIFTS

Schedule M (Form 990) (2013)

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DLN: 93493058006115

2013

OMB No 1545-0047

SCHEDULE 0 (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

Name of the organization THE CHESTNUT HILL SCHOOL

Employer identification number

04-2178868

990 Schedule O, Supplemental Information

LINE 11	A COPY OF THE FORM 990 WAS PRESENTED TO THE EXECUTIVE COMMITTEE OF THE GOVERNING BODY BEFORE THE RETURN WAS FILED
FORM 990, PART VI, SECTION B,	
	ANNUALLY, THE EXECUTIVE COMMITTEE DISTRIBUTES CONFLICT OF INTEREST STATEMENTS FOR ALL BOAR D MEMBERS TO FILL OUT THE SECRETARY COLLECTS THE STATEMENTS AND REVIEWS ALL DISCLOSURES THE CONFLICT OF INTEREST STATEMENT STATES THAT BOARD MEMBERS HAVE AN ONGOING RESPONSIBILIT Y TO DISCLOSE ANY CONFLICTS OR SUSPECTED CONFLICTS WITH THE PRESIDENT OF THE BOARD
LINE 15A	THE BOARD REVIEWS SALARY AND BENEFIT INFORMATION PROVIDED THROUGH NAIS STATS ON-LINE AND D ETERMINES AN APPROPRIATE SALARY (BASED ON THE CHESTNUT HILL SCHOOL'S BUDGET) FOR THE HEAD OF SCHOOL THE HEAD OF SCHOOL DETERMINES ALL OTHER FACULTY/STAFF COMPENSATION THESE ARE A LL DETERMINED IN THE SAME MANNER AS THAT USED FOR THE HEAD OF SCHOOL
LINE 18	THE ORGANIZATION'S TAX FILINGS ARE AVAILABLE ONLINE FOR VIEWING AT WWW GUIDESTAR ORG, A WE BSITE USED TO RATE NON-PROFITS FOR POTENTIAL DONORS THE TAX FILINGS ARE ALSO AVAILABLE AT THE MASSACHUSETTS ATTORNEY GENERAL'S DIVISION FOR PUBLIC CHARITIES WEBSITE AND AT THE SCH OOL
LINE 19	THE ORGANIZATION'S FINANCIAL STATEMENTS ARE AVAILABLE ONLINE FOR VIEWING AT THE MASSACHUSE TTS ATTORNEY GENERAL'S DIVISION FOR PUBLIC CHARITIES WEBSITE THE SCHOOL'S GOVERNING DOCUM ENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS ARE ALSO AVAILABLE UPON REQUEST AT THE SCHOOL'S CHESTNUT HILL MASSACHUSETTS CAMPUS
PART XII, LINE 2C	NO CHANGE IN PROCESS FROM THE PRIOR YEAR

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -DLN: 93493058006115 OMB No 1545-0172 **Depreciation and Amortization** (Including Information on Listed Property) Department of the Treasury Internal Revenue Service (99) See separate instructions. ► Attach to your tax return. Sequence No 179 Business or activity to which this form relates **Identifying number** FORM 990 PAGE 10 Name(s) shown on return THE CHESTNUT HILL SCHOOL 04-2178868 **Election To Expense Certain Property Under Section 179** Part I Note: If you have any listed property, complete Part V before you complete Part I. 500,000 1 Total cost of section 179 property placed in service (see instructions) • • • • • • 2 3 Threshold cost of section 179 property before reduction in limitation (see instructions) 2,000,000 4 Reduction in limitation Subtract line 3 from line 2 If zero or less, enter -0- · · · · · · Dollar limitation for tax year Subtract line 4 from line 1 If zero or less, enter -0- If married 5 (b) Cost (business use 6 (a) Description of property (c) Elected cost only) 7 Listed property Enter the amount from line 29 Total elected cost of section 179 property Add amounts in column (c), lines 6 and 7 8 Tentative deduction Enter the smaller of line 5 or line 8 · · · · · · · · 9 Carryover of disallowed deduction from line 13 of your 2012 Form 4562 10 11 Business income limitation Enter the smaller of business income (not less than zero) or line 5 (see 11 12 Section 179 expense deduction Add lines 9 and 10, but do not enter more than line 11 13 Carryover of disallowed deduction to 2014 Add lines 9 and 10, less line 12 . | 13 Note: Do not use Part II or Part III below for listed property. Instead, use Part V. Special Depreciation Allowance and Other Depreciation (Do not include listed property) (See instructions) Special depreciation allowance for qualified property (other than listed property) placed in service during 14 Property subject to section 168(f)(1) election 15 472,383 MACRS Depreciation (Do not include listed property.) (See instructions.) MACRS deductions for assets placed in service in tax years beginning before 2013 · · · · · · If you are electing to group any assets placed in service during the tax year into one or more general Section B—Assets Placed in Service During 2013 Tax Year Using the General Depreciation System (c) Basis for (b) Month and depreciation (a) Classification of (d) Recovery (g)Depreciation year placed in (business/investment (e) Convention (f) Method deduction period property service only—see instructions) 19a 3-year property **b** 5-year property c 7-year property d 10-year property e 15-year property f 20-year property S/L g 25-year property 25 yrs 27 5 yrs MM S/L h Residential rental property 27 5 yrs ΜМ S/L ΜМ i Nonresidential real 39 yrs property ΜМ Section C—Assets Placed in Service During 2013 Tax Year Using the Alternative Depreciation System 20a Class life S/L **b** 12-year 12 yrs S/L **c** 40-year MMS/L 40 yrs Summary (see instructions.) Part IV 21 22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21 Enter 472,383 here and on the appropriate lines of your return Partnerships and S corporations—see instructions • • 22 23 For assets shown above and placed in service during the current year, enter the 23 portion of the basis attributable to section 263A costs

Part V

Listed Property (Include automobiles, certain other vehicles, certain computers, and property used for entertainment, recreation, or amusement.)

Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete **only** 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.

Section A—Depre	ciation a	nd Other I	nforma	tion (C	aution	: See i	the i	nstruct	ions f	or lim	its f	or pa	sseng	er au	tomob	iles.)
24a Do you have evidend	ce to support t	he business/inv	estment us	se claimed	っ ┌ Yes	Γ _{No}		24	lb If "Ye	es," is th	ne ev	dence	written?	Г _{Ye}	Г№)
(a) Type of property (list vehicles first)	(b) Date placed in service	(c) Business/ investment use percentage	(c Cost o ba	other	(busines	(e) deprecia ss/investr e only)		(f) Recovery period	· (1		(h) Depreciation/ deduction				(i) Elected section 179 cost	
25 Special depreciation allo 50% in a qualified busi			erty placed	in service (during the	tax year	and u	ised more	than	25						
26 Property used more	e than 50%	ın a qualıfıed	business	use	_											
		%									_					
		%														
27 Property used 50%	or less in a	qualified bus	iness us	е												
		% %							S/L - S/L -					4		
		%							S/L -		H					
28 Add amounts in co	olumn (h), lır	nes 25 throug	jh 27 En	ter here a	and on lu	ne 21, _l	page	1	28							
29 Add amounts in co	olumn (ı), lın	e 26 Enterh	ere and o	n line 7,	page 1			–					29			
			ction B													
Complete this section If you provided vehicles to														se vehic	les	
					a)	T	b)		(c)		(c			e)		f)
30 Total business/investment miles driven during the year (do not include commuting miles)			Vehi	cle 1	Vehi	cle 2	V e				ehicle 4 Vehic					
31 Total commuting r	miles driven	during the ye	ear .													
32 Total other persor	nal(noncomm	nuting) miles	drıven													
33 Total miles driven through 32 .	during the y	ear Add line	s 30													
34 Was the vehicle av	vailable for p	ersonal use		Yes	No	Yes	No	Yes	No	, Y	es	No	Yes	No	Yes	No
during off-duty ho	urs? .															
35 Was the vehicle us		by a more tl	nan 5%													
owner or related p									_	+						₩
36 Is another vehicle		<u> </u>		10/	1	• • • •	7 - 1 - 1					<u> </u>	<u> </u>			
Answer these question 5% owners or related	ns to determ		et an exc												not mo	re thai
37 Do you maintain a employees?	written polic			nibits all	personal	use of	vehi	cles, inc	luding	comm	nutın	g, by	our .	Y	es	No
,																
38 Do you maintain a employees? See the												your •				
39 Do you treat all us	e of vehicles	s by employe	es as per	sonal us	e?											
40 Do you provide movehicles, and retain				oyees, ol	btaın ınfo	ormatio	n froi	m your e	mploy	ees al	out	the us	e of			
41 Do you meet the re	equirements	concerning	qualified a	automobi	le demor	nstratio	n us	e? (See	ınstru	ctions) .					
Note: If your answ	<i>r</i> er to 37, 38	. 39, 40, or 4	1	s." do not	t comple	te Sect	ion E	for the	covere	ed veh	ıcles	5				
	rtization	· · ·		•	· ·											
(a) Description of c		(b) Date amortizatio begins	n	(c A mort a mo	ızable			Code pe		(e) A mortization period or percentage		A mort			(f) ization for is year	
42 A mortization of co	sts that bed		ur 2013	tax vear	(see ins	truction	ns)		1 50		<u> </u>					
				, , ,	<u>, </u>	1	- /		1							
43 A mortization of co	sts that beg	an before you	ur 2013 t	ax year						. 4	13					
44 Total. Add amount	ts ın column	(f) See the i	nstructio	ns for wh	ere to re	port				. 4	14					