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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 *www.IRS.gov/form990*

OMB No 1545-0047

2013

Open to Public Inspection

A For the 2013 calendar year, or tax year beginning 07-01-2013 , 2013, and ending 06-30-2014

B Check if applicable
☐ Address change
☐ Name change
☐ Initial return
☐ Terminated
☐ Amended return
☐ Application pending

C Name of organization
BRUNSWICK SCHOOL INC

Doing Business As

Number and street (or P O box if mail is not delivered to street address) | Room/suite
100 MAHER AVENUE

City or town, state or province, country, and ZIP or foreign postal code
GREENWICH, CT 068305618

D Employer identification number
06-0646562

E Telephone number
(203) 625-5815

G Gross receipts $ 91,194,229

F Name and address of principal officer
KATHLEEN HARRINGTON
100 MAHER AVENUE
GREENWICH,CT 068305618

H(a) Is this a group return for subordinates? ☐ Yes ☑ No

H(b) Are all subordinates included? ☐ Yes ☐ No
If "No," attach a list (see instructions)

H(c) Group exemption number ▶

I Tax-exempt status ☑ 501(c)(3) ☐ 501(c) ( ) ◀ (insert no) ☐ 4947(a)(1) or ☐ 527

J **Website: ▶** WWW BRUNSWICKSCHOOL ORG

K Form of organization ☑ Corporation ☐ Trust ☐ Association ☐ Other ▶ | L Year of formation 1932 | M State of legal domicile CT

Part I Summary

Activities & Governance

1 Briefly describe the organization's mission or most significant activities
BRUNSWICK IS AN INDEPENDENT COLLEGE-PREPARATORY DAY SCHOOL FOR BOYS IN GRADES PRE-K THROUGH 12 STUDENTS SUCCEED BY ANNUALLY ADVANCING MATRICULATION, CULMINATING WITH A 100% PLACEMENT RECORD FOR SENIOR BOYS AT NATIONALLY RECOGNIZED, HIGHLY COMPETITIVE COLLEGES AND UNIVERSITIES BRUNSWICK SCHOOL HOLDS LONG-STANDING ACCREDITATION BY THE NEW ENGLAND ASSOCIATION OF SCHOOLS AND COLLEGES

2 Check this box ▶☐ if the organization discontinued its operations or disposed of more than 25% of its net assets

3	Number of voting members of the governing body (Part VI, line 1a)	3	30
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	30
5	Total number of individuals employed in calendar year 2013 (Part V, line 2a)	5	347
6	Total number of volunteers (estimate if necessary)	6	200
7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	4,737
b	Net unrelated business taxable income from Form 990-T, line 34	7b	0

			Prior Year	Current Year
Revenue	8	Contributions and grants (Part VIII, line 1h)	21,897,448	22,331,281
	9	Program service revenue (Part VIII, line 2g)	32,975,247	34,413,489
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	2,086,467	6,483,955
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	539,428	690,126
	12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	57,498,590	63,918,851
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	5,102,333	5,303,750
	14	Benefits paid to or for members (Part IX, column (A), line 4)	0	0
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	22,898,381	23,888,998
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	0	0
	b	Total fundraising expenses (Part IX, column (D), line 25) ▶2,358,160		
	17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	14,279,940	13,834,119
	18	Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	42,280,654	43,026,867
	19	Revenue less expenses Subtract line 18 from line 12	15,217,936	20,891,984
Net Assets or Fund Balances			Beginning of Current Year	End of Year
	20	Total assets (Part X, line 16)	263,477,435	290,112,503
	21	Total liabilities (Part X, line 26)	62,138,584	63,843,652
	22	Net assets or fund balances Subtract line 21 from line 20	201,338,851	226,268,851

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge

Sign Here

****** | 2015-05-15
Signature of officer | Date

KATHLEEN HARRINGTON CHIEF FINANCIAL OFFICER
Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check ☐ if self-employed	PTIN
GARRETT M HIGGINS		2015-05-15		P00543209

Firm's name ▶ O'CONNOR DAVIES LLP | Firm's EIN ▶ 27-1728945

Firm's address ▶ 665 FIFTH AVENUE, NEW YORK, NY 10022 | Phone no (212) 286-2600

May the IRS discuss this return with the preparer shown above? (see instructions) ☑ Yes ☐ No

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response or note to any line in this Part III . . . . ☑

1 Briefly describe the organization's mission

SEE SCHEDULE O

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? . . . . ☐ Yes ☑ No

If "Yes," describe these new services on Schedule O

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? . . . . ☐ Yes ☑ No

If "Yes," describe these changes on Schedule O

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

4a (Code) (Expenses $ 29,725,247 including grants of $ 5,303,750) (Revenue $ 33,510,067)

EDUCATION FOR APPROXIMATELY 960 STUDENTS IN CLASSES FROM PRE-KINDERGARTEN THROUGH 12TH GRADE

4b (Code) (Expenses $ 4,019,060 including grants of $) (Revenue $ 667,232)

REQUIRED ATHLETIC AND VOLUNTARY SUMMER PROGRAMS

4c (Code) (Expenses $ 2,486,111 including grants of $) (Revenue $ 445,107)

STUDENT SERVICES INCLUDING FOOD SERVICE AND BOOKSTORE

4d Other program services (Describe in Schedule O)

(Expenses $ including grants of $) (Revenue $)

4e **Total program service expenses ▶** 36,230,418

Part IV Checklist 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		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? *If "Yes," complete Schedule D, Part III*	8		No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? *If "Yes," complete Schedule D, Part IV*	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? *If "Yes," complete Schedule D, Part V*	10	Yes	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
a	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	Yes	
c	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part VIII*	11c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part IX*	11d		No
e	Did the organization report an amount for other liabilities in Part X, line 25? *If "Yes," complete Schedule D, Part X*	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? *If "Yes," complete Schedule D, Part X*	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? *If "Yes," complete Schedule D, Parts XI and XII*	12a	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? *If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional*	12b		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? *If "Yes," complete Schedule E*	13	Yes	
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than $10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at $100,000 or more? *If "Yes," complete Schedule F, Parts I and IV*	14b	Yes	
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? *If "Yes," complete Schedule F, Parts III and IV*	16		No
17	Did the organization report a total of more than $15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? *If "Yes," complete Schedule G, Part I (see instructions)*	17		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		

Part 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**		No
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	**24c**		No
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	**24d**		No
25a	**Section 501(c)(3) and 501(c)(4) organizations.** Did the organization engage in an excess benefit transaction with a disqualified person during the year? *If "Yes," complete Schedule L, Part I*	**25a**		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? *If "Yes," complete Schedule L, Part I*	**25b**		No
26	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**		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
a	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
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? *If "Yes," complete Schedule L, Part IV*	**28c**		No
29	Did the organization receive more than $25,000 in non-cash contributions? *If "Yes," complete Schedule M*	**29**	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? *If "Yes," complete Schedule M*	**30**		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? *If "Yes," complete Schedule N, Part I*	**31**		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? *If "Yes," complete Schedule N, Part II*	**32**		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? *If "Yes," complete Schedule R, Part I*	**33**	Yes	
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? *If "Yes," complete Schedule R, Part V, line 2*	**36**		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? *If "Yes," complete Schedule R, Part VI*	**37**		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? **Note.** All Form 990 filers are required to complete Schedule O	**38**	Yes	

Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response or note to any line in this Part V . . . . ☐

					Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	1a	124			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	1b	0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?			1c		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a	347			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? **Note.** If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			2b	Yes	
3a	Did the organization have unrelated business gross income of $1,000 or more during the year?			3a	Yes	
b	If "Yes," has it filed a Form 990-T for this year? *If "No" to line 3b, provide an explanation in Schedule O*			3b	Yes	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?			4a		No
b	If "Yes," enter the name of the foreign country ▶ See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts					
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			5b		No
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			5c		
6a	Does the organization have annual gross receipts that are normally greater than $100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?			6a		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?			6b		
7	**Organizations that may receive deductible contributions under section 170(c).**					
a	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	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b	Yes	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?			7c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d				
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?			7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?			7f		No
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?			7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?			7h		
8	**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		
9	**Sponsoring organizations maintaining donor advised funds.**					
a	Did the organization make any taxable distributions under section 4966?			9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?			9b		
10	**Section 501(c)(7) organizations.** Enter					
a	Initiation fees and capital contributions included on Part VIII, line 12	10a				
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b				
11	**Section 501(c)(12) organizations.** Enter					
a	Gross income from members or shareholders	11a				
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	11b				
12a	**Section 4947(a)(1) non-exempt charitable trusts.** Is the organization filing Form 990 in lieu of Form 1041?			12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b				
13	**Section 501(c)(29) qualified nonprofit health insurance issuers.**					
a	Is the organization licensed to issue qualified health plans in more than one state? **Note.** See the instructions for additional information the organization must report on Schedule O			13a		
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b				
c	Enter the amount of reserves on hand	13c				
14a	Did the organization receive any payments for indoor tanning services during the tax year?			14a		No
b	If "Yes," has it filed a Form 720 to report these payments? *If "No," provide an explanation in Schedule O*			14b		

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

Check if Schedule O contains a response or note to any line in this Part VI . . . ☑

Section A. Governing Body and Management

				Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year . . .	1a 30			
	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 . . .	1b 30			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? . . .		2	Yes	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? .		3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? . . .		4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .		5		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				
a	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

Section B. Policies (*This Section B requests information about policies not required by the Internal Revenue Code.*)

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

Section C. Disclosure

17 List the States with which a copy of this Form 990 is required to be filed ▶CA , IL , MA , NH , NJ , NY , PA , VA

18 Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection Indicate how you made these available Check all that apply

☐ Own website ☑ Another's website ☑ Upon request ☐ Other (explain in Schedule O)

19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization ▶KATHLEEN F HARRINGTON CHIEF FINANCIAL OFFICER 99 MAHER AVENUE GREENWICH,CT 06830 (203)625-5815

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

Check if Schedule O contains a response or note to any line in this Part VII . . . .

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

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

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid
- List all of the organization's **current** key employees, if any See instructions for definition of "key employee "
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than $100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, 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) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee) Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee): Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations

		D	E	F
1b	**Sub-Total** ►			
c	**Total from continuation sheets to Part VII, Section A** ►			
d	**Total (add lines 1b and 1c)** ►	2,113,741	0	765,700

2 Total number of individuals (including but not limited to those listed above) who received more than $100,000 of reportable compensation from the organization ►44

			Yes	No
3	Did the organization list any **former** officer, director or trustee, key employee, or highest compensated employee on line 1a? *If "Yes," complete Schedule J for such individual*	3	Yes	
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than $150,000? *If "Yes," complete Schedule J for such individual*	4	Yes	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? *If "Yes," complete Schedule J for such person*	5		No

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
FLIK COMPASS GROUP PO BOX 417632 BOSTON MA 02241	DINING SERVICE	1,507,034
SKIDMORE OWENS & MERRILL LLP 14 WALL STREET NEW YORK NY 10005	ARCHITECTS	527,489
TURNER CONSTRUCTION 440 WHEELERS FARM ROAD MILLFORD CT 06461	CONSTRUCTION MANAGEMENT/CONTRACTING	495,061
DUNNING ENTERPRISES INC 11 BUCKLEY AVENUE PORT CHESTER NY 10573	CLEANING SERVICE	401,100
DAY PITNEY LLP 201 BROAD STREET STAMFORD CT 06901	ATTORNEY	257,469

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

Part VIII **Statement of Revenue**

Check if Schedule O contains a response or note to any line in this Part VIII . . . . ☐

Section	Line	Description	Amount / Business Code	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts	1a	Federated campaigns . . 1a					
	b	Membership dues 1b					
	c	Fundraising events 1c	584,022				
	d	Related organizations . . . 1d					
	e	Government grants (contributions) 1e					
	f	All other contributions, gifts, grants, and similar amounts not included above 1f	21,747,259				
	g	Noncash contributions included in lines 1a-1f $	1,461,199				
	h	**Total.** Add lines 1a-1f . . . . ▶		22,331,281			
Program Service Revenue			Business Code				
	2a	STUDENT TUITION	900099	33,199,527	33,199,527		
	b	AFTER SCHOOL PROGRAMS & OTHER FEE	611710	755,647	755,647		
	c	SUMMER PROGRAM	611710	458,315	458,315		
	d						
	e						
	f	All other program service revenue					
	g	**Total.** Add lines 2a–2f . . . . ▶		34,413,489			
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts) . . . . ▶		344,806		-3	344,809
	4	Income from investment of tax-exempt bond proceeds . . ▶					
	5	Royalties . . . . ▶					
	6a	Gross rents	(i) Real: 768,280; (ii) Personal:				
	b	Less rental expenses	(i) Real: 463,253; (ii) Personal:				
	c	Rental income or (loss)	(i) Real: 305,027; (ii) Personal:				
	d	Net rental income or (loss) . . . . ▶		305,027			305,027
	7a	Gross amount from sales of assets other than inventory	(i) Securities: 31,699,356; (ii) Other:				
	b	Less cost or other basis and sales expenses	(i) Securities: 25,560,207; (ii) Other:				
	c	Gain or (loss)	(i) Securities: 6,139,149; (ii) Other:				
	d	Net gain or (loss) . . . . ▶		6,139,149		4,740	6,134,409
	8a	Gross income from fundraising events (not including $ 584,022 of contributions reported on line 1c) See Part IV, line 18 . . a	785,001				
	b	Less direct expenses . . . b	649,454				
	c	Net income or (loss) from fundraising events . . ▶		135,547			135,547
	9a	Gross income from gaming activities See Part IV, line 19 . . . a					
	b	Less direct expenses . . . b					
	c	Net income or (loss) from gaming activities . . ▶					
	10a	Gross sales of inventory, less returns and allowances . a	811,381				
	b	Less cost of goods sold . . b	602,464				
	c	Net income or (loss) from sales of inventory . . ▶		208,917	208,917		
		Miscellaneous Revenue	Business Code				
	11a	LATE PENALTY FEES INCOME	900099	27,200			27,200
	b	OTHER REVENUE	900099	13,435			13,435
	c						
	d	All other revenue					
	e	**Total.** Add lines 11a–11d . . . . ▶		40,635			
	12	**Total revenue.** See Instructions . . . . . ▶		63,918,851	34,622,406	4,737	6,960,427

Part IX Statement of Functional Expenses

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

Check if Schedule O contains a response or note to any line in this Part IX . . . . ☐

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the United States See Part IV, line 21				
2 Grants and other assistance to individuals in the United States See Part IV, line 22	5,303,750	5,303,750		
3 Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	1,273,507	155,154	830,862	287,491
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	129,084		129,084	
7 Other salaries and wages	16,881,131	14,162,488	1,837,758	880,885
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	1,439,724	1,351,460	16,453	71,811
9 Other employee benefits	2,856,228	2,564,984	183,870	107,374
10 Payroll taxes	1,309,324	1,076,287	150,160	82,877
11 Fees for services (non-employees)				
a Management				
b Legal	62,662		62,662	
c Accounting	85,857		85,857	
d Lobbying				
e Professional fundraising services See Part IV, line 17				
f Investment management fees	68,275		68,275	
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	138,774	106,138	32,581	55
12 Advertising and promotion	30,455	9,182	7,398	13,875
13 Office expenses	1,209,107	449,184	403,818	356,105
14 Information technology	267,598	226,002	28,793	12,803
15 Royalties . .				
16 Occupancy	813,094	807,749	4,688	657
17 Travel	332,714	332,714		
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	307,564	298,235	7,345	1,984
20 Interest	1,424,543	1,424,543		
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	4,775,065	4,692,654	45,942	36,469
23 Insurance	128,177		128,177	
24 Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
a BLDG MAINT & CONTRACTS	1,871,414	1,858,473	11,350	1,591
b CATERING	1,282,667	1,282,667		
c ANNUAL CAMPAIGN EXPENSE	592,998	28,881	112,944	451,173
d OTHER DIRECT OPERATING	408,685	99,873	255,802	53,010
e All other expenses	34,470		34,470	
25 **Total functional expenses.** Add lines 1 through 24e	43,026,867	36,230,418	4,438,289	2,358,160
26 **Joint costs.** Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here ▶ ☐ if following SOP 98-2 (ASC 958-720)				

Part X **Balance Sheet**

Check if Schedule O contains a response or note to any line in this Part X . . . . ☐

				(A) Beginning of year		(B) End of year
Assets	1	Cash–non-interest-bearing		18,985,986	1	14,556,779
	2	Savings and temporary cash investments		16,217,849	2	34,125,710
	3	Pledges and grants receivable, net		17,182,232	3	21,848,912
	4	Accounts receivable, net		351,093	4	363,684
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L			5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L			6	
	7	Notes and loans receivable, net			7	
	8	Inventories for sale or use		189,680	8	179,998
	9	Prepaid expenses and deferred charges		115,213	9	142,864
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a 178,355,824			
	b	Less accumulated depreciation	10b 49,042,059	116,619,686	10c	129,313,765
	11	Investments—publicly traded securities		24,888,976	11	27,388,598
	12	Investments—other securities See Part IV, line 11		68,392,209	12	61,693,563
	13	Investments—program-related See Part IV, line 11			13	
	14	Intangible assets			14	
	15	Other assets See Part IV, line 11		534,511	15	498,630
	16	**Total assets.** Add lines 1 through 15 (must equal line 34)		263,477,435	16	290,112,503
Liabilities	17	Accounts payable and accrued expenses		4,463,138	17	6,457,209
	18	Grants payable			18	
	19	Deferred revenue		12,859,008	19	13,548,172
	20	Tax-exempt bond liabilities		37,010,000	20	35,815,000
	21	Escrow or custodial account liability Complete Part IV of Schedule D			21	
	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L			22	
	23	Secured mortgages and notes payable to unrelated third parties		604,000	23	604,000
	24	Unsecured notes and loans payable to unrelated third parties			24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D		7,202,438	25	7,419,271
	26	**Total liabilities.** Add lines 17 through 25		62,138,584	26	63,843,652
Net Assets or Fund Balances		**Organizations that follow SFAS 117 (ASC 958), check here ▶ ☑ and complete lines 27 through 29, and lines 33 and 34.**				
	27	Unrestricted net assets		148,723,484	27	154,229,379
	28	Temporarily restricted net assets		25,931,424	28	35,540,142
	29	Permanently restricted net assets		26,683,943	29	36,499,330
		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☐ and complete lines 30 through 34.				
	30	Capital stock or trust principal, or current funds			30	
	31	Paid-in or capital surplus, or land, building or equipment fund			31	
	32	Retained earnings, endowment, accumulated income, or other funds			32	
	33	Total net assets or fund balances		201,338,851	33	226,268,851
	34	Total liabilities and net assets/fund balances		263,477,435	34	290,112,503

Part XI **Reconcilliation of Net Assets**

Check if Schedule O contains a response or note to any line in this Part XI . . . . ☐

1	Total revenue (must equal Part VIII, column (A), line 12)	1	63,918,851
2	Total expenses (must equal Part IX, column (A), line 25)	2	43,026,867
3	Revenue less expenses Subtract line 2 from line 1	3	20,891,984
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	201,338,851
5	Net unrealized gains (losses) on investments	5	4,038,016
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	226,268,851

Part XII **Financial Statements and Reporting**

Check if Schedule O contains a response or note to any line in this Part XII . . . . ☑

			Yes	No
1	Accounting method used to prepare the Form 990 ☐ Cash ☑ Accrual ☐ Other ______ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O			
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 reviewed on a separate basis, consolidated basis, or both ☐ 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 separate basis, consolidated basis, or both ☑ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis			
c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O			
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?	3a		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3b		

Additional Data

Software ID:
Software Version:
EIN: 06-0646562
Name: BRUNSWICK SCHOOL INC

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position: Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
MR SANJEEV K MEHRA CHARIMAN	8 00	X		X				0	0	0
MR GREGORY BARTON HARTCH TREASURER	4 00	X		X				0	0	0
MR B CORT DELANY SECRETARY	4 00	X		X				0	0	0
MR W PRESTON BALDWIN III TRUSTEE	4 00	X						0	0	0
MS JAMES F BELL IV TRUSTEE	2 00	X						0	0	0
MR WILLIAM R BERKLEY JR TRUSTEE	2 00	X						0	0	0
MRS NANCY M BETTER TRUSTEE	2 00	X						0	0	0
MR MICHAEL BINGLE TRUSTEE	2 00	X						0	0	0
MR TODD L BOEHLY TRUSTEE	2 00	X						0	0	0
MR MARK CAMEL TRUSTEE	4 00	X						0	0	0
MR ROBERT F CARANGELO TRUSTEE	2 00	X						0	0	0
MR MARK F DZIALGA TRUSTEE	2 00	X						0	0	0
MR SCOTT V HAIG TRUSTEE	2 00	X						0	0	0
MR JOHN R HARVEY TRUSTEE	4 00	X						0	0	0
MR CARLOS HERNANDEZ TRUSTEE	2 00	X						0	0	0
MR ANDREW JACOBSON TRUSTEE	2 00	X						0	0	0
MS CHRISTINA KAZAZES TRUSTEE	2 00	X						0	0	0
MR DAVID B MACFARLANE TRUSTEE	4 00	X						0	0	0
MR D IAN MCKINNON TRUSTEE	2 00	X						0	0	0
MR THOMAS D O'MALLEY JR TRUSTEE	4 00	X						0	0	0
MR MICHAEL J ODRICH TRUSTEE	2 00	X						0	0	0
MR PHILIP F PIERCE TRUSTEE	2 00	X						0	0	0
MR STEPHEN R PIERCE TRUSTEE	2 00	X						0	0	0
MS JEANNIE W ROSE TRUSTEE	2 00	X						0	0	0
MR DAVID SALOMON TRUSTEE	2 00	X						0	0	0

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position: Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
MR WILLIAM A SCHNEIDER TRUSTEE	4 00	X						0	0	0
MR SCOTT STUART TRUSTEE	2 00	X						0	0	0
MR MICHAEL A TROY TRUSTEE	4 00	X						0	0	0
MR JOHN S WEINBERG TRUSTEE	2 00	X						0	0	0
MR TYLER J WOLFRAM TRUSTEE	2 00	X						0	0	0
MR THOMAS W PHILIP HEADMASTER	40 00			X				423,856	0	321,722
MS KATHLEEN HARRINGTON CFO	40 00			X				153,611	0	37,554
MR THOMAS MURRAY DIRECTOR OF DEVELOPMENT	40 00				X			229,096	0	92,568
MR TIMOTHY F OSTRYE DIRECTOR OF ATHLETICS	40 00					X		148,854	0	37,499
MR SUNIL GUPTA DIRECTOR OF TECHNOLOGY	40 00					X		169,876	0	40,531
MR ANDREW HALL CHAIR OF VISUAL & PERFORMI	40 00					X		151,522	0	61,659
MR DOUGLAS BURDETT DIRECTOR OF COLLEGE GUIDAN	40 00					X		164,932	0	105,809
MR STEPHEN DUENNEBIER ASS'T HEAD US DIR STUDENT	40 00					X		145,122	0	44,582
MR STEVEN H DUDLEY ASS'T HEAD/ DIRECTOR FINANCE UNTIL 5/13	40 00						X	526,872	0	23,776

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*.

OMB No 1545-0047
2013
Open to Public Inspection

Name of the organization
BRUNSWICK SCHOOL INC

Employer identification number
06-0646562

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is (For lines 1 through 11, check only one box)

1 ☐ A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**

2 ☑ A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E)

3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**

4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state

5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II)

6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**

7 ☐ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II)

8 ☐ A community trust described in **section 170(b)(1)(A)(vi)** (Complete Part II)

9 ☐ An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See **section 509(a)(2).** (Complete Part III)

10 ☐ An organization organized and operated exclusively to test for public safety See **section 509(a)(4).**

11 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See **section 509(a)(3).** Check 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 integrated

e ☐ By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2)

f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box ☐

g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

		Yes	No
(i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?	11g(i)		
(ii) A family member of a person described in (i) above?	11g(ii)		
(iii) A 35% controlled entity of a person described in (i) or (ii) above?	11g(iii)		

h Provide the following information about the supported organization(s)

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 9 above or IRC section (see instructions))	(iv) Is the organization in col (i) listed in your governing document? Yes	No	(v) Did you notify the organization in col (i) of your support? Yes	No	(vi) Is the organization in col (i) organized in the U S ? Yes	No	(vii) Amount of monetary support
Total									

Part II **Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)**
(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar 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 include any "unusual grants ")						
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 **Total.** Add lines 1 through 3						
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 **Public support.** Subtract line 5 from line 4						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
7 Amounts 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, etc (see instructions) **12**

13 **First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and **stop here** . . . . ▶☐

Section C. Computation of Public Support Percentage

14 Public support percentage for 2013 (line 6, column (f) divided by line 11, column (f)) **14**

15 Public support percentage for 2012 Schedule A, Part II, line 14 **15**

16a **33 1/3% support test—2013.** If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶☐

b **33 1/3% support test—2012.** If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶☐

17a **10%-facts-and-circumstances test—2013.** If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization ▶☐

b **10%-facts-and-circumstances test—2012.** If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization ▶☐

18 **Private foundation.** If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ▶☐

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

Calendar 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 include any "unusual grants ")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 **Total.** Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of $5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 **Public support** (Subtract line 7c from line 6)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
13 **Total support.** (Add lines 9, 10c, 11, and 12)						

14 **First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and **stop here** ▶☐

Section C. Computation of Public Support Percentage

15 Public support percentage for 2013 (line 8, column (f) divided by line 13, column (f))	15	
16 Public support percentage from 2012 Schedule A, Part III, line 15	16	

Section D. Computation of Investment Income Percentage

17 Investment income percentage for **2013** (line 10c, column (f) divided by line 13, column (f))	17	
18 Investment income percentage from **2012** Schedule A, Part III, line 17	18	

19a **33 1/3% support tests—2013.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶☐

b **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 ▶☐

20 **Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ▶☐

Part IV **Supplemental Information.** Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).

Facts And Circumstances Test

Return Reference	Explanation

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SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

▶ Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b
▶ Attach to Form 990. ▶ See separate instructions. ▶ Information about Schedule D (Form 990) and its instructions is at *www.irs.gov/form990*.

OMB No 1545-0047
2013
Open to Public Inspection

Name of the organization
BRUNSWICK SCHOOL INC

Employer identification number
06-0646562

Part I **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
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No

6 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? ☐ Yes ☐ No

Part II **Conservation Easements.** Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply)
- ☐ Preservation of land for public use (e g , recreation or education)
- ☐ Preservation of an historically important land area
- ☐ Protection of natural habitat
- ☐ Preservation of a certified historic structure
- ☐ Preservation of open space

2 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
a	Total number of conservation easements	2a	
b	Total acreage restricted by conservation easements	2b	
c	Number of conservation easements on a certified historic structure included in (a)	2c	
d	Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	2d	

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶_______________

4 Number of states where property subject to conservation easement is located ▶_______________

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ▶_______________

7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ $ _______________

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? ☐ Yes ☐ No

9 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

Part III **Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.** Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

1a 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

b 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 ▶ $ _______________

2 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

a Revenues included in Form 990, Part VIII, line 1 ▶ $ _______________

b Assets included in Form 990, Part X ▶ $ _______________

Part III **Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets** *(continued)*

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply)

a ☐ Public exhibition

b ☐ Scholarly research

c ☐ Preservation for future generations

d ☐ Loan or exchange programs

e ☐ Other

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII

5 During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? ☐ **Yes** ☐ **No**

Part IV **Escrow and Custodial Arrangements.** Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? ☐ **Yes** ☐ **No**

b If "Yes," explain the arrangement in Part XIII and complete the following table

			Amount
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 Form 990, Part X, line 21? ☐ **Yes** ☐ **No**

b If "Yes," explain the arrangement in Part XIII Check here if the explanation has been provided in Part XIII . . . . ☐

Part V **Endowment Funds.** Complete if the organization answered "Yes" to Form 990, Part IV, line 10.

		(a) Current year	**(b)** Prior year	**b (c)** Two years back	**(d)** Three years back	**(e)** Four years back
1a	Beginning of year balance	91,565,910	80,485,015	83,986,974	74,402,682	82,736,143
b	Contributions	4,361,532	3,947,384	1,217,582	3,352,524	3,991,889
c	Net investment earnings, gains, and losses	10,198,057	9,815,611	-167,970	8,201,857	5,028,243
d	Grants or scholarships					258,814
e	Other expenditures for facilities and programs	2,672,482	2,682,100	4,551,571	1,970,089	17,065,254
f	Administrative expenses					29,525
g	End of year balance	103,453,017	91,565,910	80,485,015	83,986,974	74,402,682

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as

a Board designated or quasi-endowment ▶ 63 220 %

b Permanent endowment ▶ 26 720 %

c Temporarily restricted endowment ▶ 10 060 %

The percentages in lines 2a, 2b, and 2c should equal 100%

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by

			Yes	No
	(i) unrelated organizations	**3a(i)**		No
	(ii) related organizations	**3a(ii)**		No
b	If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?	**3b**		

4 Describe in Part XIII the intended uses of the organization's endowment funds

Part VI **Land, Buildings, and Equipment.** Complete if the organization answered 'Yes' to Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	**(a)** Cost or other basis (investment)	**(b)** Cost or other basis (other)	**(c)** Accumulated depreciation	**(d)** Book value
1a Land		12,404,989		12,404,989
b Buildings		122,813,184	33,206,605	89,606,579
c Leasehold improvements				
d Equipment		16,479,461	12,311,122	4,168,339
e Other		26,658,190	3,524,332	23,133,858
Total. Add lines 1a through 1e *(Column (d) must equal Form 990, Part X, column (B), line 10(c).)* ▶				129,313,765

Part VII Investments—Other Securities. Complete if the organization answered 'Yes' to Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A) EQUITY STRATEGY FUND	40,116,842	F
(B) MULTI-STRATEGY FUND	14,024,533	F
(C) PE LIMITED PARTNERSHIPS	7,552,188	F
Total. *(Column (b) must equal Form 990, Part X, col (B) line 12)* ▶	61,693,563	

Part VIII Investments—Program Related. Complete if the organization 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 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 answered 'Yes' to Form 990, Part IV, line 11d See Form 990, Part X, line 15

(a) Description	(b) Book value
Total. *(Column (b) must equal Form 990, Part X, col.(B) line 15.)* . . . . ▶	

Part X Other Liabilities. Complete if the organization answered 'Yes' to Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1 (a) Description of liability	(b) Book value
Federal income taxes	
ENROLLMENT DEPOSITS	4,195,539
ASSET RETIREMENT OBLIGATION	206,891
UNAMORTIZED BOND PREMIUM	3,016,841
Total. *(Column (b) must equal Form 990, Part X, col (B) line 25)* ▶	7,419,271

2. Liability for uncertain tax positions In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740) Check here if the text of the footnote has been provided in Part XIII ☑

Part XI **Reconciliation of Revenue per Audited Financial Statements With Revenue per Return** Complete if the organization answered 'Yes' to Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements			1	63,650,559
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12				
a	Net unrealized gains on investments	2a	4,038,016		
b	Donated services and use of facilities	2b			
c	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII)	2d	1,065,717		
e	Add lines **2a** through **2d**			2e	5,103,733
3	Subtract line **2e** from line **1**			3	58,546,826
4	Amounts included on Form 990, Part VIII, line 12, but not on line **1**				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	68,275		
b	Other (Describe in Part XIII)	4b	5,303,750		
c	Add lines **4a** and **4b**			4c	5,372,025
5	Total revenue Add lines **3** and **4c.** (This must equal Form 990, Part I, line 12)			5	63,918,851

Part XII **Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.** Complete if the organization answered 'Yes' to Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements			1	38,720,559
2	Amounts included on line 1 but not on Form 990, Part IX, line 25				
a	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
c	Other losses	2c			
d	Other (Describe in Part XIII)	2d	1,065,717		
e	Add lines **2a** through **2d**			2e	1,065,717
3	Subtract line **2e** from line **1**			3	37,654,842
4	Amounts included on Form 990, Part IX, line 25, but not on line **1:**				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	68,275		
b	Other (Describe in Part XIII)	4b	5,303,750		
c	Add lines **4a** and **4b**			4c	5,372,025
5	Total expenses Add lines **3** and **4c.** (This must equal Form 990, Part I, line 18)			5	43,026,867

Part XIII **Supplemental Information**

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

Return Reference	Explanation
PART V, LINE 4	THE SCHOOL'S ENDOWMENT CONSISTS OF OVER 81 INDIVIDUAL FUNDS ESTABLISHED FOR A VARIETY OF PURPOSES INCLUDING BOTH DONOR-RESTRICTED ENDOWMENT FUNDS AND AMOUNTS DESIGNATED BY THE BOARD OF TRUSTEES TO FUNCTION AS ENDOWMENT THE SCHOOL HAS ADOPTED AN INVESTMENT POLICY AND A SPENDING POLICY, APPROVED BY THE SCHOOL'S BOARD OF TRUSTEES FOR DONOR-RESTRICTED ENDOWMENT ASSETS, THE POLICIES ATTEMPT TO PROVIDE A PREDICTABLE STREAM OF FUNDING TO DONOR-RESTRICTED PROGRAMS WHILE SEEKING TO MAINTAIN THE PURCHASING POWER OF THE RELATED ENDOWMENT ASSETS ENDOWMENT ASSETS ARE INVESTED WITH A MODERATE LEVEL OF INVESTMENT RISK IN ACCORDANCE WITH AN ASSET ALLOCATION STRATEGY IN WHICH INVESTMENT RETURNS ARE ACHIEVED THROUGH BOTH CAPITAL APPRECIATION (REALIZED AND UNREALIZED) AND CURRENT YIELD (INTEREST AND DIVIDENDS) THE SCHOOL TARGETS A DIVERSIFIED ASSET ALLOCATION THAT PLACES AN EMPHASIS ON ALTERNATIVE INVESTMENTS TO ACHIEVE ITS LONG-TERM RETURN OBJECTIVES WITHIN PRUDENT RISK CONSTRAINTS THE SPENDING POLICY CALLS FOR ANNUAL WITHDRAWALS FROM THE DONOR-RESTRICTED FUNDS FOR DONOR-RESTRICTED PURPOSES CALCULATED AS FOUR PERCENT OF THE AVERAGE MARKET VALUE OF THE DONOR-RESTRICTED FUNDS OVER THE MOST RECENT THREE-YEAR PERIOD IN ADDITION, THERE ARE ANNUAL WITHDRAWALS FROM BOARD-DESIGNATED FUNDS FOR THE SCHOOL'S LONG TERM DEBT SERVICE
PART X, LINE 2	THE SCHOOL IS EXEMPT FROM INCOME TAX UNDER SECTION 501(C)(3) OF THE U S INTERNAL REVENUE CODE (THE CODE) THE SCHOOL RECOGNIZES THE EFFECT OF INCOME TAX POSITIONS ONLY IF THOSE POSITIONS ARE MORE LIKELY THAN NOT TO BE SUSTAINED AND ACCORDINGLY BELIEVES THAT ITS INCOME TAX POSITIONS ARE CONSISTENT WITH ITS EXEMPTION CONTRIBUTIONS MADE TO THE SCHOOL ARE QUALIFIED FOR THE MAXIMUM TAX DEDUCTION ALLOWABLE UNDER THE CODE INCOME GENERATED FROM ACTIVITIES UNRELATED TO THE SCHOOL'S PURPOSE IS SUBJECT TO TAX UNDER INTERNAL REVENUE CODE SECTION 511 THE SCHOOL DID NOT HAVE ANY MATERIAL UNRELATED BUSINESS INCOME TAX LIABILITY FOR THE YEARS ENDED JUNE 30, 2014 AND 2013
PART XI, LINE 2D - OTHER ADJUSTMENTS	RENTAL EXPENSES REPORTED ON PART VIII, LINE 6B 463,253 COST OF GOODS SOLD REPORTED ON PART VIII, LINE 10B 602,464
PART XI, LINE 4B - OTHER ADJUSTMENTS	FINANCIAL AID NETTED AGAINST REVENUE 5,303,750
PART XII, LINE 2D - OTHER ADJUSTMENTS	RENTAL EXPENSES REPORTED ON PART VIII, LINE 6B 463,253 COST OF GOODS SOLD REPORTED ON PART VIII, LINE 10B 602,464
PART XII, LINE 4B - OTHER ADJUSTMENTS	FINANCIAL AID NETTED AGAINST REVENUE 5,303,750

Part XIII Supplemental Information *(continued)*

Return Reference	Explanation

SCHEDULE E (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Schools

► Complete if the organization answered "Yes" to Form 990, Part IV, line 13, or Form 990-EZ, Part VI, line 48.
► Attach to Form 990 or Form 990-EZ.
► Information about Schedule E (Form 990 or 990-EZ) and its instructions is at *www.irs.gov/form990*.

OMB No 1545-0047

2013

Open to Public Inspection

Name of the organization
BRUNSWICK SCHOOL INC

Employer identification number
06-0646562

Part I

			YES	NO
1	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?	1	Yes	
2	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	2	Yes	
3	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe If "No," please explain If you need more space use Part II	3	Yes	
4	Does the organization maintain the following?			
a	Records indicating the racial composition of the student body, faculty, and administrative staff?	4a	Yes	
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	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	
d	Copies of all material used by the organization or on its behalf to solicit contributions?	4d	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		No
b	Admissions policies?	5b		No
c	Employment of faculty or administrative staff?	5c		No
d	Scholarships or other financial assistance?	5d		No
e	Educational policies?	5e		No
f	Use of facilities?	5f		No
g	Athletic programs?	5g		No
h	Other extracurricular activities?	5h		No
	If you answered "Yes" to any of the above, please explain If you need more space, use Part II			
6a	Does the organization receive any financial aid or assistance from a governmental agency?	6a		No
b	Has the organization's right to such aid ever been revoked or suspended?	6b		No
	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	7	Yes	

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	A GENERAL STATEMENT OF NON-DISCRIMINATION IS INCLUDED IN ALL ADVERTISEMENTS, IN NEWSPAPERS OF GENERAL CIRCULATION, AND OTHER PRINTED MEDIA RELATING TO THE RECRUITMENT OF STUDENTS AND EMPLOYEES

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SCHEDULE F
(Form 990)

Department of the Treasury
Internal Revenue Service

Statement of Activities Outside the United States

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16.

▶ Attach to Form 990. ▶ See separate instructions.

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

OMB No 1545-0047

2013

Open to Public Inspection

Name of the organization
BRUNSWICK SCHOOL INC

Employer identification number
06-0646562

Part I **General Information on Activities Outside the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 14b.

1 **For grantmakers.** Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? . . . . ☐ Yes ☐ No

2 **For grantmakers.** Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.

3 Activites per Region (The following Part I, line 3 table can be duplicated if additional space is needed)

	(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e g , fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
(1)	CENTRAL AMERICA AND THE CARIBBEAN -	0	0	INVESTMENTS		49,069,343
(2)						
(3)						
(4)						
(5)						
3a	Sub-total	0	0			49,069,343
b	Total from continuation sheets to Part I	0	0			0
c	**Totals** (add lines 3a and 3b)	0	0			49,069,343

Part II **Grants and Other Assistance to Organizations or Entities Outside the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any recipient who received more than $5,000. Part II can be duplicated if additional space is needed.

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)								
(2)								
(3)								
(4)								

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter . . . . ▶

3 Enter total number of other organizations or entities . . . . ▶

Part III **Grants and Other Assistance to Individuals Outside the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 16. Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1)							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							
(13)							
(14)							
(15)							
(16)							
(17)							
(18)							

Part IV Foreign Forms

1	Was the organization a U S transferor of property to a foreign corporation during the tax year? *If "Yes,"the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)*	☐ Yes	☑ No
2	Did the organization have an interest in a foreign trust during the tax year? *If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A)*	☐ Yes	☑ No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with Respect to Certain Foreign Corporations. (see Instructions for Form 5471)*	☑ Yes	☐ No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)*	☑ Yes	☐ No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with Respect to Certain Foreign Partnerships. (see Instructions for Form 8865)*	☑ Yes	☐ No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713).*	☐ Yes	☑ No

Part V Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions).

990 Schedule F, Supplemental Information

Return Reference	Explanation
SCHEDULE F, PART IV, LINE 3 AND LINE 4	THE ORGANIZATION IS NOT REQUIRED TO FILE FORM 5471 AND FORM 8621 BECAUSE IT DOES NOT MEET THE APPLICABLE FILING THRESHOLD REQUIREMENT AND OWNERSHIP REQUIREMENT

SCHEDULE G (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than $15,000 on Form 990-EZ, line 6a.
▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.
▶ Information about Schedule G (Form 990 or 990-EZ) and its instructions is at *www.irs.gov/form990*.

OMB No 1545-0047

2013

Open to Public Inspection

Name of the organization	Employer identification number
BRUNSWICK SCHOOL INC	06-0646562

Part I **Fundraising Activities.** Complete if the organization answered "Yes" to Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

1 Indicate whether the organization raised funds through any of the following activities Check all that apply

- **a** ☐ Mail solicitations
- **b** ☐ Internet and email solicitations
- **c** ☐ Phone solicitations
- **d** ☐ In-person solicitations
- **e** ☐ Solicitation of non-government grants
- **f** ☐ Solicitation of government grants
- **g** ☐ Special fundraising events

2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? ☐ **Yes** ☐ **No**

b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least $5,000 by the organization

	(i) Name and address of individual or entity (fundraiser)	**(ii)** Activity	**(iii)** Did fundraiser have custody or control of contributions? Yes	No	**(iv)** Gross receipts from activity	**(v)** Amount paid to (or retained by) fundraiser listed in col **(i)**	**(vi)** Amount paid to (or retained by) organization
1							
2							
3							
4							
5							
6							
7							
8							
9							
10							
Total . . . . ▶							

3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing

Part II **Fundraising Events.** Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than $15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than $5,000.

		(a) Event #1 BENEFIT (event type)	(b) Event #2 BOOKFAIR (event type)	(c) Other events 3 (total number)	(d) Total events (add col (a) through col (c))
Revenue	1 Gross receipts	1,080,589	58,926	229,508	1,369,023
	2 Less Contributions	543,587		40,435	584,022
	3 Gross income (line 1 minus line 2)	537,002	58,926	189,073	785,001
Direct Expenses	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs	74,319			74,319
	7 Food and beverages	90,225	193	4,798	95,216
	8 Entertainment	210,679	500	20,915	232,094
	9 Other direct expenses	72,841	46,788	128,196	247,825
	10 Direct expense summary Add lines 4 through 9 in column (d) ▶				(649,454)
	11 Net income summary Subtract line 10 from line 3, column (d) ▶				135,547

Part III **Gaming.** Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than $15,000 on Form 990-EZ, line 6a.

		(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
Revenue	1 Gross revenue				
Direct Expenses	2 Cash prizes				
	3 Non-cash prizes				
	4 Rent/facility costs				
	5 Other direct expenses				
	6 Volunteer labor	☐ Yes ____ % ☐ No	☐ Yes ____ % ☐ No	☐ Yes ____ % ☐ No	
	7 Direct expense summary Add lines 2 through 5 in column (d) ▶				
	8 Net gaming income summary Subtract line 7 from line 1, column (d) ▶				

9 Enter the state(s) in which the organization operates gaming activities ____________

a Is the organization licensed to operate gaming activities in each of these states? ☐ Yes ☐ No

b If "No," explain ____________

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? ☐ Yes ☐ No

b If "Yes," explain ____________

11 Does the organization operate gaming activities with nonmembers? . . . . ☐ Yes ☐ No

12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? . . . . ☐ Yes ☐ No

13 Indicate the percentage of gaming activity operated in

a	The organization's facility	13a	%
b	An outside facility	13b	%

14 Enter the name and address of the person who prepares the organization's gaming/special events books and records

Name ▶

Address ▶

15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? . . . . ☐ Yes ☐ No

b If "Yes," enter the amount of gaming revenue received by the organization ▶ $ ________ and the amount of gaming revenue retained by the third party ▶ $ ________

c If "Yes," enter name and address of the third party

Name ▶

Address ▶

16 Gaming manager information

Name ▶

Gaming manager compensation ▶ $

Description of services provided ▶

☐ Director/officer ☐ Employee ☐ Independent contractor

17 Mandatory distributions

a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? . . . . ☐ Yes ☐ No

b Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ $

Part IV **Supplemental Information.** Provide the explanations required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provide any additional information (see instructions).

Return Reference	Explanation

Schedule I (Form 990)

Department of the Treasury
Internal Revenue Service

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

OMB No 1545-0047

2013

Open to Public Inspection

Name of the organization
BRUNSWICK SCHOOL INC

Employer identification number
06-0646562

Part I General Information on Grants and Assistance

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? . . . ☑ **Yes** ☐ **No**

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Part II Grants and Other Assistance to Governments and Organizations in the United States.

Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance

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

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

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

(a) Type of grant or assistance	**(b)** Number of recipients	**(c)** Amount of cash grant	**(d)** Amount of non-cash assistance	**(e)** Method of valuation (book, FMV, appraisal, other)	**(f)** Description of non-cash assistance
(1) FINANCIAL AID	165	5,303,750			

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**
PART I, LINE 2	THE SCHOOL GRANTS FINANCIAL AID AWARDS TO STUDENTS WHO DEMONSTRATE FINANCIAL NEED STUDENTS SEEKING AID ARE REQUIRED TO COMPLETE THE SCHOOL AND STUDENT SERVICES FOR FINANCIAL AID (SSS) APPLICATION THE SCHOOL USES THE ANALYSIS OF SSS IN DETERMINING THE AMOUNT OF EACH STUDENT'S FINANCIAL AID AWARD THE STUDENT'S TUITION BILL IS REDUCED BY THE AMOUNT OF THE FINANCIAL AID AWARDED THE SCHOOL GRANTS TUITION REMISSION TO STUDENTS OF FULL-TIME FACULTY AND ADMINISTRATORS WHO DEMONSTRATE FINANCIAL NEED

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Schedule J (Form 990)

Department of the Treasury
Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees
▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 23.
▶ Attach to Form 990. ▶ See separate instructions.
▶ Information about Schedule J (Form 990) and its instructions is at *www.irs.gov/form990*.

OMB No 1545-0047

2013

Open to Public Inspection

Name of the organization
BRUNSWICK SCHOOL INC

Employer identification number
06-0646562

Part I Questions Regarding Compensation

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

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

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

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported as deferred in prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1)MR THOMAS W PHILIP HEADMASTER	(i)	350,508	50,000	23,348	193,150	128,572	745,578	0
	(ii)	0	0	0	0	0	0	0
(2)MS KATHLEEN HARRINGTON CFO	(i)	153,335	0	276	19,389	18,165	191,165	0
	(ii)	0	0	0	0	0	0	0
(3)MR THOMAS MURRAY DIRECTOR OF DEVELOPMENT	(i)	210,976	0	18,120	21,799	70,769	321,664	0
	(ii)	0	0	0	0	0	0	0
(4)MR TIMOTHY F OSTRYE DIRECTOR OF ATHLETICS	(i)	148,062	0	792	19,171	18,328	186,353	0
	(ii)	0	0	0	0	0	0	0
(5)MR SUNIL GUPTA DIRECTOR OF TECHNOLOGY	(i)	151,600	0	18,276	19,013	21,518	210,407	0
	(ii)	0	0	0	0	0	0	0
(6)MR ANDREW HALL CHAIR OF VISUAL & PERFORMI	(i)	138,446	0	13,076	18,776	42,883	213,181	0
	(ii)	0	0	0	0	0	0	0
(7)MR DOUGLAS BURDETT DIRECTOR OF COLLEGE GUIDAN	(i)	146,752	0	18,180	34,067	71,742	270,741	0
	(ii)	0	0	0	0	0	0	0
(8)MR STEPHEN DUENNEBIER ASS'T HEAD US DIR STUDENT	(i)	131,530	0	13,592	18,113	26,469	189,704	0
	(ii)	0	0	0	0	0	0	0
(9)MR STEVEN H DUDLEY ASS'T HEAD/ DIRECTOR FINANCE UNTIL 5/13	(i)	109,338	0	417,534	5,642	18,134	550,648	265,450
	(ii)	0	0	0	0	0	0	0

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
PART I, LINE 1A	HOUSING IS PROVIDED TO THE HEADMASTER AS HE IS REQUIRED TO LIVE ON CAMPUS THE HOUSING BENEFIT IS PART OF HIS NON-TAXABLE COMPENSATION TOTALING $80,000 THIS AMOUNT IS INCLUDED IN SCHEDULE J, PART II, COLUMN (D) THE FOLLOWING EMPLOYEES RECEIVED A TAXABLE HOUSING BENEFIT THESE AMOUNTS WERE INCLUDED IN THE FORM 990, BOX 5 AND REPORTED ON SCHEDULE J, PART II, COLUMN (B)(III) - STEVEN H DUDLEY $5,617 - THOMAS MURRAY $18,000 - SUNIL GUPTA $18,000 - ANDREW HALL $12,800 - DOUGLAS BURDETT $18,000 - STEPHEN DUENNBIER $12,800
PART I, LINES 4A-B	LINE 4A SEVERANCE PAYMENT PER THE TERM AND CONDITION OF THE FORMER ASSISTANT HEAD/DIRECTOR OF FINANCE'S SEVERANCE AGREEMENT, CONFIDENTIALITY AGREEMENT, AND GENERAL RELEASE OF CLAIMS DATED JUNE 1, 2013, THE SCHOOL PAID A SEVERANCE PAYMENT TO THE FORMER ASSISTANT HEAD/DIRECTOR OF FINANCE IN THE AMOUNT OF $145,833 THIS PAYMENT WAS TREATED AS TAXABLE COMPENSATION TO THE RECIPIENT THIS AMOUNT WAS INCLUDED IN THE FORM 990, BOX 5 AND REPORTED ON SCHEDULE J, PART II, COLUMN (B)(III) LINE 4B NONQUALIFIED RETIREMENT PLAN - THE SCHOOL MAINTAINS A 457(F) DEFERRED COMPENSATION PLAN IN WHICH CERTAIN SENIOR EXECUTIVES PARTICIPATE FUNDED AMOUNTS ARE SUBJECT TO A SUBSTANTIAL RISK OF FORFEITURE THOMAS W PHILIP AND DOUGLAS BURDETT PARTICIPATED IN A SUPPLEMENTAL NONQUALIFIED RETIREMENT FUND 457(F) AND RECEIVED A FUNDING TO THEIR DEFERRED COMPENSATION UNDER A 457(F) PLAN IN THE AMOUNT OF $160,000 AND $15,000, ACCORDINGLY THESE AMOUNTS ARE REPORTED ON SCHEDULE J, PART II, COLUMN (C) THOMAS W PHILIP RECEIVED FUNDING/CONTRIBUTION TO HIS DEFERRED COMPENSATION UNDER 457(B) PLAN TOTALING $17,500 THIS AMOUNT IS TAXABLE, INCLUDED IN HIS 2013 FORM W-2, BOX 5 AND IS REPORTED AS TAXABLE COMPENSATION ON SCHEDULE J, PART III, COLUMN B(III) STEVEN H DUDLEY RECEIVED A PAYMENT - DISTRIBUTION FROM 457(F) PLAN TOTALING $265,450 THIS AMOUNT IS TAXABLE, INCLUDED IN HIS 2013 FORM W-2, BOX 5 AND IS REPORTED AS TAXABLE COMPENSATION ON SCHEDULE J, PART III, COLUMN B(III) AND IN COLUMN (F) AS COMPENSATION REPORTED AS DEFERRED IN PRIOR FORM 990
PART I, LINE 7	THE HEADMASTER OF THE SCHOOL, THOMAS W PHILIP RECEIVED A BONUS OF $50,000 FROM THE ORGANIZATION THE BONUS WAS BASED ON THE DISCRETION OF THE COMPENSATION COMMITTEE OF THE BOARD OF DIRECTORS THE BONUS WAS BASED UPON A REVIEW OF THE HEADMASTER'S PERFORMANCE, AND APPROVED BY THE COMPENSATION COMMITTEE PRIOR TO BEING AWARDED
SCHEDULE J, PART II COLUMN D	NONTAXABLE BENEFITS INCLUDE CONTRIBUTIONS TO EMPLOYEE HEALTH AND OTHER BENEFIT PLANS FOR ALL EMPLOYEES, AND TUITION BENEFITS FOR EMPLOYEES WITH CHILDREN ATTENDING PRE-K THROUGH TWELFTH GRADE

Additional Data

Software ID:
Software Version:
EIN: 06-0646562
Name: BRUNSWICK SCHOOL INC

Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
		(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) Other compensation				
MR THOMAS W PHILIP HEADMASTER	(i) (ii)	350,508 0	50,000 0	23,348 0	193,150 0	128,572 0	745,578 0	0 0
MS KATHLEEN HARRINGTON CFO	(i) (ii)	153,335 0	0 0	276 0	19,389 0	18,165 0	191,165 0	0 0
MR THOMAS MURRAY DIRECTOR OF DEVELOPMENT	(i) (ii)	210,976 0	0 0	18,120 0	21,799 0	70,769 0	321,664 0	0 0
MR TIMOTHY F OSTRYE DIRECTOR OF ATHLETICS	(i) (ii)	148,062 0	0 0	792 0	19,171 0	18,328 0	186,353 0	0 0
MR SUNIL GUPTA DIRECTOR OF TECHNOLOGY	(i) (ii)	151,600 0	0 0	18,276 0	19,013 0	21,518 0	210,407 0	0 0
MR ANDREW HALL CHAIR OF VISUAL & PERFORMI	(i) (ii)	138,446 0	0 0	13,076 0	18,776 0	42,883 0	213,181 0	0 0
MR DOUGLAS BURDETT DIRECTOR OF COLLEGE GUIDAN	(i) (ii)	146,752 0	0 0	18,180 0	34,067 0	71,742 0	270,741 0	0 0
MR STEPHEN DUENNEBIER ASS'T HEAD US DIR STUDENT	(i) (ii)	131,530 0	0 0	13,592 0	18,113 0	26,469 0	189,704 0	0 0
MR STEVEN H DUDLEY ASS'T HEAD/ DIRECTOR FINANCE UNTIL 5/13	(i) (ii)	109,338 0	0 0	417,534 0	5,642 0	18,134 0	550,648 0	265,450 0

Schedule K (Form 990)

Department of the Treasury
Internal Revenue Service

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*.

OMB No 1545-0047

2013

Open to Public Inspection

Name of the organization
BRUNSWICK SCHOOL INC

Employer identification number
06-0646562

Part I Bond Issues

	(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue price	(f) Description of purpose	(g) Defeased Yes	(g) Defeased No	(h) On behalf of issuer Yes	(h) On behalf of issuer No	(i) Pool financing Yes	(i) Pool financing No
A	STATE OF CT HEALTH AND EDUCATIONAL FACILITIES AUTHOR	06-0806186	20774LZV0	03-29-2012	38,470,000	BOND REFINANCING	X		X			X

Part II Proceeds

		A	B	C	D
1	Amount of bonds retired				
2	Amount of bonds legally defeased	40,325,000			
3	Total proceeds of issue	41,990,411			
4	Gross proceeds in reserve funds				
5	Capitalized interest from proceeds				
6	Proceeds in refunding escrows	41,903,852			
7	Issuance costs from proceeds	576,414			
8	Credit enhancement from proceeds				
9	Working capital expenditures from proceeds				
10	Capital expenditures from proceeds				
11	Other spent proceeds				
12	Other unspent proceeds				
13	Year of substantial completion	2005			

		A Yes	A No	B Yes	B No	C Yes	C No	D Yes	D No
14	Were the bonds issued as part of a current refunding issue?	X							
15	Were the bonds issued as part of an advance refunding issue?	X							
16	Has the final allocation of proceeds been made?	X							
17	Does the organization maintain adequate books and records to support the final allocation of proceeds?	X							

Part III Private Business Use

		A Yes	A No	B Yes	B No	C Yes	C No	D Yes	D No
1	Was the organization a partner in a partnership, or a member of an LLC, which owned property financed by tax-exempt bonds?		X						
2	Are there any lease arrangements that may result in private business use of bond-financed property?		X						

Part III Private Business Use *(Continued)*

		A		B		C		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?		X						
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?								
c	Are there any research agreements that may result in private business use of bond-financed property?		X						
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?		X						
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?		X						
b	If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of								
c	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?	X							

Part IV Arbitrage

		A		B		C		D	
		Yes	No	Yes	No	Yes	No	Yes	No
1	Has the issuer filed Form 8038-T?		X						
2	If "No" to line 1, did the following apply?								
a	Rebate not due yet?	X							
b	Exception to rebate?	X							
c	No rebate due?		X						
	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								
c	Term of hedge								
d	Was the hedge superintegrated?								
e	Was the hedge terminated?								

Part IV Arbitrage *(Continued)*

		A		B		C		D	
		Yes	No	Yes	No	Yes	No	Yes	No
5a	Were gross proceeds invested in a guaranteed investment contract (GIC)?		X						
b	Name of provider								
c	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?		X						
7	Has the organization established written procedures to monitor the requirements of section 148?		X						

Part V Procedures To Undertake Corrective Action

	A		B		C		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?		X						

Part VI Supplemental Information. Provide additional information for responses to questions on Schedule K (see instructions).

Return Reference	Explanation
SCHEDULE K, PART II, LINE 3	TOTAL PROCEEDS OF ISSUE INCLUDES THE ISSUE PRICE IN THE AMOUNT OF $38,470,000 (PART I, LINE A, COLUMN (E)) PLUS INVESTOR'S PAID A $3,520,411 PREMIUM FOR THE NEW BONDS TOTAL PROCEED IS $41,990,411

SCHEDULE M
(Form 990)

Department of the Treasury
Internal Revenue Service

Noncash Contributions

▶Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.
▶ Attach to Form 990.
▶Information about Schedule M (Form 990) and its instructions is at *www.irs.gov/form990*.

OMB No 1545-0047

2013

Open to Public Inspection

Name of the organization
BRUNSWICK SCHOOL INC

Employer identification number
06-0646562

Part I **Types of Property**

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art—Works of art				
2 Art—Historical treasures				
3 Art—Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities—Publicly traded	X	79	1,461,199	FMV AT TIME OF DONATION
10 Securities—Closely held stock				
11 Securities—Partnership, LLC, or trust interests				
12 Securities—Miscellaneous				
13 Qualified conservation contribution—Historic structures				
14 Qualified conservation contribution—Other				
15 Real estate—Residential				
16 Real estate—Commercial				
17 Real estate—Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ▶ (____________)				
26 Other ▶(____________)				
27 Other ▶(____________)				
28 Other ▶ (____________)				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement . . . | 29 |

			Yes	No
30a	During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?	30a		No
b	If "Yes," describe the arrangement in Part II			
31	Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?	31	Yes	
32a	Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?	32a		No
b	If "Yes," describe in Part II			
33	If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II			

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

Return Reference	Explanation
PART I, COLUMN (B)	THE ORGANIZATION IS REPORTING THE NUMBER OF CONTRIBUTIONS IN PART 1, COLUMN (B) OF SCHEDULE M

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SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.
▶ Attach to Form 990 or 990-EZ.
▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2013

Open to Public Inspection

Name of the organization	Employer identification number
BRUNSWICK SCHOOL INC	06-0646562

Return Reference	Explanation
FORM 990, PART III, LINE 1	BRUNSWICK SCHOOL, INC (THE SCHOOL) IS A NOT FOR PROFIT DAY SCHOOL, FOUNDED IN 1902, FOR BOYS IN PRE KINDERGARTEN THROUGH TWELFTH GRADE THE SCHOOL, WHICH IS LOCATED IN GREENWICH, CONNECTICUT, IS EXEMPT FROM INCOME TAX UNDER SECTION 501(C)(3) OF THE U S INTERNAL REVENUE CODE THE PURPOSE OF THE SCHOOL IS TO EDUCATE THE "WHOLE BOY" IT WILL DO SO BY HELPING BOYS AND YOUNG MEN - WITHOUT REGARD TO CULTURE, ETHNICITY OR RELIGION - ACQUIRE THE PERSONAL, INTELLECTUAL AND PHYSICAL TRAINING THAT WILL BEST ENABLE THEM TO GROW INTO RESPONSIBLE ADULTS WHO CAN MAKE SIGNIFICANT AND LASTING CONTRIBUTIONS TO SOCIETY SINCE 1902, BRUNSWICK SCHOOL HAS BEEN, IN THE WORDS OF GEORGE CARMICHAEL, ITS FOUNDER, "ABLY AND GENEROUSLY PREPARING BOYS FOR LIFE" THROUGH A RICH AND RIGOROUS COLLEGE PREPARATORY CURRICULUM, THE SCHOOL STRIVES FOR THE FULLEST INTELLECTUAL DEVELOPMENT OF EVERY YOUNG MAN THE SCHOOL'S ACADEMIC PROGRAMS SEEK TO INSTILL IN EACH STUDENT A DESIRE TO LEARN, TO CHALLENGE EACH BOY TO FULFILL HIS OWN UNIQUE POTENTIAL, TO FOSTER CRITICAL THINKING SKILLS AND TO DEVELOP THE CREATIVE AND INDEPENDENT QUALITIES OF MIND NECESSARY TO INTELLECTUAL MATURITY AND INCREASED SELF-CONFIDENCE THE SCHOOL ALSO BELIEVES THAT A COMPLETE EDUCATION MUST INCLUDE LESSONS THAT TAKE PLACE OUTSIDE THE CLASSROOM THROUGH ATHLETICS, ARTS AND SERVICE TO THE COMMUNITY, EVERY STUDENT IS ENCOURAGED TO DEVELOP HIS TALENTS TO THE FULLEST, TO UNDERSTAND THE OBLIGATION TO SHARE THEM GENEROUSLY, TO TAKE RISKS TO ENSURE GROWTH AND TO REFUSE TO ACCEPT NARROW DEFINITION OF HIMSELF AND AS ITS YOUNG MEN GROW IN AN ATMOSPHERE OF TRUST, CARE AND MUTUAL RESPECT, THE SCHOOL ACCEPTS THAT ITS OVERRIDING OBJECTIVE IS TO FOSTER THE DEVELOPMENT OF STRONG CHARACTER THE SCHOOL STRIVES TO INSTILL IN ITS STUDENTS THE VALUES OF HONESTY, INTEGRITY, COMPASSION AND TOLERANCE AND TO DEVELOP IN EACH STUDENT A SENSE OF RESPONSIBILITY TO HIMSELF, TO THOSE AROUND HIM, TO THE SCHOOL COMMUNITY AND TO THE GREATER SOCIETY THE SCHOOL BELIEVES, ABOVE ALL ELSE, THAT IT IS THE STRENGTH OF A YOUNG MAN'S CHARACTER AND THE DEPTH OF HIS SPIRIT THAT DETERMINE AND DEFINE ALL GENUINE AND LASTING SUCCESS

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 2	THE FOLLOWING ARE THE OFFICERS, DIRECTORS, TRUSTEES, OR KEY EMPLOYEES OF THE SCHOOL THAT HAVE A FAMILY RELATIONSHIP OR A BUSINESS RELATIONSHIP WITH ANOTHER OFFICER, DIRECTOR, TRUSTEE, OR KEY EMPLOYEE. BUSINESS RELATIONSHIP EXISTS BETWEEN MR SANJEEV K MEHRA AND MR STEPHEN R PIERCE.

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11	THE TREASURER OF THE BOARD OF TRUSTEES WILL REVIEW THE ANNUAL FORM 990 RETURN PRIOR TO FILING THIS REVIEW WILL BE NOTED AS AN AGENDA ITEM AT BOTH AN AUDIT/FINANCE COMMITTEE MEETING AND A BOARD OF TRUSTEE MEETING AND WILL BE DULY NOTED IN THE MINUTES THE COMPLETED FORM 990 WILL BE MADE AVAILABLE TO ALL MEMBERS OF THE BOARD OF TRUSTEES THE BOARD OF TRUSTEES RECEIVES A COPY OF THE FORM 990 EITHER ELECTRONICALLY OR IN PAPER FORM, PER THEIR REQUEST OF THE BUSINESS OFFICE OR TREASURER

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 12C	EACH NEW PERSON SERVING AS A TRUSTEE, OFFICER OR KEY EMPLOYEE OF BRUNSWICK SCHOOL IS REQUIRED TO REVIEW A COPY OF THE CONFLICT OF INTEREST POLICY AND TO ACKNOWLEDGE IN WRITING THAT HE OR SHE HAS DONE SO EACH PERSON SERVING AS A TRUSTEE, OFFICER OR KEY EMPLOYEE OF BRUNSWICK SCHOOL SHALL ANNUALLY COMPLETE THE CONFLICT OF INTEREST DISCLOSURE FORM, IDENTIFYING ANY RELATIONSHIPS, POSITIONS OR CIRCUMSTANCES IN WHICH THE PERSON AND/OR HIS OR HER IMMEDIATE FAMILY IS INVOLVED THAT HE OR SHE BELIEVES COULD GIVE RISE TO A CONFLICT OF INTEREST THE CHAIR OF THE BOARD OF TRUSTEES AND THE HEADMASTER SHALL REVIEW EACH DISCLOSURE FORM AND DETERMINE IF A CONFLICT EXISTS IF A CONFLICT OF INTEREST IS DETERMINED TO EXIST IT SHALL BE DISCLOSED TO THE BOARD OF TRUSTEES, OR ITS AUDIT AND FINANCE COMMITTEE, AND MADE A MATTER OF RECORD THROUGH AN APPROVED PROCEDURE THE PRIOR APPROVAL OF THE BOARD OF TRUSTEES OR AUDIT AND FINANCE COMMITTEE SHALL BE REQUIRED FOR ANY BUSINESS ARRANGEMENT OR TRANSACTION INVOLVING A TRUSTEE OR KEY EMPLOYEE WHICH MAY CONSTITUTE A CONFLICT OF INTEREST APPROVAL SHALL BE GRANTED ONLY IF THE ARRANGEMENT OR TRANSACTION IS FULLY DISCLOSED AND IS DETERMINED TO BE ON TERMS WHICH ARE FAIR TO AND IN THE BEST INTERESTS OF BRUNSWICK SCHOOL ANY TRUSTEE HAVING A CONFLICT OF INTEREST SHALL NOT VOTE OR USE HIS OR HER PERSONAL INFLUENCE ON THE MATTER, AND SHALL NOT BE COUNTED IN DETERMINING THE QUORUM FOR THE BOARD OR COMMITTEE MEETING

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 15	THE COMPENSATION COMMITTEE OF THE BOARD OF TRUSTEES (COMPRISED OF TRUSTEES WITH NO CONFLICT OF INTEREST WITH REGARD TO INDIVIDUALS UNDER REVIEW) HIRES A CONSULTANT EVERY OTHER YEAR TO REVIEW COMPARABLE PACKAGES FOR THE HEADMASTER AND ASSISTANT HEADMASTER/DIRECTOR OF FINANCE THE CONSULTANT PRESENTS DATA FOR COMPARABLE POSITIONS BOTH LOCALLY AND NATIONALLY AND THE COMPENSATION COMMITTEE MAKES THE FINAL DECISION FOR THE SALARY PACKAGE OVER THE 2-YEAR TIME FRAME, ASSUMING CONTINUATION OF EMPLOYMENT THIS PROCESS WAS LAST UNDERTAKEN IN 2014 THE HEADMASTER DETERMINES THE COMPENSATION OF KEY EMPLOYEES BASED ON EXPERIENCE, CURRENT PERFORMANCE AND COMPARABLE LOCAL AND NATIONAL POSITIONS USING FAIRCHESTER AND NAIS STATISTICS

Return Reference	Explanation
FORM 990, PART VI, SECTION C, LINE 19	THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, & FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST ALSO, THE FEDERAL FORM 990 WHICH INCLUDES FINANCIAL AND OTHER DISCLOSURES IS AVAILABLE ON GUIDESTAR

Return Reference	Explanation
FORM 990, PART XII, LINE 2C	THE ORGANIZATION HAS A COMMITTEE THAT ASSUMES RESPONSIBILITY FOR OVERSIGHT OF THE AUDIT OF ITS FINANCIAL STATEMENTS AND SELECTION OF AN INDEPENDENT ACCOUNTANT THIS PROCESS DID NOT CHANGE FROM THE PRIOR YEAR

Return Reference	Explanation
SCHEDULE M, LINE 31	THE SCHOOL EMPLOYS A GIFT ACCEPTANCE POLICY THAT ASSURES COMPLETE, ACCURATE AND CONSISTENT REPORTING OF GIFTS AND PLEDGES, COMPLIES WITH INTERNAL REVENUE SERVICE REGULATIONS AND ACCEPTABLE BUSINESS PRACTICES, PROTECTS THE SCHOOL'S REPUTATION AND TAX EXEMPT STATUS AND UPHOLDS ETHICAL GIVING STANDARDS AND AVOIDS REAL OR PERCEIVED CONFLICTS OF INTEREST THE POLICY APPLIES TO THE DEVELOPMENT OFFICE STAFF AND ALL OTHER PERSONS INVOLVED IN SOLICITING, DOCUMENTING, ADMINISTERING, AND ACKNOWLEDGING GIFTS MADE FOR THE BENEFIT OF BRUNSWICK SCHOOL THE POLICY IS DESIGNED TO ENSURE THAT DONORS FIND THE PROCESS OF GIVING EASY, UNDERSTANDABLE, AND CONSISTENT, THAT GIFTS ARE APPROPRIATE TO THE MISSION AND PRIORITIES OF THE SCHOOL, THAT NO GIFTS IMPOSE UNANTICIPATED FINANCIAL BURDENS ON THE SCHOOL, AND THAT IF GIFTS ARE RESTRICTED OR INTENDED FOR LONG-TERM USE, DOCUMENTATION OF THE PURPOSE FULFILLMENT IS MAINTAINED AND COMMUNICATED TO THE DONOR

SCHEDULE R (Form 990)

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.
▶ Attach to Form 990. ▶ See separate instructions.
▶ Information about Schedule R (Form 990) and its instructions is at *www.irs.gov/form990*.

OMB No 1545-0047

2013

Open to Public Inspection

Name of the organization
BRUNSWICK SCHOOL INC

Employer identification number
06-0646562

Part I **Identification of Disregarded Entities** Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
(1) BRUNSWICK SCHOOL HOLDINGS LLC 25 PATTERSON AVENUE GREENWICH, CT 068305618 06-0646562	FACULTY HOUSING	CT	14,760	2,099,186	BRUNSWICK SCHOOL INC
(2) BRUNSWICK SCHOOL HOLDINGS I LLC 151 RIVER RD GREENWICH, CT 068305618 06-0646562	ATHLETIC FACILITY	CT	42,000	3,122,467	BRUNSWICK SCHOOL INC
(3) BRUNSWICK SCHOOL HOLDINGS II LLC 9 RIVERSVILLE RD GREENWICH, CT 068305618 06-0646562	FACULTY HOUSING	CT	69,360	5,850,157	BRUNSWICK SCHOOL INC
(4) BRUNSWICK SHERWOOD HOLDINGS LLC SHERWOOD PLACE GREENWICH, CT 068305618 06-0646562	FACULTY HOUSING	CT	111,600	6,018,788	BRUNSWICK SCHOOL INC
(5) BRUNSWICK 81 NORTHFIELD LLC 81 NORTHFIELD STREET GREENWICH, CT 068305618 06-0646562	FACULTY HOUSING	CT	0	762,288	BRUNSWICK SCHOOL INC

Part II **Identification of Related Tax-Exempt Organizations** Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity? Yes	No

Part III **Identification of Related Organizations Taxable as a Partnership** Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtionate allocations? Yes	(h) No	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner? Yes	(j) No	(k) Percentage ownership

Part IV **Identification of Related Organizations Taxable as a Corporation or Trust** Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512 (b)(13) controlled entity? Yes	(i) No

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

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule

		Yes	No
1 During the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
a Receipt of **(i)** interest **(ii)** annuities **(iii)** royalties or **(iv)** rent from a controlled entity	1a		
b Gift, grant, or capital contribution to related organization(s)	1b		
c Gift, grant, or capital contribution from related organization(s)	1c		
d Loans or loan guarantees to or for related organization(s)	1d		
e Loans or loan guarantees by related organization(s)	1e		
f Dividends from related organization(s)	1f		
g Sale of assets to related organization(s)	1g		
h Purchase of assets from related organization(s)	1h		
i Exchange of assets with related organization(s)	1i		
j Lease of facilities, equipment, or other assets to related organization(s)	1j		
k Lease of facilities, equipment, or other assets from related organization(s)	1k		
l Performance of services or membership or fundraising solicitations for related organization(s)	1l		
m Performance of services or membership or fundraising solicitations by related organization(s)	1m		
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n		
o Sharing of paid employees with related organization(s)	1o		
p Reimbursement paid to related organization(s) for expenses	1p		
q Reimbursement paid by related organization(s) for expenses	1q		
r Other transfer of cash or property to related organization(s)	1r		
s Other transfer of cash or property from related organization(s)	1s		

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved

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

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization See instructions regarding exclusion for certain investment partnerships

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(e) Are all partners section 501(c)(3) organizations?		(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtionate allocations?		(i) Code V?UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
				Yes	No			Yes	No		Yes	No	

Part VII **Supplemental Information**

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

Return Reference	Explanation