DLN: 93493135137898 OMB No 1545-0047 Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private

2016

foundations)

▶ Do not enter social security numbers on this form as it may be made public Open to Public Department of the Treasury ▶ Information about Form 990 and its instructions is at www.irs.gov/form990 Inspection Internal Revenue Service For the 2016 calendar year, or tax year beginning 07-01-2016 , and ending 06-30-2017 C Name of organization BRUNSWICK SCHOOL INC D Employer identification number B Check if applicable ☐ Address change 06-0646562 ☐ Name change Doing business as ☐ Initial return Fınal ☐eturn/terminated E Telephone number Number and street (or P O box if mail is not delivered to street address) Room/suite ☐ Amended return 100 MAHER AVENUE (203) 625-5815 ☐ Application pending City or town, state or province, country, and ZIP or foreign postal code GREENWICH, CT $\,$ 068305618 $\,$ **G** Gross receipts \$ 69,230,603 Name and address of principal officer **H(a)** Is this a group return for Kathleen Harrington ☐Yes **☑**No subordinates? 100 MAHER AVENUE H(b) Are all subordinates GREENWICH, CT 068305618 ☐ Yes ☐No included? Tax-exempt status **☑** 501(c)(3) ☐ 501(c)() **◄** (Insert no) 4947(a)(1) or If "No," attach a list (see instructions) **H(c)** Group exemption number ▶ Website: ► WWW BRUNSWICKSCHOOL ORG L Year of formation 1932 M State of legal domicile CT Summary 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 Activities & Governance colleges and universities Brunswick School holds long-standing accreditation by the New England Association of Schools and Colleges Check this box $\blacktriangleright \sqcup$ if the organization discontinued its operations or disposed of more than 25% of its net assets Number of voting members of the governing body (Part VI, line 1a) . . . 3 30 Number of independent voting members of the governing body (Part VI, line 1b) 4 30 Total number of individuals employed in calendar year 2016 (Part V, line 2a) 5 339 Total number of volunteers (estimate if necessary) 6 300 Total unrelated business revenue from Part VIII, column (C), line 12 30.230 **b** Net unrelated business taxable income from Form 990-T, line 34 7h 16,101 **Current Year** 15,755,291 14,126,359 8 Contributions and grants (Part VIII, line 1h) . Program service revenue (Part VIII, line 2g) . 36,973,784 38,822,594 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 1,977,654 2,490,422 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 384,989 881,422 55,091,718 56,320,797 12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) Grants and similar amounts paid (Part IX, column (A), lines 1–3) . . 5,493,762 5,561,790 **14** Benefits paid to or for members (Part IX, column (A), line 4) . . . 25,686,860 26.883.909 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10) 16a Professional fundraising fees (Part IX, column (A), line 11e) . **b** Total fundraising expenses (Part IX, column (D), line 25) ▶2,126,168 15,747,226 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) . 14,458,319 45,638,941 48,192,925 Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25) 9,452,777 8,127,872 Revenue less expenses Subtract line 18 from line 12 . Net Assets or Fund Balances End of Year **Beginning of Current Year** 304,821,093 323,459,600 20 Total assets (Part X, line 16) . Total liabilities (Part X, line 26) . 60,757,838 59.694.199 262,701,762 Net assets or fund balances Subtract line 21 from line 20 245,126,894 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 2018-05-15 Signature of officer Sian Here Kathleen Harrington Chief Financial officer Type or print name and title Print/Type preparer's name Garrett M Higgins Preparer's signature Garrett M Higgins Date 2018-05-15 Check \square if P00543209 Paid self-employed Firm's EIN ▶ 27-1728945 Firm's name PKF O'Connor Davies LLP **Preparer**

May the IRS discuss this return with the preparer shown above? (see instructions) For Paperwork Reduction Act Notice, see the separate instructions.

New York, NY 10022

Firm's address ▶ 665 Fifth Avenue

Use Only

Phone no (212) 286-2600

not listed on program	☐ Yes ☑ No ☐ Yes ☑ No
not listed on	☐ Yes ☑ No ☐ Yes ☑ No ☐ Yes ☑ No
not listed on	☐ Yes ☑ No ☐ Yes ☑ No sured by expenses
orogram	☐ Yes ☑ No
orogram	☐ Yes ☑ No
orogram	☐ Yes ☑ No
ogram services, as meas	☐ Yes ☑ No
ogram services, as meas	sured by expenses
ogram services, as meas	sured by expenses
	sured by expenses
nd allocations to others,	trie total
61,790) (Revenue \$	38,294,635)
) (Revenue \$	527,959)
) (Revenue \$	237,853)
enue \$)
chac y	
,	

Section 501(c)(3) organizations.

or X as applicable

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11c

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12a

12b

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14a

14b

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18

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Yes

Yes

Yes

Yes

Yes

Yes

Yes

Yes

Yes

Page 3

No

Nο

Par	t IV Checklist of Required Schedules		
			Yes
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A 2	1	Yes
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 뉯	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	

Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year?

Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right

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

Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments,

c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its

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

Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D. Part X 🔧

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 🛸

If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 🐒

Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to

Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,

Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII,

Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "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

permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 🕏 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX,

5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,

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 🛸 . . . Did the organization maintain collections of works of art, historical treasures, or other similar assets?

assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 💆

to provide advice on the distribution or investment of amounts in such funds or accounts?

a Did the organization report an amount for land, buildings, and equipment in Part X, line 10?

12a Did the organization obtain separate, independent audited financial statements for the tax year?

foreign organization? If "Yes," complete Schedule F, Parts II and IV

or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV . . .

Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E

14a Did the organization maintain an office, employees, or agents outside of the United States?

column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)

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 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any

b Was the organization included in consolidated, independent audited financial statements for the tax year?

assessments, or similar amounts as defined in Revenue Procedure 98-19?

Nο Nο No

Νo

Nο

Nο

Nο

Nο

No

Nο

Nο

Νo

Νo

Nο

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No

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Part IV	Checklist of Required Schedules (continued)
202 Did #	se organization operate one or more hospital facilities? If "

25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.

instructions for applicable filing thresholds, conditions, and exceptions)

	•	•	,	
				ľ

20a
20b

Yes

Nο

20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H . . . b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?

Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic 21 government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II

22 Yes Yes

23

Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX. column (A), line 2? If "Yes," complete Schedule I, Parts I and III 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," 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 **b** Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? . . .

c Did the organization maintain an escrow account other than a refunding escrow at any time during the year

d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? . . .

that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?

officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV

301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I 🔧

within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2

is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 🛸

Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?

35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?

a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L,

Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes,"

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?

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

Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV

b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part

An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an

Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M . . . 🥞

Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation

Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections

Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and

b If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity

Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related

Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 197 Note.

Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I .

Yes 24a

Nο Nο Nο

Nο

Nο

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Nο

24b 24c 24d 25a b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and 25b

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28b

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Yes

Yes

Yes

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Par	t 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
	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 115			
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b	.		
С	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	, 2 _b	Yes	
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)	20	165	
За	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 FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)			110
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
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			
·	In 165, to line 5a of 55, and the organization file form 6000-1.	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?	6 a		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).			
а	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	
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7 c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year			
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
	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. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8		
9a	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
	Section 501(c)(7) organizations. Enter			
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b	1		
1	Section 501(c)(12) organizations. Enter	1		
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
2a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			
3	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	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			
С	Enter the amount of reserves on hand]		
4 -	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
4a	bid the organization receive any payments for mason tarning services during the tax year.			

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Part	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O See instructions	"No" respo	nse to l	_
	Check if Schedule O contains a response or note to any line in this Part VI	<u> </u>		✓
Se	ction A. Governing Body and Management			I
1a	Enter the number of voting members of the governing body at the end of the tax year la	30	Yes	No
	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 oth officer, director, trustee, or key employee?	ner 2	Yes	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervior of officers, directors or trustees, or key employees to a management company or other person? .	/ision 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 members of the governing body?	nore 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?	r 7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year the following	r by		
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	. 8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
Sec	ction B. Policies (This Section B requests information about policies not required by the Internal Rev	enue 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, affiliate and branches to ensure their operations are consistent with the organization's exempt purposes?	es, 10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing t form?	the 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 tooflicts?	to 12b	Yes	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? <i>If "Yes," describe in Schedule O how this was done</i>	7 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?	nt		
а	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b	Yes	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	. 16a		No
	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participa in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exemple.			
	status with respect to such arrangements?	16b		
	ction 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 o available for public inspection. Indicate how you made these available. Check all that apply	nly)		
	Own website 🗹 Another's website 🗹 Upon request 🗌 Other (explain in Schedule O)			
	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year			
20	State the name, address, and telephone number of the person who possesses the organization's books and records •Kathleen F Harrington CFO 99 Maher Avenue Greenwich, CT 06830 (203) 625-5815			

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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	
La Complete	e 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

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

(B)

(A)

• 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

(C)

(D)

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

(F)

(E)

52 OAK STREET YONKERS, NY 10701

compensation from the organization ▶ 7

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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	Position (do not check more than one box, unless person competed is both an officer and a from the competed in							om the zation (\	ortable Reportable ensation compensation m the from related eation (W- organizations (*)		ition ited is (W-		
		for related organizations below dotted line)		Institutional Trustee	Officei	Key employee	Highest compensated emptoviee	Former	2/103	99-MISC		2/1099-M	related organizations		
See Additional Data Table															
				<u></u>	<u> </u>	-	_	-			\dashv				
					H	\Box		 			1				
				-	<u> </u>		_				\dashv				
					H			#							
				 	<u> </u>		_	+							
сТ	Sub-Total	art VII, Section	nA.				▶ _ ▶ _			,859,853			0		1,147,766
2	Total number of individuals (including of reportable compensation from the	g but not limited	to thos				a) who) rece	eived mo	ore than	\$100	0,000			·
														Yes	No
3	Did the organization list any former of line 1a? <i>If "Yes," complete Schedule 3</i>	J for such individ	dual .	•	•	•		•			•		3		No
4	For any individual listed on line 1a, is organization and related organization individual	the sum of repositions significantly strength st	ortable o \$150,00	comp 0? If	ensa "Yes	ition ;," c:	and o omplet	other te Sc	compen hedule J	nsation f I for suc	rom h	the 	4	Yes	
5	Did any person listed on line 1a receiv services rendered to the organization								_	ation or	ndıvı •	dual for	5		No
Se	ection B. Independent Contract	ors						_							
1	Complete this table for your five higher from the organization Report comper	est compensate nsation for the c										s tax year	compe		
	Name :	(A) and business addre	ess							D	escrip	(B) otion of servic	es	(C Comper	
	onstruction Company									Construc	tion I	MGT/Contract	ing	2	,634,078
Stamf	Summer Street ford, CT 06901														
199 S	E CONTRACTORS SOUND BEACH AVENUE GREENWICH, CT 06901									SITE WO	RK C	ONTRACTING		2	,634,078
flık co	ompass group									dining se	ervice			1	,789,479
bosto	n, MA 02241 r construction									construc	tion			-	211,408
440 w	vheelers farm road rd, CT 06461											contracting			211,400
EXPER	RT REFRIGERATON COOLING HEATING M									BUILDIN CONTRA		CHANICAL SY	STEMS		188,422
52 OP	AK STREET														

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

Part \	7			resno	onse or note to any l	ine in t	his Part VIII	r				\square
		Crieck ii Scriedal	e o contains a	тезро	onse of note to any i	(A) revenue	Rela ex fui	(B) ated or cempt nction	b	(C) nrelated pusiness revenue	(D) Revenue excluded from tax under sections
	1a	Federated campaig	ns	1a				re	venue			512-514
ants unt	ŀ	b Membership dues		1 b								
3 E	(Fundraising events		1c	215,293							
₹ Ş	(d Related organizatio	ns	1d								
<u>is</u> is	•	e Government grants (c	ontributions)	1e								
Contributions, Gifts, Grants and Other Similar Amounts	f	All other contributions and similar amounts n above	, gıfts, grants, ot ıncluded	1f	13,911,066							
ontrib nd Oth		Noncash contribution in lines 1a-1f \$			<u>,372</u>							
	h	Total.Add lines 1a-1	lf	• •	 Business		,126,359					<u> </u>
표	22	Student Tuition				611710	37 5	504,875	37,50	4 875		
3		AFTER SCHOOL PROGRA	AMS & other fee			611710		789,760		9,760		
<u>ت</u> ئ		SUMMER PROGRAM				611710	5	27,959	52	7,959		
Ę.	d			_								
S E	e			_				+		\dashv		
Program Service Revenue	f	All other program se	rvice revenue									
Ĕ	g.	Total.Add lines 2a-2i	f		▶ 38,8	22,594						
		Investment income (i					346,96:	1			30,230	316,73
		imilar amounts) . Income from investm			ond proceeds >		310,50					310,73
		Royalties										
		·	(ı) Real		(II) Personal							
	6a	Gross rents		CO EEE								
	b	Less rental expenses		60,555 91,018								
	С	Rental income or (loss)	4	69,537								
	d	Net rental income o	r (loss)		• • • •	\	469,53	7				469,53
			(ı) Securit	ıes	(II) Other							
	7a	Gross amount from sales of assets other than inventory	13,3	20,533								
	b	Less cost or other basis and sales expenses	11,1	77,072								
	c	Gain or (loss)	2,1	43,461								
	d	Net gain or (loss)		•	•		2,143,46	1				2,143,46
Other Revenue	8a	Gross income from f (not including \$ contributions reporte See Part IV, line 18	215,293 ed on line 1c)	of	552,896							
Re	b	Less direct expense		b	435,452							
ē	C	Net income or (loss)	from fundrais	ıng ev	ents	<u> </u>	117,44	1				117,44
Ott	9a	Gross income from g See Part IV, line 19		es a								
	b	Less direct expense	s	b								
	С	Net income or (loss)	from gaming	activit	ies •							
:	10a	aGross sales of invent returns and allowand		a	844,117							
	b	Less cost of goods s	sold	b	606,264							
	С	Net income or (loss)		ınvent	tory >		237,85	3	237,853			
		Miscellaneous	Revenue		Business Code		56 50					56.50
	11	a Other revenue			900099		56,588	3				56,58
	b											
	c											
	d	All other revenue .										
	е	Total. Add lines 11a	-11d		•		56,588	3				
	12	Total revenue. See	Instructions						39 060 447		30 220	2 102 74
							56,320,79	′1	39,060,447		30,230	3,103,76

Form 990 (2016)				Page 10
Part IX Statement of Functional Expenses				
Section 501(c)(3) and 501(c)(4) organizations must complete all co	_	·	lete 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) Fundraisingexpenses
Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21				
2 Grants and other assistance to domestic individuals See Part IV, line 22	5,561,790	5,561,790		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, line 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	1,710,372	1,350,862	277,238	82,272
6 Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$				
7 Other salaries and wages	19,639,717	15,357,082	3,317,896	964,739
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)	1,605,668	1,273,607	232,500	99,561
9 Other employee benefits	2,344,895	2,001,059	273,402	70,434
10 Payroll taxes	1,583,257	1,290,418	230,617	62,222
11 Fees for services (non-employees)				
a Management				
b Legal	40,252		40,252	
c Accounting	168,345		168,345	
d Lobbying				
e Professional fundraising services See Part IV, line 17				
f Investment management fees	31,625		31,625	
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	208,605	143,450	65,155	
12 Advertising and promotion	46,229	20,963	10,273	14,993
13 Office expenses	585,601	37,849	384,557	163,195
14 Information technology	84,512		57,163	27,349
15 Royalties				
16 Occupancy	879,985	873,900	5,337	748
17 Travel	286,961	286,961		
18 Payments of travel or entertainment expenses for any federal, state, or local public officials •				
19 Conferences, conventions, and meetings	90,859	74,248	10,499	6,112
20 Interest	1,311,654	1,311,654		
21 Payments to affiliates				

6,879,501

1,397,201

1,345,659

621,654

486,112

963,831

48,192,925

318,640

6,755,868

1,397,201

1,336,354

621,654

154,915

463,049

40,312,884

68,922

318,640

8,161

96,311

156,980

5,753,873

54,711

1,144

234,886

343,802

2,126,168

Form 990 (2016)

22 Depreciation, depletion, and amortization

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

25 Total functional expenses. Add lines 1 through 24e 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)

23 Insurance . . .

a catering

expenses on Schedule O)

b Bldg Maint & contracts

c EDUCATIONAL SUPPLIES

d Dues, fees & Subscripti

e All other expenses

Page **11**

93.081.842

98.344

323,459,600

6.036,875

15,239,915

31,895,000

604,000

6.982.048

60,757,838

196,467,343

19,855,840

46.378.579

262,701,762

323,459,600

Form **990** (2016)

Form 990 (2016)

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Liabilities 22

Fund Balances

Assets or 30

Net

12 Investments—other securities See Part IV, line 11 .

Intangible assets

Grants payable . .

Deferred revenue .

Other assets See Part IV, line 11 .

Accounts payable and accrued expenses

Tax-exempt bond liabilities . . .

persons Complete Part II of Schedule L .

and other liabilities not included on lines 17-24)

complete lines 27 through 29, and lines 33 and 34.

Organizations that do not follow SFAS 117 (ASC 958), check here

and complete lines 30 through 34.

Capital stock or trust principal, or current funds . . .

Paid-in or capital surplus, or land, building or equipment fund . . .

Retained earnings, endowment, accumulated income, or other funds

Total liabilities. Add lines 17 through 25 .

Complete Part X of Schedule D

Temporarily restricted net assets

Permanently restricted net assets

Total net assets or fund balances

Total liabilities and net assets/fund balances

Unrestricted net assets

Investments—program-related See Part IV, line 11

Total assets. Add lines 1 through 15 (must equal line 34) .

Escrow or custodial account liability Complete Part IV of Schedule D

key employees, highest compensated employees, and disqualified

Secured mortgages and notes payable to unrelated third parties Unsecured notes and loans payable to unrelated third parties .

Loans and other payables to current and former officers, directors, trustees,

Other liabilities (including federal income tax, payables to related third parties,

Organizations that follow SFAS 117 (ASC 958), check here 🕨 🗹 and

1	Cash-non-interest-bearing	19,673,480	1	23,676,756
2	Savings and temporary cash investments	31,606,977	2	33,404,504
3	Pledges and grants receivable, net	14,448,439	3	10,829,927
4	Accounts receivable, net	209,763	4	402,240
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		6	

	3	trustees, key employees, and highest compensa II of Schedule L				5	
	6	Loans and other receivables from other disqualit section 4958(f)(1)), persons described in section contributing employers and sponsoring organizations of the voluntary employees' beneficiary organizations. Part II of Schedule L	n 4958 Itions c	(c)(3)(B), and of section 501(c)(9)		6	
ets	7	Notes and loans receivable, net				7	
Assets	8	Inventories for sale or use			168,284	8	149,287
⋖	9	Prepaid expenses and deferred charges			213,655	9	224,794
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a	199,343,196			
	b	Less accumulated depreciation	10 b	64,705,202	135,127,196	10c	134,637,994
	11	Investments—publicly traded securities .		24,553,689	11	26,953,912	

78.794.687

24.923

304,821,093

5,706,306

13,083,651

33,265,000

604.000

7.035.242

59,694,199

185.307.465

15,434,509

44.384.920

245,126,894

304.821.093

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34

2c

3a

3b

Yes

No

Form 990 (2016)

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?

audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

Audit Act and OMB Circular A-133?

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

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required

Additional Data

Software Version:

Software ID:

EIN: 06-0646562

Name: BRUNSWICK SCHOOL INC

Form 990 (2016)

Form 990, Part III, Line 4a:

Form 990, Part III, Line 4a:
Education for approximately 980 students in classes from pre-kindergarten through 12th grade

Form 990, Part III, Line 4b: Required ATHLETIC AND voluntary SUMMER PROGRAMS

Form 990, Part III, Line 4c: STUDENT SERVICES including food service and bookstore

Compensated Employees, and Independent Contractors (C) (D) (E) (F) Name and Title Average Position (do not check more Reportable Reportable Estimated than one box, unless hours per compensation compensation amount of other person is both an officer from related week (list from the compensation any hours and a director/trustee) organizations organization from the for related (W-2/1099-(W-2/1099organization and Forma Highes emplor Institu organizations MISC) MISC) related below dotted organizations

	line)	dual trustee ector	utional Trustee	7	mployee	st compensated	er e		
Mr gREGORY BARTON HARTCH	8 00	×		×				0	
chairman		, ,						Ĭ	
mr robert f CARANGELO	4 00			Ţ,				0	
Secretary		×		×					
ms kerry Tyler	4 00	.,		,					

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MR WILLIAM R BERKLEY JR

MRS NANCY M BETTER

MR MICHAEL BINGLE

MR TODD L BOEHLY

MR MARK CAMEL

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Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest

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Mr gREGORY BARTON HARTCH	8 00	×		x				0	
chairman		^							
mr robert f CARANGELO	4 00	1							
Secretary		×		×					
ms kerry Tyler	4 00	1		Ų					
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II GREGORI BARTON HARTEH		x	x		n	0	
hairman		,,	^		,	,	
nr robert f CARANGELO	4 00	X	х		0	0	
Secretary		,	^		,	,	
ns kerry Tyler	4 00	x	х		0	0	
reasurer		,`			,	0	

mr robert f CARANGELO	4 00	×	х		0	0	0
Secretary		.,			-		
ms kerry Tyler	4 00	×	х		0	0	0
Treasurer							
Mr Richard Axilrod	2 00	×			0	0	0
trustee		,,			,	·	
MS JAMES E BELL IV	2 00						

Secretary							<u> </u>
ms kerry Tyler	4 00	×	×		0	0	
Treasurer					Ĭ		
Mr Richard Axilrod	2 00	×			0	0	0
trustee		^					
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trustee		^				Ŭ	<u> </u>
MS JAMES F BELL IV	2 00	×			0	0	0
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Compensated Employees, and Independent Contractors (D) (E) (F) Name and Title Average Position (do not check more Reportable Reportable Estimated hours per than one box, unless compensation compensation amount of other week (list person is both an officer from the from related compensation any hours and a director/trustee) organization organizations from the for related (W-2/1099-(W-2/1099organization and individ or dire Highest compensat Former Institutional organizations MISC) MISC) related below dotted organizations employee

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Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest

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Me Christina 1 Chan	2 00		

Ms Christine J Chao

mr mark f dzialga

Mr Philip A Hadley

mr Anthony Mann

Mr Robert E Michalik

Mr D Ian McKinnon

MR THOMAS D O'MALLEY JR

MR CARLOS HERNANDEZ

Ms Nisha Kumar Behringer

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trustee

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Compensated Employees, and Independent, Contractors (D) (E) (F) Name and Title Average Position (do not check more Reportable Reportable Estimated than one box, unless compensation amount of other hours per compensation person is both an officer week (list from the from related compensation any hours and a director/trustee) organization organizations from the for related (W-2/1099-(W-2/1099organization and Individua or direct Highest : Officer Former Instituti organizations MISC) MISC) related below dotted organizations ŝ line)

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest

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trustee		^						Ŭ	
ms Suzanne Peisch	2 00	l							
		I v	ı	1		1	 I ^	ا ۸۱	

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ms jeannie w rose

MR DAVID SALOMON

Mr William A Schneider

MR SCOTT STUART

MR MICHAEL A TROY

MR TYLER J WOLFRAM

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Compensated Employees, and Independent Contractors (D) (E) Name and Title Average Position (do not check more Reportable Reportable than one box, unless hours per compensation compensation week (list person is both an officer from the from related

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest

	any hours					ustee		organization	organizations (W- 2/1099-	from the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	MISC)	organization and related organizations
Mr THOMAS W PHILIP Headmaster	40 00			×				460,872	0	411,360
ms kathleen harrington cfo	40 00			x				234,835	0	100,208
Mr Thomas Murray Director of Development	40 00				x			291,005	0	148,962
mr timOTHY F OSTRYE director of Athletics	40 00					х		169,823	0	27,286
MR SUNIL GUPTA Director of Technology	40 00					х		178,386	0	40,508

186,265

174,617

164,050

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(F)

Estimated

amount of other

compensation

173,798

129,779

115,865

Director of Development					
mr timOTHY F OSTRYE	40 00			×	169,8
director of Athletics				^	103,0
MR SUNIL GUPTA	40 00				

mr aaron montgomery

MR DOUGLAS BURDETT

mr david bruce

Director of College Guidance

upper school mathematics teacher

Director of Middle School Admissions / Financial A

40 00

40 00

40 00

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efile	GR/	APHIC prin	nt - DO NOT PROCE	SS	As Filed Data -			DLN: 9	3493135137898
SCH	IED	ULE A	Puhl	ic C	harity Statu	s and Pub	olic Supp	ort	OMB No 1545-0047
(Fori	n 990			he org	janization is a secti	ion 501(c)(3) d	organization o		2016
990E	Z)			4	4947(a)(1) nonexe ▶ Attach to Form 9				2010
•		the Treasury	► Information	about	Schedule A (Form			ıctions is at	Open to Public Inspection
Name	of th	ue Service ne organiza	tion		<u> </u>	<u>54/10/11/1990</u> .		Employer identific	<u>_</u>
KUNS	WICK:	SCHOOL INC						06-0646562	
Par			for Public Charity S					See instructions.	
ne oi 1	rganız.		a private foundation bed		`	•	,	/A)/:)	
		•	onvention of churches,					(A)(I).	
2	✓		scribed in section 170			·	• • • • • • • • • • • • • • • • • • • •		
3		•	or a cooperative hospita		_				
4	Ш	name, city,	esearch organization op and state			-			· · · · · · · · · · · · · · · · · · ·
5			ation operated for the b (iv). (Complete Part II		of a college or univer	sity owned or op	erated by a gov	ernmental unit descri	bed in section 170
6		A federal, s	tate, or local governme	nt or o	governmental unit de	scribed in sectio	on 170(b)(1)(A	۱)(v).	
7			ation that normally rece O(b)(1)(A)(vi). (Com			s support from a	governmental u	ınıt or from the gener	al public described in
8		A communi	ty trust described in se	ction	170(b)(1)(A)(vi)	(Complete Part I	Ι)		
9			ural research organizati ant college of agricultu						ege or university or a
.0		from activit	ation that normally rece les related to its exemp income and unrelated l see section 509(a)(2)	ot func busine	tions—subject to cert ss taxable income (le	ain exceptions, a	and (2) no more	than 331/3% of its su	pport from gross
1		-	ation organized and ope	•		public safety S	ee section 509	(a)(4).	
.2		more public	ation organized and ope ly supported organizati through 12d that desc	ons de	escribed in section 5	09(a)(1) or sec	tion 509(a)(2). See section 509(a	
а		Type I. A so	supporting organization n(s) the power to regular Part IV, Sections A ar	operat arly ap	ted, supervised, or co	ontrolled by its si	upported organi	zation(s), typically by	
b		Type II. A manageme	supporting organization of the supporting org	n supe janizat	ion vested in the san				
С		Type III fo	unctionally integrated organization(s) (see ins	d. A su	ipporting organization				ted with, its
d		Type III n functionally	on-functionally integ integrated The organi You must complete	rated . zation	A supporting organi generally must satisf	zation operated i y a distribution i	ın connection wi	th its supported organ	
e		Check this	box if the organization i or Type III non-functio	receive	ed a written determin	ation from the II	RS that it is a Ty	pe I, Type II, Type II	I functionally
f	Enter		of supported organizat		neegrated supporting	or gariization			
g	Provid	de the follow	ing information about t	he sup	ported organization(:	s)		_	
(i)Na	ime of	f supported (organization (ii)EIN	N	(iii) Type of organization (described on lines 1- 10 above (see instructions))	(iv Is the organiz your governin	ation listed in	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
						Yes	No		
			I						
Γotal			tion Act Notice, see t					Schedule A (Form 9	

Sch	nedule A (Form 990 or 990-EZ) 2016						Page 2
P	art II Support Schedule for	Organizations	Described in S	ections 170(b)(1)(A)(iv) ar	d 170(b)(1)(A	(vi)
	(Complete only if you ch	ecked the box o	n line 5, 7, 8, o	r 9 of Part I or i	f the organization	on failed to quali	
	III. If the organization fa	ails to qualify un	der the tests lis	ted below, plea:	se complete Par	t III.)	
	Section A. Public Support		T	ı		1	
	Calendar year (or fiscal year beginning in) ▶	(a)2012	(b) 2013	(c)2014	(d)2015	(e) 2016	(f)Total
1	Gifts, grants, contributions, and						
-	membership fees received (Do not						
	include any "unusual grant ")						
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	(a)2012	(b) 2013	(c)2014	(d)2015	(e)2016	(f)Total
_	(or fiscal year beginning in) ▶	(4)2012	(6)2013	(6)2014	(4)2013	(0)2010	(1)10tai
7							
8	Gross income from interest, dividends, payments received on						
	securities loans, rents, royalties and						
	income from similar sources						
9							
	activities, whether or not the						
10	business is regularly carried on Other income Do not include gain or						
10	loss from the sale of capital assets						
	(Explain in Part VI)						
11	_ _						
4.5	10 Gross receipts from related activities,	etc (see instruction	l ns)			12	
13	First five years. If the Form 990 is for	=				-	anization,
	check this box and stop here				<u> </u>	<u> ▶ ∟</u>	
	Section C. Computation of Public	• •		(6)			
	Public support percentage for 2016 (III			column (f))		14	
	Public support percentage for 2015 Sc					15	
16	a 33 1/3% support test—2016. If the	e organization did r	not check the box	on line 13, and lir	ne 14 is 33 1/3% o	r more, check this	
	and stop here. The organization qual						ightharpoons
b	33 1/3% support test—2015. If th	ie organization did	not check a box of	on line 13 or 16a,	and line 15 is 33 i	/3% or more, chec	k this
	box and stop here. The organization						▶□
17 a	a 10%-facts-and-circumstances test						
	is 10% or more, and if the organization in Part VI how the organization meets						
		the racts-and-cire	cumstances test	The organization	quaimes as a pubi	iciy supported	. □
	organization	rt_2015 If the	raanization did ===	t chack a hay as !	mo 12 165 164	or 17a and line	▶⊔
b	10%-facts-and-circumstances tes 15 is 10% or more, and if the organization						
	Explain in Part VI how the organization						
	supported organization			-	•	•	►□
18	B 1 1 6 1 11 7611	on did not check a	box on line 13, 1	6a, 16b, 17a, or 1	.7b, check this box	and see	· —
	instructions		, -	. , ,	,		▶ □
					Schodu	le A (Form 990 o	r 990-F7) 2016

Section A. Public Support										
the organization fails to o	qualify under t	he tests listed b	pelow, please co	mplete Part II.)					
(Complete only if you ch	ecked the box	on line 10 of Pa	art I or it the or	ganization railed	a to qualify unde	er Part II. If				

	the organization rans to	quantity annual .		ээлэл, рассо ос		/	
Se	ection A. Public Support						
	Calendar year	(a)2012	(b) 2013	(c)2014	(d)2015	(e)2016	(f)Total
_	(or fiscal year beginning in)	. ,		, ,		, ,	
1	Gifts, grants, contributions, and membership fees received (Do not						
	include any "unusual grants ")						
2							
_	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						
5	to or expended on its behalf The value of services or facilities						
9	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
	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						
	Add lines 7a and 7b						
8	Public support. (Subtract line 7c						
-	from line 6)						
-	ection B. Total Support						
	Calendar year	(a)2012	(b) 2013	(c)2014	(d)2015	(e)2016	(f)Total
	Calendar year (or fiscal year beginning in) ▶	(a) 2012	(b) 2013	(c)2014	(d)2015	(e)2016	(f)Total
9	Calendar year (or fiscal year beginning in) ► Amounts from line 6	(a)2012	(b) 2013	(c)2014	(d) 2015	(e)2016	(f)Total
9	Calendar year (or fiscal year beginning in) ► Amounts from line 6 Gross income from interest,	(a) 2012	(b) 2013	(c)2014	(d)2015	(e)2016	(f)Total
9	Calendar year (or fiscal year beginning in) ► Amounts from line 6 Gross income from interest, dividends, payments received on	(a)2012	(b) 2013	(c)2014	(d)2015	(e)2016	(f) Total
9	Calendar year (or fiscal year beginning in) ► Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and	(a)2012	(b) 2013	(c)2014	(d) 2015	(e)2016	(f) Total
9 L0a	Calendar year (or fiscal year beginning in) ► Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	(a)2012	(b) 2013	(c)2014	(d) 2015	(e)2016	(f)Total
9	Calendar year (or fiscal year beginning in) ► Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income	(a)2012	(b) 2013	(c)2014	(d) 2015	(e)2016	(f)Total
9 L0a	Calendar year (or fiscal year beginning in) ► Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from	(a)2012	(b) 2013	(c)2014	(d) 2015	(e)2016	(f)Total
9 L0a	Calendar year (or fiscal year beginning in) ► Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income	(a)2012	(b) 2013	(c)2014	(d) 2015	(e)2016	(f)Total
9 LOa b	Calendar year (or fiscal year beginning in) ► Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b	(a)2012	(b) 2013	(c)2014	(d) 2015	(e)2016	(f)Total
9 LOa b	Calendar year (or fiscal year beginning in) ► Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business	(a)2012	(b) 2013	(c)2014	(d) 2015	(e)2016	(f)Total
9 LOa b	Calendar year (or fiscal year beginning in) ► Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b,	(a)2012	(b) 2013	(c)2014	(d) 2015	(e)2016	(f)Total
9 LOa b	Calendar year (or fiscal year beginning in) ► Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is	(a)2012	(b) 2013	(c)2014	(d) 2015	(e)2016	(f)Total
9 l0a b c 11	Calendar year (or fiscal year beginning in) ► Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on	(a)2012	(b) 2013	(c)2014	(d)2015	(e)2016	(f)Total
9 LOa b	Calendar year (or fiscal year beginning in) ► Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalities and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or	(a)2012	(b) 2013	(c)2014	(d)2015	(e)2016	(f)Total
9 l0a b c 11	Calendar year (or fiscal year beginning in) ► Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets	(a)2012	(b)2013	(c)2014	(d)2015	(e)2016	(f)Total
9 l.Oa b c 11	Calendar year (or fiscal year beginning in) ► Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)	(a)2012	(b)2013	(c)2014	(d)2015	(e)2016	(f)Total
9 l.Oa b c 11	Calendar year (or fiscal year beginning in) ► Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets	(a)2012	(b) 2013	(c)2014	(d)2015	(e)2016	(f)Total
9 10a b c 111	Calendar year (or fiscal year beginning in) ► Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c,						
9 10a b c 111	Calendar year (or fiscal year beginning in) ► Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is fo						ganization,
9 10a b c 11 12	Calendar year (or fiscal year beginning in) ► Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is fo check this box and stop here	r the organization	's first, second, th				
9 10a b c 11 12 13 14	Calendar year (or fiscal year beginning in) ► Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is fo check this box and stop here	r the organization	's first, second, th	nird, fourth, or fift		ection 501(c)(3) or	ganization,
9 10a b c 11 12 13 14 <u>Se</u>	Calendar year (or fiscal year beginning in) ► Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is fo check this box and stop here ection C. Computation of Public Section C. Computation C. Computation C. Computation C. Computation C. Computation C. Computation C.	r the organization Support Perce e 8, column (f) d	's first, second, the intage invided by line 13,	nird, fourth, or fift		ection 501(c)(3) or	ganization,
9 10a b c 11 12 13 14 S6 15	Calendar year (or fiscal year beginning in) ► Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is fo check this box and stop here ection C. Computation of Public S Public support percentage from 2015 S	r the organization Support Perce e 8, column (f) d chedule A, Part I	's first, second, the second of the second o	nird, fourth, or fift		ection 501(c)(3) or	ganization,
9.0a b c 11 12 13 14 S6	Calendar year (or fiscal year beginning in) ► Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is fo check this box and stop here ection C. Computation of Public section D. Computation of Investe	r the organization Support Perce e 8, column (f) d chedule A, Part I: nent Income	's first, second, the intage ivided by line 13, II, line 15 Percentage	olumn (f))	h tax year as a se	ection 501(c)(3) or	ganization,
9 l0a b c 11 12 13 14 Se 15 16 Se	Calendar year (or fiscal year beginning in) ► Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is fo check this box and stop here ection C. Computation of Public S Public support percentage from 2015 S	r the organization Support Perce e 8, column (f) d chedule A, Part I: nent Income	's first, second, the intage ivided by line 13, II, line 15 Percentage	olumn (f))	h tax year as a se	ection 501(c)(3) or	ganization,
9 l0a b c 11 12 13 14 Se 15 16 Se 17	Calendar year (or fiscal year beginning in) ► Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is fo check this box and stop here ection C. Computation of Public section D. Computation of Investe	r the organization Support Perce e 8, column (f) d chedule A, Part I: ment Income 6 (line 10c, colu	's first, second, the second of the second o	olumn (f))	h tax year as a se	15 16	ganization,
9 l0a b c 11 12 13 14 Se 15 16 Se 17	Calendar year (or fiscal year beginning in) ► Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is fo check this box and stop here ection C. Computation of Public section Public support percentage for 2016 (lin Public support percentage from 2015 Section D. Computation of Investi Investment income percentage from 2015	r the organization Support Perce e 8, column (f) d chedule A, Part I: ment Income .6 (line 10c, colui 015 Schedule A,	's first, second, the second of the second o	column (f))	h tax year as a se	15 16 17 18	ganization, ▶□
9 l0a b c 11 12 13 14 Se 15 16 Se 17 18 19a	Calendar year (or fiscal year beginning in) ► Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is fo check this box and stop here ection C. Computation of Public section D. Computation of Investi Investment income percentage for 2015	r the organization Support Perce e 8, column (f) d chedule A, Part I: ment Income .6 (line 10c, colui 015 Schedule A, organization did r	's first, second, the second of the second o	column (f))	h tax year as a se	15 16 17 18 133 1/3%, and line	ganization, ▶□

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

ightharpoons

Part IV Supporting Organizations (Complete only if you checked a box on line 12 of Part I If you checked 12a of Part I, complete Sections A and B If you checked 12b of

Part I, complete Sections A and C If you checked 12c of Part I, complete Sections A, D, and E If you checked 12d of Part I, complete

amendment to the organizing document)

organization's organizing document?

provide detail in Part VI.

answer line 10b below

6

7

10a

Schedule A (Form 990 or 990-EZ) 2016

Sections A and D, and complete Part V) Section A. All Supporting Organizations

Page 4

4c

5a

5b 5c

6

9a

9b

9с

10a

10b

Schedule A (Form 990 or 990-EZ) 2016

			res	MO
L	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose,			
	be the designation If historic and continuing relationship, explain	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509 (a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described			
	ın section 509(a)(1) or (2)			

		1	1
	Did the organization have any supported organization that does not have an IRS determination of status under section 509 (a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described		
	ın section 509(a)(1) or (2)	2	Г
•	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c)		
	below	3a	
1	Did the organization confirm that each supported organization qualified under section 501(c)(4) (5) or (6) and satisfied		Г

	In section 509(a)(1) or (2)	2	
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c)		
	below	3a	
b	Did the organization confirm that each supported organization qualified under section $501(c)(4)$, (5) , or (6) and satisfied the public support tests under section $509(a)(2)$? If "Yes," describe in Part VI when and how the organization made the		
	determination	3b	
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes?		

b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the			
	determination			
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes?			
	If "Yes," explain in Part VI what controls the organization put in place to ensure such use			
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked 12a or 12b in Part I, answer (b) and (c) below			

	the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the			
	determination	3b		
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes?			
	If "Yes," explain in Part VI what controls the organization put in place to ensure such use	3с		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked 12a or 12b in Part I, answer (b) and (c) below			
Tu				
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported			
	organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations	4b		
С	Did the organization support any foreign supported organization that does not have an IRS determination under sections			

501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support

Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable) Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by

Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the

than (1) its supported organizations. (11) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (III) other supporting organizations that also support or benefit one or more of the filing

Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other

Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a

defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes,"

Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting

Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in

Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding

Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether

certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes,"

to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes

Substitutions only. Was the substitution the result of an event beyond the organization's control?

which the supporting organization also had an interest? If "Yes," provide detail in Part VI.

organization's supported organizations? If "Yes," provide detail in Part VI.

organization had an interest? If "Yes," provide detail in Part VI.

the organization had excess business holdings)

	substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)	7	
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes,"		
	complete Part I of Schedule L (Form 990 or 990-EZ)	8	
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as		

Par	Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the			
	governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		
С	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI	11c		
	stion B. Tuno I Summouting Ouspuingtions			
36	ction B. Type I Supporting Organizations		Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or		1.03	""
	elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Pa			
	VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or			
	trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such			
	powers during the tax year	1		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that			
	operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting			
	organization	2		
	skien C. Tune II Cumpostine Opposite tions			
Se	ction C. Type II Supporting Organizations		Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees	of	163	110
-	each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the	"		
	supporting organization was vested in the same persons that controlled or managed the supported organization(s)			
		1		
C -	skion D. All Tune III Sunnauking Ouseningking			
36	ction D. All Type III Supporting Organizations		Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's		1.03	"
	tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of t			
	Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?			
	, , , , , , , , , , , , , , , , , , , ,	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization			
	(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization			
	maintained a close and continuous working relationship with the supported organization(s)	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the	-		
	organization's investment policies and in directing the use of the organization's income or assets at all times during the ta			
	year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard	3		
Se	ction E. Type III Functionally-Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instru	ctions)		
а	The organization satisfied the Activities Test. Complete line 2 below	•		
ь	The organization is the parent of each of its supported organizations. Complete line 3 below			
c	The organization supported a governmental entity Describe in Part VI how you supported a government entity (s	ee instri	ictions)	١
_	The organization supported a governmental entity bescribe in Fair variow you supported a government entity (s	oc mon	100113)	,
2	Activities Test Answer (a) and (b) below.		1	
			Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported			
	organizations and explain how these activities directly furthered their exempt purposes, how the organization was			
	responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities	2a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the			
	organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's			
	involvement	2b		
3	Parent of Supported Organizations Answer (a) and (b) below.			
a	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the organization have the power to regularly appoint or elect a majority of the officers, directors, and the organization have the power to require the organization of the organization have the organization of the	of 3a		
	the supported organizations? Provide details in Part VI.			
b	Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? If "Yes," describe in Part VI. the role played by the organization in this regard			
	Supported organizations: It res, describe in Fart #1. the fole played by the organization in this regard	3b	1	1

6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		
	Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)	1		
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1 b		
c	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
e	Discount claimed for blockage or other factors (explain in detail in Part VI)			
2	Acquisition indebtedness applicable to non-exempt use assets	2		
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions)	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 035	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		

1

Section C - Distributable Amount

instructions)

Adjusted net income for prior year (from Section A, line 8, Column A)

Current Year

Schedule A (Form 990 or 990-FZ) 2016

Schedule A (Form 990 or 990-EZ) (2016)

c Excess from 2014.

d Excess from 2015.

e Excess from 2016. . . .



efile GRAPHIC print - DO NOT PROCESS **SCHEDULE D**

(Form 990)

Department of the Treasury

Name of the organization

Internal Revenue Service

As Filed Data -

Supplemental Financial Statements

▶ Complete if the organization answered "Yes," on Form 990,

Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

Attach to Form 990. Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

DLN: 93493135137898 OMB No 1545-0047

2016

Open to Public Inspection **Employer identification number**

BKU	NSWICK SCHOOL INC			06-0	0646562		
Pa	rt I Organizations Maintaining Donor Complete if the organization answere				counts.		
		(a) Donor advise	d funds	(b)	Funds and other ac	counts	
1	Total number at end of year						
2	Aggregate value of contributions to (during year)						
3	Aggregate value of grants from (during year)						
4	Aggregate value at end of year						
5	Did the organization inform all donors and donor funds are the organization's property, subject to			donor advised] Yes	
6	Did the organization inform all grantees, donors, used only for charitable purposes and not for the conferring impermissible private benefit?				urpose	Yes	□ No
Pai	t II Conservation Easements. Complet	te if the organization	answered "Yes"	on Form 990), Part IV, line 7.		
1	Purpose(s) of conservation easements held by the	e organization (check all	that apply)				
	\square Preservation of land for public use (e g , red	creation or education)	☐ Preservat	ion of an histor	rically important lan	d area	
	Protection of natural habitat		Preservat	ion of a certifie	d historic structure		
	Preservation of open space						
2	Complete lines 2a through 2d if the organization easement on the last day of the tax year	held a qualified conserva	ation contribution i	in the form of a	a conservation Held at the End	l of the	Vanu
а	Total number of conservation easements			2a	Heid at the End	i oi the	rear
b	Total acreage restricted by conservation easemen	nts		2b			
c	Number of conservation easements on a certified	historic structure include	ed ın (a)	2c			
d	Number of conservation easements included in (c structure listed in the National Register	e) acquired after 8/17/06	, and not on a his	toric 2d			
3	Number of conservation easements modified, traitax year ▶	nsferred, released, extin	guished, or termir	nated by the or	ganızatıon durıng th	ie	
4	Number of states where property subject to cons	ervation easement is loc	ated ►				
5	Does the organization have a written policy regar and enforcement of the conservation easements	rding the periodic monito it holds?	oring, inspection, h	nandling of viol	ations,		No
6	Staff and volunteer hours devoted to monitoring, •	inspecting, handling of	violations, and enf	forcing conserv	ation easements du	rıng the	year
7	Amount of expenses incurred in monitoring, insper	ecting, handling of violat	ions, and enforcin	g conservation	easements during	he year	
8	Does each conservation easement reported on lir	ne 2(d) above satisfy the	requirements of s	section 170(h)((4)(B)(ı)		
	and section 170(h)(4)(B)(II)?				☐ Yes		No
9	In Part XIII, describe how the organization report balance sheet, and include, if applicable, the text the organization's accounting for conservation ea	of the footnote to the o					
Par	Organizations Maintaining Collect Complete if the organization answers				milar Assets.		
1a	If the organization elected, as permitted under Si art, historical treasures, or other similar assets hi provide, in Part XIII, the text of the footnote to it	eld for public exhibition,	education, or rese	earch in further			of
b	If the organization elected, as permitted under SI historical treasures, or other similar assets held f following amounts relating to these items						
(i) Revenue included on Form 990, Part VIII, line 1				> \$		
(i	i)Assets included in Form 990, Part X				▶ \$		
2	If the organization received or held works of art, following amounts required to be reported under				gain, provide the		
а	Revenue included on Form 990, Part VIII, line 1	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			▶ \$		
b	Assets included in Form 990, Part X				▶ \$		

Sche	dule D (Form 990) 2016										Page 2
Par	t IIII Organizations Maintai	ining Coll	ections of Art,	Histori	cal Trea	sures,	or Othe	r Similar A	ssets (con	tınued)	
3	Using the organization's acquisition items (check all that apply)	n, accession	, and other record	s, check	any of the	followin	g that are	a significant	use of its co	llection	
а	Public exhibition			d	☐ Lo	an or ex	change pr	ograms			
b	Scholarly research			e	☐ Ot	her					
c	Preservation for future gener	rations									
4											
5	During the year, did the organization assets to be sold to raise funds rat							ımılar	☐ Yes	□No	,
Pai	rt IV Escrow and Custodial Complete if the organiza X, line 21.			orm 990	, Part IV	, line 9,	or repor	ted an amo			
1a	Is the organization an agent, truste included on Form 990, Part X?	ee, custodia	an or other interme	diary for	contribut	ions or o	ther asset	s not	☐ Yes	□ No	,
b	If "Yes," explain the arrangement i	ın Part XIII	and complete the f	following	table				Amount		-
С	Beginning balance						1c				•
d	Additions during the year						1d				_
e	Distributions during the year						1e				_
f	Ending balance						1 f				_
2a	Did the organization include an am			•				,	☐ Yes	□No	,
b	If "Yes," explain the arrangement i										
Pa	rt V Endowment Funds. Co	mplete if									
1-	Beginning of year balance		(a)Current year 112,956,829		rior year 113,573,76		o years bac 103,453,0	_	ears back (e)	Four years	85,015
	,	• •	8,265,781		4,651,83		6,971,5	_	4,361,532		47,384
	Contributions	Llacaca	11,388,545		-2,652,66		6,047,5		0,198,057		15,611
	Net investment earnings, gains, and	105565				1		-	.,,		
	Grants or scholarships										
	Other expenditures for facilities and programs		3,254,132	2	2,616,10	5	2,898,2	63 2	2,672,482	2,6	82,100
	Administrative expenses	•	120 257 022		112.056.03		112 572 7	CE 101	2 452 047		<u></u>
g	End of year balance		129,357,023		112,956,82		113,573,7	65 103	3,453,017	91,5	65,910
2	Provide the estimated percentage		•	e (line 1	g, column	(a)) held	d as				
а	Board designated or quasi-endown		56 560 %								
Ь		40 %									
c	Temporarily restricted endowment		00 %								
_	The percentages on lines 2a, 2b, a		•					6 11			
3a	Are there endowment funds not in organization by	tne possess	sion of the organiza	ation tha	are neid	and adm	iinisterea	ror the		Yes	No
	(i) unrelated organizations								3a(i)		No
	(ii) related organizations								3a(ii) 	No
b	If "Yes" on 3a(II), are the related o	rganızatıon	s listed as required	l on Sche	dule R?				. 3b		
4	Describe in Part XIII the intended i	uses of the	organization's end	owment 1	unds						
Pai	rt VI Land, Buildings, and E				,						
	Complete if the organization of property (a	ation answ			Part IV, basis (othe			orm 990, Pa d depreciation		O. Book value	
	Description of property (4	(investme		sc or other	Dasis (Otile	(6)2	-ccumulated	и фергесіасіон	(u)	Jook Value	
1a	Land				18,012,3	148				18,	012,348
b	Buildings				137,824,5	17		42,748,742		95,	075,775
c	Leasehold improvements										
d	Equipment				21,633,4	.89		16,188,356		5,	445,133
е	Other				21,872,8	342		5,768,104		16,	104,738
Tota	al. Add lines 1a through 1e (Column	(d) must eq	ual Form 990, Par	t X, colui	nn (B), lir	ne 10(c))	>	1	134,	637,994

Part VII	Investments—Other Securities. Complete if the See Form 990, Part X, line 12.			wered 'Yes' on		
	(a) Description of security or category (including name of security)	(1)Book value	Cos	(c)Method of t t or end-of-year	
	derivatives					
(3)Other (A) multi-str	ategy fund		17,508,198		F	
(B) PE limite	d partnerships		18,506,893		F	
(C) equity st	rategy fund		57,066,751		F	
(D)						
(E)						
(F)						
(G)						
(H)						
	n (b) must equal Form 990, Part X, col (B) line 12)		93,081,842			
Part VIII	Investments—Program Related. Complete if	the o			n Form 990, F	Part IV, line 11c.
	See Form 990, Part X, line 13. (a) Description of investment		(b) Book value		(c) Method of t or end-of-yea	
(1)						
(2)						
(3)						
(4)						
(5)						
(6)						
(7)						
(8)						
(9)						
	n (b) must equal Form 990, Part X, col (B) line 13)	•				
Part IX	Other Assets. Complete if the organization answered (a) Description		on Form 990, Pa	art IV, line IId	see Form 990,	(b) Book value
(1)						
(2)						
(3)						
(4)						
(5)						
(6)						
(7)						
(8)						
(9)						
Part X	mn (b) must equal Form 990, Part X, col (B) line 15) Other Liabilities. Complete if the organization a	nswe	red 'Yes' on Fo	rm 990. Part 1	IV. line 11e oi	<u>▶ </u> - 11f.
1.	See Form 990, Part X, line 25. (a) Description of liability			Book value		
(1) Federal			(3) 2	Joon Parae		
Enrollment d	eposits			4,773,100		
Asset retirement obligation				200,691		
	Bond Premium			2,008,257		
(4)						
(5)						
(6)						
(7)						
(8)						
(9)						
	n (b) must equal Form 990, Part X, col (B) line 25) or uncertain tax positions In Part XIII, provide the text of	fthef	ootnote to the o	6,982,048	incial statement	ts that reports the
	's liability for uncertain tax positions under FIN 48 (ASC 7					

Amounts included on line 1 but not on Form 990, Part VIII, line 12

Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b .

Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)

Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b,

Other (Describe in Part XIII)

Supplemental Information

Donated services and use of facilities .

Prior year adjustments

Other (Describe in Part XIII) .

Add lines 2a through 2d .

Add lines 4a and 4b .

Return Reference

See Additional Data Table

Subtract line 2e from line 1 .

Other losses .

Part XI

2

b

c

b

d

е 3

а

b

c

Part XIII

5

4

Schedule D (Form 990) 2016

1,297,282

31,625

5.561.790

2e

3

4c

5

Page 4

1,297,282

42.599.510

5,593,415

48,192,925

Schedule D (Form 990) 2015

Net unrealized gains (losses) on investments . . . 2a 9.446.996 Donated services and use of facilities . 2b 2c Recoveries of prior year grants . . .

Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

2d 1,297,282 2e

Other (Describe in Part XIII) . . d Add lines 2a through 2d 10,744,278 е Subtract line 2e from line 1 . 3 Amounts included on Form 990, Part VIII, line 12, but not on line 1

3 50,727,382 4 Investment expenses not included on Form 990, Part VIII, line 7b. 4a 31,625 Other (Describe in Part XIII) 4b 5,561,790 b Add lines 4a and 4b . . . 5,593,415 4c

5 Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12) 56,320,797 Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return. Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

1 Total expenses and losses per audited financial statements . 43,896,792 2 Amounts included on line 1 but not on Form 990, Part IX, line 25

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

2a

2b 2c

2d

4b

Explanation

Page 5	Schedule D (Form 990) 2015					
tinued)	Part XIII Supplemental Information (co					
Explanation	Return Reference					

Schedule D (Form 990) 2016

Additional Data

Software ID:

Software Version:

EIN: 06-0646562

Name: BRUNSWICK SCHOOL INC

Supplemental Information

Return Reference	Explanation
Part V, Line 4	The School's endowment consists of over 81 individual funds established for a variety of p urposes including both donor-restricted endowment funds and amounts designated by the Boar d 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 endowmen t 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 asset is. 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.

Supplemental Information							
Return Reference	Explanation						
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 po sitions 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 qual ified 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.						

Supplemental Information Return Reference Explanation Rental Expenses reported on Part VIII, Line 6b 691,018 Cost of Goods Sold reported on part viii, line 10b Part XI, Line 2d - Other Adjustments 606,264

upplemental Information						
Return Reference	Explanation					
Part XI, Line 4b - Other Adjustments	Financial Aid netted against revenue 5,561,790					

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Supplemental Information	
Return Reference	Explanation
Part XII, Line 2d - Other Adjustments	Rental Expenses reported on Part VIII, LIne 6b 691,018 Cost of Goods Sold reported on part VIII, line 10b 606,264

Supplemental Information	
Return Reference	Explanation
Part XII, Line 4b - Other Adjustments	Financial Aid netted against revenue 5,561,790

efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493135137898 OMB No 1545-0047 SCHEDULE E **Schools** (Form 990 or 990-▶Complete if the organization answered "Yes" on Form 990, EZ) Part IV, line 13, or Form 990-EZ, Part VI, line 48. ▶ Attach to Form 990 or Form 990-EZ. Open to Public ▶ Information about Schedule E (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990. Inspection Department of the Treasury Namel & the corporation **Employer identification number** BRUNSWICK SCHOOL INC 06-0646562 Part I YES NO Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body? 1 Yes Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships? 2 Yes Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe If "No," please explain If you need more space use Part II 3 Yes 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 Does the organization discriminate by race in any way with respect to a Students' rights or privileges? 5a Nο b Admissions policies? 5b Nο c Employment of faculty or administrative staff? 5c Nο d Scholarships or other financial assistance? 5d Nο e Educational policies? 5e Νo f Use of facilities? 5f Νo g Athletic programs? 5g Nο h Other extracurricular activities? 5h Nο 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 Νo 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 Paperwork Reduction Act Notice, see the Instructions for Form 990 or Form 990-EZ. Schedule E (Form 990 or 990-EZ) (2016)

hedule E (Form 990 or 990EZ) (2016)					
Part II Supplemental Information. Provide the expla any other additional information (see instructions)	nations required by Part I, lines 3, 4d, 5h, 6b, and 7, as applicable Also provide				
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				

Schedule F (Form 990 or 990-F7) (2016)

efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493135137898 OMB No 1545-0047 SCHEDULE F Statement of Activities Outside the United States (Form 990) 2016 ► Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16. Open to Public ▶ Attach to Form 990. ▶ See separate instructions. Department of the Treasury Inspection ▶ Information about Schedule F (Form 990) and its instructions is at www.irs.gov/form990. Internal Revenue Service Name of the organization Employer identification number BRUNSWICK SCHOOL INC 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? 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 Activites per Region (The following Part I, line 3 table can be duplicated if additional space is needed) (a) Region (b) Number of (c) Number of (d) Activities conducted in (e) If activity listed in (d) is a (f) Total expenditures offices in the employees, agents, region (by type) (e.g., program service, describe for and investments fundraising, program and independent specific type of in region region contractors in services, investments, grants service(s) in region region to recipients located in the region) Central America and the 0 0 Investments 59,842,382 Carıbbean 59,842,382 3a Sub-total b Total from continuation sheets to Part I o 59.842.382 c Totals (add lines 3a and 3b)

Schedule F (Form 990) 2016							Page 3
				ed States. Complete if	the organization an	nswered "Yes" to Form 99	90, Part IV, line 16.
Part III can be ((a) Type of grant or assistance	duplicated if addition (b) Region	(c) Number of recipients		(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)
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Sche	dule F (Form 990) 2016		Page 4
Par	t 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 separately 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)		
	Instructions for Forms 5520 and 5520 Pry	☐ 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 separately file Form 5713, International Boycott Report (see Instructions for Form 5713)	☐ Yes	☑ No

ichedule F (Form 990) 2016 Pag					
Provide t amounts method);	he information he information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide cional information (see instructions).				
Return Reference	Explanation				
schedule f. part iv. The organization is not required to file form 5471 and Form 8621 because it does not meet the applicable filing thresholds.					

requirement and ownership requirement

efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493135137898 OMB No 1545-0047 SCHEDULE G **Supplemental Information Regarding** (Form 990 or 990-EZ) **Fundraising or Gaming Activities** Complete if the organization answered "Yes" on Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a Open to Public Department of the Treasury Attach to Form 990 or Form 990-EZ. Inspection Internal Revenue Service ▶ Information about Schedule G (Form 990 or 990-EZ) and its instructions is at www irs gov/form990. **Employer identification number** Name of the organization BRUNSWICK SCHOOL INC 06-0646562 Part I Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part. Indicate whether the organization raised funds through any of the following activities. Check all that apply Mail solicitations e Solicitation of non-government grants Solicitation of government grants Phone solicitations ☐ Special fundraising events In-person solicitations 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 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 (ii) Activity (iii) Did (iv) Gross receipts (v) Amount paid to (vi) Amount paid to ındıvıdual fundraiser have from activity (or retained by) (or retained by) or entity (fundraiser) custody or fundraiser listed in organization control of col (i) contributions? Yes No 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

Sche	edule G (Form 990 or 990-EZ) 2016				Page 2
Pa	rt II Fundraising Events. Complethan \$15,000 of fundraising egross receipts greater than \$15,000 of fundraising egross receipts greater than \$15,000 of fundraising egross receipts greater than \$15,000 of fundraising experiences.	vent contributions and			
	gross receipts greater than \$1	(a)Event #1 Fashion Show	(b) Event #2 GOLF OUTING	(c)Other events	(d) Total events (add col (a) through
Revenue		(event type)	(event type)	(total number)	col (c))
	1 Gross receipts	226,925	237,220	304,044	768,189
	2 Less Contributions	103,585	91,520	20,188	215,293
	3 Gross income (line 1 minus line 2)	123,340	145,700	283,856	552,896
	4 Cash prizes				
Şe	5 Noncash prizes			4,599	4,599
ens(6 Rent/facility costs		108,000	232	108,232
Ä	7 Food and beverages	24,832		2,263	27,095
Direct Expenses	8 Entertainment	58,987		26,149	85,136
ă	9 Other direct expenses	69,779	9,063	131,548	210,390
	10 Direct expense summary Add lines 4 t	through 9 in column (d)			435,452
	11 Net income summary Subtract line 10				117,444
Pai	Gaming. Complete if the organization on Form 990-EZ, line 6a.	anızatıon answered "Ye	s" on Form 990, Part I	V, line 19, or reported	more than \$15,000
Revenue		(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
	1 Gross revenue				
Expenses	2 Cash prizes				
ă	3 Noncash prizes				
ect	4 Rent/facility costs				
<u>ā</u>	5 Other direct expenses				
	6 Volunteer labor	☐ Yes <u>%</u>	☐ Yes %☐ No	☐ Yes	
	7 Direct expense summary Add lines 2 t	:hrough 5 ın column (d)			
	8 Net gaming income summary Subtrac	t line 7 from line 1, colum	n (d)		
9	Enter the state(s) in which the organizati				
a b	Is the organization licensed to conduct gardinated in the organization licensed in the organization	aming activities in each of	these states?		☐ Yes ☐ No
10a b		censes revoked, suspende			
-					

Sche	dule G (Form 990 or 990-EZ) 2016					F	age
11	Does the organization conduct gaming	j activities with nonmember	s?		☐Yes	□No	
12	Is the organization a grantor, benefici- formed to administer charitable gamin		a member of a partnership or other entity		□Yes	□No	
13	Indicate the percentage of gaming act	ivity conducted in					
а	The organization's facility			13a			
b	An outside facility			13b			(
14	Enter the name and address of the pe	rson who prepares the orga	nization's gaming/special events books and re	ecords			
	Name •						
	Address >						
15a	Does the organization have a contract revenue?	with a third party from who	om the organization receives gaming		□Yes	□No	
b			ganization ▶ \$ and th	ne			
	amount of gaming revenue retained b	y the third party $ hildsymbol{ ho}$ \$					
С	If "Yes," enter name and address of the	ne third party					
	Name •						
	Address ►						
16	Gaming manager information						
	Name ►						
	Gaming manager compensation $ hilde{ ho}$ \$						
	Description of services provided						
	☐ Director/officer	☐ Employee	☐ Independent contractor				
17	Mandatory distributions						
а	,	te law to make charitable di	stributions from the gaming proceeds to		_		
_	retain the state gaming license?				☐ Yes	□ No	
b	·		uted to other exempt organizations or spent				
D.	in the organization's own exempt activ			- (···) -	and (). a	ad Dawt	
Pal		l5c, 16, and 17b, as app	tions required by Part I, line 2b, column licable. Also complete this part to provid				
	Return Reference		Explanation				
			<u>'</u>	ule G (F	orm 990 or	990-EZ)	201

efile GRAPHIC print - DO NOT PROCESS As Filed Data DLN: 93493135137898 OMB No 1545-0047 Schedule I **Grants and Other Assistance to Organizations,** (Form 990) 2016 Governments and Individuals in the United States Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22. Open to Public Attach to Form 990. Department of the Inspection ▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990. Treasury Internal Revenue Service Name of the organization **Employer identification number** BRUNSWICK SCHOOL INC 06-0646562 Part I **General Information on Grants and Assistance** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and **✓** Yes Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States Part III Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on 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 (c) IRC section (a) Name and address of **(b)** EIN (d) Amount of cash (e) Amount of non-(f) Method of valuation (h) Purpose of grant (g) Description of (book, FMV, appraisal, organization if applicable non-cash assistance grant cash or assistance or government assistance other) (1) (3) (5) (6)(7) (8)(9)(10)(11)(12)Enter total number of section 501(c)(3) and government organizations listed in the line 1 table . . . For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat No 50055P Schedule I (Form 990) 2016

Schedule I (Form 990) 2016						Page 2
		Domestic Individua onal space is needed	ils. Complete if the orga	inization answered "Yes"	" on Form 990, Part IV, line 22	
(a) Type of grant or a	•	(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		157	5,561,790			
(1)						
(2)						
(3)						
(4)						
(5)						
(6)						
(7)						
Part IV Suppleme	ntal Information	on. Provide the info	ormation required in F	Part I, line 2, Part III	, column (b), and any other add	ditional information.
Return Reference	Explanation	on				
Part I, Line 2	SCHOOL AN	ND STUDENT SERVICES	ES FOR FINANCIAL AID (S	(SSS) APPLICATION THE	E SCHOOL USES THE ANALYSIS OF	SEEKING AID ARE REQUIRED TO COMPLETE THE SSS IN DETERMINING THE AMOUNT OF EACH

DLN: 93493135137898

OMB No 1545-0047

2015

Schedule J

(Form 990)

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest **Compensated Employees**

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23. ▶ Attach to Form 990. ▶ Information about Schedule J (Form 990) and its instructions is at www.irs.qov/form990.

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization BRUNSWICK SCHOOL INC

Employer identification number

			06-0646562			
Pa	art I Questions Regarding Compensation	n				
					Yes	No
1a	Check the appropiate box(es) if the organization pro 990, Part VII, Section A, line 1a Complete Part III					
		Ľ	Housing allowance or residence for personal use			
	Travel for companions	Г	Payments for business use of personal residence			
	Tax idemnification and gross-up payments	Г	Health or social club dues or initiation fees			
	□ Discretionary spending account	Γ	Personal services (e g , maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the or reimbursement or provision of all of the expenses de	_	. , , , ,	1b	Yes	
2	Did the organization require substantiation prior to r		,			
	directors, trustees, officers, including the CEO/Exec	cutive D	Director, regarding the items checked in line 1a?	2	Yes	
3	Indicate which, if any, of the following the filing organ organization's CEO/Executive Director Check all th used by a related organization to establish compens	nat appl				
	Compensation committee	Г	Written employment contract			
	Independent compensation consultant	Ŀ	Compensation survey or study			
	┌ Form 990 of other organizations	Ľ	Approval by the board or compensation committee			
4	During the year, did any person listed on Form 990, or a related organization	Part VI	${ m II}$, ${ m Section}$ ${ m A}$, ${ m line}$ ${ m 1a}$ with respect to the filing organization			
а	Receive a severance payment or change-of-control	paymer	nt?	4a	Yes	
b	Participate in, or receive payment from, a supplemen	ntal non	iqualified retirement plan?	4b	Yes	
c	Participate in, or receive payment from, an equity-ba	ased co	mpensation arrangement?	4c		No
	If "Yes" to any of lines 4a-c, list the persons and pro	ovide th	ne applicable amounts for each item in Part III			
	Only 501(c)(3), 501(c)(4), and 501(c)(29) organizat	tions m	ust complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A compensation contingent on the revenues of	, line 1	a, did the organization pay or accrue any			
а	The organization?			5a		Νo
b	Any related organization?			5b		No
	If "Yes," on line 5a or 5b, describe in Part III					
6	For persons listed on Form 990, Part VII, Section A compensation contingent on the net earnings of	, line 1	a, did the organization pay or accrue any			
а	The organization?			6a		Νo
b	Any related organization?			6 b		No
	If "Yes," on line 6a or 6b, describe in Part III					
7	For persons listed on Form 990, Part VII, Section A payments not described in lines 5 and 6? If "Yes," d		· · · · · · · · · · · · · · · · · · ·	7	Yes	
8	Were any amounts reported on Form 990, Part VII,		·			
	subject to the initial contract exception described in in Part III	n Regula	ations section 53 4958-4(a)(3)? If "Yes," describe	8		Νo
9		e rehutt	table presumption procedure described in Regulations	 		INO
_	section 53 4958-6(c)?	cbutt	table presumption procedure described in Regulations	9		

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

For each individual whose compensation must be reported on 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-MIS	SC compensation	(C) Retirement and		(E) Total of columns	(F) Compensation in	
, ,		Base (1) compensation	(iı) Bonus & ıncentive compensation	(III) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	column(B) reported as deferred on prior Form 990	
1 Mr THOMAS W PHILIP Headmaster	(i)	378,876 	75,000	6,996	259,450	151,910	872,232	0	
	(ii)	0	0	0	0	0	0	0	
2 ms kathleen harringtoncfo	(i)	199,559	35,000	276	77,105	23,103	335,043	0	
	(ii)	0	0	0	0	0	0	0	
3 Mr Thomas Murray Director of Development	(i)	226,470	40,000	24,535	30,895	118,067	439,967	0	
·	(ii)	0	0	0	0	0	0	0	
4 mr timOTHY F OSTRYE director of Athletics	(i)	151,781	12,500	5,542	20,601	6,685	197,109	0	
	(ii)	0	0	0	0	0	0	0	
5 MR SUNIL GUPTA Director of Technology	(i)	163,000	0	15,386	21,640	18,868	218,894	0	
<u>-</u> ,	(ii)	0	0	0	0	0	0	0	
6 mr aaron montgomery upper school mathematics	(i)	119,982	0	66,283	16,939	156,859	360,063	0	
teacher	(ii)	0	0	0	0	0	0	0	
7 MR DOUGLAS BURDETT Director of College Guidance	(i)	155,966	0	18,651	46,099	83,680	304,396	0	
,	(ii)	0	0	0	0	0	0	0	
8 mr david bruce Director of Middle School	(i)	110,189	0	53,861	15,790	100,075	279,915	0	
Admissions	(ii)	0	0	0	0	0	0	0	

Schedule 3 (1 01111 330) 2013	rage 9				
art III Supplemental Information					
Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II Also complete this part for any additional information					
Return Reference Explanation					

Schedule 1 (Form 990) 2015

Schedule J (Form 990) 2015

Additional Data

Software Version:

Software ID:

EIN: 06-0646562 Name: BRUNSWICK SCHOOL INC.

Part III	, Supplemental	Informa	at
	Poturn Poference		

tion Explanation

Recum Receience 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 w-2, Box 5 and reported on Schedule J, Part II, Column (B)(III) - Thomas Murray \$18,000 - Sunil Gupta \$9,000 - Aaron Montgomery \$18,000 -Douglas Burdett \$18,000 - David Bruce \$18,000 Automobile Allowance The automobile allowance for headmaster Thomas W Philip in the amount of \$6,720 is a part of his compensation agreement and is reflected in as a part of taxable income and included in his 2016 Form W-2, Box 5. This amount is reported on Form 990, Part II, Column B(III)

Return Reference	Explanation
	Line 4b NONQUALIFIED RETIREMENT PLAN - THE SCHOOL MAINTAINS A 457(F) DEFERRED COMPENSATION PLAN IN WHICH

Part III. Supplemental Information

Part I, Lines 4a-b

Part I, Lines 4a-b

Part B amounts are reported on Schedule J. Part II. column (C)

Part B amounts are reported on Schedule J. Part II. column (C)

Part III, Supplemental Information Return Reference Explanation The headmaster of the school, Thomas W. Philip, Director of Development, Thomas Murray, the Chief Financial Officer, Kathleen

Harrington, and the director of athletics, timothy fostrye received from the organization a bonus in the amount of \$75,000. Part I. Line 7 \$40,000,\$35,000 and \$12,500, accordingly. The bonuses were based on the discretion of the compensation committee of the board of directors. The bonuses were based upon a review of their performances, and approved by the compensation committee prior to being

awarded

Part III, Supplemental Information Return Reference Explanation NONTAXABLE BENEFITS INCLUDE CONTRIBUTIONS TO EMPLOYEE HEALTH AND OTHER BENEFIT PLANS FOR ALL EMPLOYEES. SCHEDULE J. PART II COLUMN and TUITION BENEFITS FOR EMPLOYEES WITH CHILDREN ATTENDING PRE-K THROUGH TWELFTH GRADE

ef	ile GRAPHIC print - DO NOT	PROCESS As	Filed Data -									DLN: 9	34931	3513	7898
	hedule K orm 990)	Su	pplemental Info	ormation o	n Tax E	Exempt	Bon	ds					No 1545		
(➤ Complete if th	e organization answere explanations, and					le desc	riptions,				201	O	
Den	artment of the Treasury			ttach to Form 99		ı in Part V	L.					Op	en to Pu	ıblic	
Inte	rnal Revenue Service	▶Informatio	n about Schedule K (Fo	orm 990) and its	instruction	s is at <u>ww</u>	w.irs.go	v/forn	<u>1990</u> .				nspectio	on	
	ne of the organization JNSWICK SCHOOL INC										•	tificatioi	n number		
-	Bond Towns									06-06	46562				
P	art I Bond Issues	(L) T ETN	(-) CUCID # (4-	4) Data	(-) T		(6) D-		e	- (-) D	c	(1-)		(:)	DI
	(a) Issuer name	(b) Issuer EIN	(c) CUSIP # (d	d) Date issued	(e) Issue	price	(T) De	scriptio	n of purpose	e (g) De	feased		On alf of	(I) finar	Pool ncing
												ISS	uer		
	0	0.5.000.510.5	2277 1/4/175							Yes	No	Yes	No	Yes	No
A	State of CT health and Educational Facilities AuthorITY	06-0806186	20774YHP5	03-29-2012	38,4	170,000 RE	FUNDING			X			X		X
Pa	rt III Proceeds	I	<u> </u>	I											
						A		В		C	ı			D	
1	Amount of bonds retired														
2	Amount of bonds legally defease	ed				5,971,00	00								
3	Total proceeds of issue					41,990,411									
4	Gross proceeds in reserve funds	5		•											
5	Capitalized interest from procee	eds													
6	Proceeds in refunding escrows .					41,903,85	52								
7	Issuance costs from proceeds .					576,4:	.4								
8	Credit enhancement from proce														
9	Working capital expenditures fro														
10	Capital expenditures from proce	eds													
11	Other spent proceeds					40,325,00	00								
12	Other unspent proceeds														
13	Year of substantial completion .			•	21	005									
					Yes	No	Ye	s	No	Yes	No		Yes		No
14	Were the bonds issued as part of	of a current refunding	g issue?		Х										
15	Were the bonds issued as part of	of an advance refund	ing issue?		Х										
16	Has the final allocation of proce	eds been made? .			Х										
17					Х										
Pa	rt IIII Private Business Us									•					
						A		В		C	1			D	
1	Was the organization a partner	ın a partnership, or a	a member of an LLC, whic	h owned property	Yes	No X	Ye	:s	No	Yes	No		Yes		No
2	financed by tax-exempt bonds? Are there any lease arrangemen property?	nts that may result in	private business use of b			Х									
For	Panerwork Reduction Act Notic					t No 5019	25			ı l	-	shodule	K (For	m 000	\ 2016

Penalty in Lieu of Arbitrage Rebate? . . . If "No" to line 1, did the following apply?

Rebate not due yet?

hedge with respect to the bond issue?

Exception to rebate?

If "Yes" to line 2c, provide in Part VI the date the rebate computation was performed Is the bond issue a variable rate issue?

Was the hedge superintegrated?

Arbitrage

Part IV

c

the issue are remediated in accordance with the requirements under

Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and

Has the organization or the governmental issuer entered into a qualified

If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside

Enter the percentage of financed property used in a private business use by entities other than

If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of . . . If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1 141-12

Has the organization established written procedures to ensure that all nonqualified bonds of

counsel to review any research agreements relating to the financed property?

a section 501(c)(3) organization or a state or local government 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)

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

Does the bond issue meet the private security or payment test? . . .

C

d

Page 2

D

D

Schedule K (Form 990) 2016

Nο

Yes

Χ

Х

Χ

В

Nο

Yes

Χ

Α

No

Х

Χ

Χ

Х

Χ

Yes

Χ

C

Nο

Yes

C

Schedule K (Form 990) 2016

period?

Part V

Part VI

the GIC satisfied?

requirements of section 148? . . .

applicable regulations?

Return Reference

Schedule k, part II, Line 3

Was the regulatory safe harbor for establishing the fair market value of

Were any gross proceeds invested beyond an available temporary

Has the organization established written procedures to monitor the

Procedures To Undertake Corrective Action

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

5a

а	Were gross proceeds invested in a guaranteed investment contract (GIC)?	Х		
ь	Name of provider			

Yes

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

Investor's paid a \$3,520,411 premium for the new bonds Total proceed is \$41,990,411

Explanation

Total proceeds of issue includes the issue price in the amount of \$38,470,000 (Part I, Line a, column (e)) plus

Х

Х

No

Х

В

No

Yes

Yes

Page 3

No

No

D

Yes

Yes

No

No

DLN: 93493135137898 SCHEDULE M OMB No 1545-0047 **Noncash Contributions** (Form 990) 2016 ▶ 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 Open to Public Department of the Treasury Internal Revenue Service Inspection Name of the organization **Employer identification number** BRUNSWICK SCHOOL INC 06-0646562 Part I Types of Property (a) (b) (c) (d) Check if Number of contributions or Noncash contribution Method of determining applicable items contributed amounts reported on noncash contribution amounts Form 990, Part VIII, line Art—Works of art . . 2 Art—Historical treasures Art-Fractional interests Books and publications Clothing and household goods Cars and other vehicles Boats and planes . 8 Intellectual property Securities—Publicly traded . Χ 693,372 AVG SELLING PRICE 10 Securities—Closely held stock . 11 Securities—Partnership, LLC, or trust interests . . . Securities—Miscellaneous . Qualified conservation contribution-Historic structures 14 Qualified conservation contribution—Other . Real estate—Residential . 16 Real estate—Commercial . 17 Real estate—Other . . 18 Collectibles . . Food inventory . . . 19 20 Drugs and medical supplies 21 Taxidermy . . . 22 Historical artifacts . 23 Scientific specimens . . 24 Archeological artifacts . Other ▶ (______ **26** Other ▶ (___ Other ▶ (_____ 27 Other ► (___ 28 Number of Forms 8283 received by the organization during the tax year for contributions 29 for which the organization completed Form 8283, Part IV, Donee Acknowledgement 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 Nο 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? 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash 32a Nο **b** If "Yes," describe in Part II 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 Schedule M (Form 990) (2016) For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat No 51227J

Schedule M (Form 990) (2016)	Page 2
I, column (b), t	Information. ormation required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part the number of contributions, the number of items received, or a combination of both. Also complete y additional information.
Return Reference	Explanation
Part I, Column (b)	THE ORGANIZATION IS REPORTING THE NUMBER OF CONTRIBUTORS IN PART 1, COLUMN (B) OF SCHEDULE M
Part I, Line 32b	GIFT ACCEPTANCE POLICY 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,

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 M (Form 990) (2016)

efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493135137898 OMB No 1545-0047 Supplemental Information to Form 990 or 990-EZ **SCHEDULE O** (Form 990 or 990-Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. EZ) ▶ Attach to Form 990 or 990-EZ. Open to Public ▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at Department of the Treasury Inspection www.irs.gov/form990. Name of the organization **Employer identification number** BRUNSWICK SCHOOL INC 06-0646562 990 Schedule O, Supplemental Information Explanation Return Reference Form 990. BRUNSWICK SCHOOL, INC. (THE SCHOOL) IS A NOT FOR PROFIT DAY SCHOOL, FOUNDED IN 1902, FOR B Part III. Line OYS 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 REVENU E 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 PERSON AL. 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, BRUNSWI CK SCHOOL HAS BEEN, IN THE WORDS OF GEORGE CARMICHAEL, ITS FOUNDER, "ABLY AND GENEROUSLY P REPARING BOYS FOR LIFE "THROUGH A RICH AND RIGOROUS COLLEGE PREPARATORY CURRICULUM. THE S CHOOL STRIVES FOR THE FULLEST INTELLECTUAL DEVELOPMENT OF EVERY YOUNG MAN THE SCHOOL'S AC ADEMIC PROGRAMS SEEK TO INSTILL IN EACH STUDENT A DESIRE TO LEARN, TO CHALLENGE EACH BOY T O 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 INCREASE D 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 COMMUNI TY, EVERY STUDENT IS ENCOURAGED TO DEVELOP HIS TALENTS TO THE FULLEST, TO UNDERSTAND THE O BLIGATION 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 A ND MUTUAL RESPECT. THE SCHOOL ACCEPTS THAT ITS OVERRIDING OBJECTIVE IS TO FOSTER THE DEVEL OPMENT OF STRONG CHARACTER THE SCHOOL STRIVES TO INSTILL IN ITS STUDENTS THE VALUES OF HO NESTY, INTEGRITY, COMPASSION AND TOLERANCE AND TO DEVELOP IN EACH STUDENT A SENSE OF RESPO NSIBILITY TO HIMSELF. TO THOSE AROUND HIM. TO THE SCHOOL COMMUNITY AND TO THE GREATER SOCI ETY THE SCHOOL BELIEVES, ABOVE ALL ELSE, THAT IT IS THE STRENGTH OF A YOUNG MAN'S CHARACT

ER AND THE DEPTH OF HIS SPIRIT THAT DETERMINE AND DEFINE ALL GENUINE AND LASTING SUCCESS

Return Explanation

Reference

Form 990. THE FOLLOWING ARE THE OFFICERS. DIRECTORS. TRUSTEES. OR KEY EMPLOYEES OF THE SCHOOL THAT H Part VI. AVE A FAMILY RELATIONSHIP OR A BUSINESS RELATIONSHIP WITH ANOTHER OFFICER, DIRECTOR, TRUST Section A.

EE, OR KEY EMPLOYEE Business Relationship exists between Mr Stephen R Pierce and Mr Mi line 2 chael A Trov

Return Reference

Torm 990. The treasurer of the board of trustees will review the annual form 990 return prior to fil

Part VI,
Section B,
line 11b
Ing this review will be noted as an agenda item at both an audit/finance committee meetin
g 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.

990 Schedule O, Supplemental Information

Form 990, Part VI, Section B, Inne 12c EACH NEW PERSON SERVING AS A TRUSTEE, OFFICER OR KEY EMPLOYEE OF BRUNSWICK SCHOOL IS REQUI RED 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 BRUNS WICK 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 IMMEDI ATE 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 AN D DETERMINE IF A CONFLICT EXISTS IF A CONFLICT OF INTEREST IS DETERMINED TO EXIST IT SHAL L BE DISCLOSED TO THE BOARD OF TRUSTEES, OR ITS AUDIT AND FINANCE COMMITTEE, AND MADE A MA TTER 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 TRANSACTI ON INVOLVING A TRUSTEE OR KEY EMPLOYEE WHICH MAY CONSTITUTE A CONFLICT OF INTEREST APPROV AL SHALL BE GRANTED ONLY IF THE ARRANGEMENT OR TRANSACTION IS FULLY DISCLOSED AND IS DETER MINED 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 COMMITT EE MEETING	Return Reference	Explanation
	Part VI, Section B,	RED 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 BRUNS WICK 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 IMMEDI ATE 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 AN D DETERMINE IF A CONFLICT EXISTS IF A CONFLICT OF INTEREST IS DETERMINED TO EXIST IT SHAL L BE DISCLOSED TO THE BOARD OF TRUSTEES, OR ITS AUDIT AND FINANCE COMMITTEE, AND MADE A MA TTER 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 TRANSACTI ON INVOLVING A TRUSTEE OR KEY EMPLOYEE WHICH MAY CONSTITUTE A CONFLICT OF INTEREST APPROV AL SHALL BE GRANTED ONLY IF THE ARRANGEMENT OR TRANSACTION IS FULLY DISCLOSED AND IS DETER MINED 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 COMMITT

Return Reference	Explanation
Form 990, Part VI, Section B, Iine 15	THE COMPENSATION COMMITTEE OF THE BOARD OF TRUSTEES (COMPRISED OF TRUSTEES WITH NO CONFLIC T OF INTEREST WITH REGARD TO INDIVIDUALS UNDER REVIEW) HIRES A CONSULTANT EVERY YEAR TO RE VIEW 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 for THE year, ASSUM ING CONTINUATION OF EMPLOYMENT This process was last undertaken in 2017 THE HEADMASTER D ETERMINES THE COMPENSATION OF KEY EMPLOYEES BASED ON EXPERIENCE, CURRENT PERFORMANCE AND C OMPARABLE LOCAL AND NATIONAL POSITIONS USING FAIRCHESTER AND NAIS STATISTICS

Return Explanation
Reference

Form 990,
Part VI,
Section C,
Inne 19

THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, & FINANCIAL S
TATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST ALSO, THE FEDERAL FORM 990 WHICH INCLUDES
FINANCIAL AND OTHER DISCLOSURES IS AVAILABLE ON GUIDESTAR

Return Explanation

form 990,
part xii, line
ts financial statements and selection of an independent accountant. This process did not change from the prior year.

efile GRAPHIC print - DO NOT PROCESS As Filed Data -**SCHEDULE R**

Name, address, and EIN (if applicable) of disregarded entity

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

► Attach to Form 990.

(Form 990)

Department of the Treasury

Name of the organization BRUNSWICK SCHOOL INC

(1) BRUNSWICK SCHOOL HOLDINGS LLC

Internal Revenue Service

Part I

Related Organizations and Unrelated Partnerships

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

Legal domicile (state

or foreign country)

СТ

Cat No 50135Y

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

Primary activity

FACULTY HOUSING

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

2 099 187 Brunswick School Inc.

Employer identification number

06-0646562

(e)

End-of-year assets

Total income

7 380

OMB No 1545-0047 **2016**

DLN: 93493135137898

Open to Public Inspection

(f)

Direct controlling

entity

Schedule R (Form 990) 2016

25 Patterson Avenue Greenwich, CT 068305618 06-0646562	Triedity Hoosing		,,500	2,033,107	Branswick School The		
(2) BRUNSWICK SCHOOL HOLDINGS I LLC 151 River Rd Greenwich, CT 068305618 06-0646562	ATHLETIC FACILITY	СТ	5,600	0 5,883,855 Brunswick School			
(3) BRUNSWICK SCHOOL HOLDINGS II LLC 9 Riversville Rd Greenwich, CT 068305618 06-0646562	FACulty HOUSING	СТ	73,800	5,850,157	Brunswick School Inc		
(4) brunswick sherwood holdings llc Sherwood Place greenwich, CT 068305618 06-0646562	fACulty HOUSING	ст	145,200	7,942,210	brunswick School Inc		
(5) brunswick 81 northfield llc 81 Northfield Street greenwich, CT 068305618 06-0646562	fACulty HOUSING	ст	0	762,288	brunswick School Inc		
Part II Identification of Related Tax-Exempt Organizations related tax-exempt organizations during the tax year.	Complete if the orga	inization answered	"Yes" on Form 990	, Part IV, line 34 b	pecause it had one or	- more	
(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	Section (13) co	g) n 512(b) ontrolled city?
						Yes	No

4.3		1 // // //	1 , 1	4.15	1 4	1 40	1 .			1 ()	1 4	., 1	
(a) Name, address, and EIN of related organization		(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	Predominant income(related unrelated, excluded from tax under sections 512-	Share of total income		(H Disprop alloca	rtionate	Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	mana	ral or aging ner?	(k) Percenta ownersh
					514)			Yes	No		Yes	No	
											\vdash		
		1	1		1		1		1				
Identification of Related Organizat because it had one or more related org						zation ansv	vered "Yes	" on Fo	orm 99	90, Part IV	, line	34	
		a corporation	(c) egal micile or foreign	st during th	(d) controlling Typentity (C co	(e)	vered "Yes (f) Share of total income	Share	(g) of end- year assets	(1	1) ntage	Se (1	(I) ection 512 3) control entity?
because it had one or more related org (a) Name, address, and EIN of	ganizations treated as	a corporation	on or trus (c) egal micile	st during th	(d) controlling Typentity (C co	(e) e of entity orp, S corp,	(f) Share of total	Share	(g) of end- year	of- Perce	1) ntage	Se (1	control
because it had one or more related org (a) Name, address, and EIN of	ganizations treated as	a corporation	(c) egal micile or foreign	st during th	(d) controlling Typentity (C co	(e) e of entity orp, S corp,	(f) Share of total	Share	(g) of end- year	of- Perce	1) ntage	Se (1	3) control entity?
because it had one or more related org (a) Name, address, and EIN of	ganizations treated as	a corporation	(c) egal micile or foreign	st during th	(d) controlling Typentity (C co	(e) e of entity orp, S corp,	(f) Share of total	Share	(g) of end- year	of- Perce	1) ntage	Se (1	3) control entity?
because it had one or more related org (a) Name, address, and EIN of	ganizations treated as	a corporation	(c) egal micile or foreign	st during th	(d) controlling Typentity (C co	(e) e of entity orp, S corp,	(f) Share of total	Share	(g) of end- year	of- Perce	1) ntage	Se (1	3) control entity?
because it had one or more related org (a) Name, address, and EIN of	ganizations treated as	a corporation	(c) egal micile or foreign	st during th	(d) controlling Typentity (C co	(e) e of entity orp, S corp,	(f) Share of total	Share	(g) of end- year	of- Perce	1) ntage	Se (1	3) control entity?

Schedule R (Form 990) 2016	Page
Part V Transactions With Related Organizations Complete if the organization answer	red "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
1 During the tax year, did the organization engage in any of the following transactions with one or more	e related organizations listed in Parts II-IV?
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or(iv) rent from a controlled entity	
b Gift, grant, or capital contribution to related organization(s)	
f c Gift, grant, or capital contribution from related organization(s)	1c
d Loans or loan guarantees to or for related organization(s)	
e Loans or loan guarantees by related organization(s)	1e
f Dividends from related organization(s)	
g Sale of assets to related organization(s)	
h Purchase of assets from related organization(s)	
i Exchange of assets with related organization(s)	
${f j}$ Lease of facilities, equipment, or other assets to related organization(s)	
k Lease of facilities, equipment, or other assets from related organization(s)	
l Performance of services or membership or fundraising solicitations for related organization(s)	
$m{m}$ Performance of services or membership or fundraising solicitations by related organization(s)	
${f n}$ Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	
o Sharing of paid employees with related organization(s)	10
p Reimbursement paid to related organization(s) for expenses	
q Reimbursement paid by related organization(s) for expenses	19
r Other transfer of cash or property to related organization(s)	
s Other transfer of cash or property from related organization(s)	
2 If the answer to any of the above is "Yes," see the instructions for information on who must comple	
(a) Name of related organization	(b) (c) (d) Transaction Amount involved Method of determining amount involved type (a-s)

	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	e, including covered r	elationships and tra	nsaction thresholds	
	(a) Name of related organization	(b) Transaction	(c) Amount involved	(d) Method of determining a	amount involved
		type (a-s)			
		туре (а-s)			
		type (a-s)			

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

1													
(a) Name, address, and EIN of entity	(b) Primary activity	domicile	(d) Predominant Income (related, unrelated, excluded from tax under sections 512- 514)	or	(e) re all partners section 501(c)(3) rganizations?	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtiona allocations?		Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)		<u></u>	(k) Percentage ownership
			514)	Yes	No	!		Yes	No		Yes	No	
										Schedul	e R (Form	1 990	0) 2016

Schedule R (Form 990) 2016 Part VII Supplemental Information Provide additional information for responses to questions on Schedule R (see instructions) Schedule R (Form 990) 2016