Form **990**

Return of Organization Exempt From Income Tax

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

▶ Do not enter social security numbers on this form as it may be made public.

DLN: 93493070013451 OMB No. 1545-0047

2019

	nent o y l Reve		Inspection								
C he	ck if a	pplicable: change	C Name of organization Ranney School % CHARLES ZALEWSKI	inning 07-01-2019 , and ending 06-	30-2020	DE	mployer i 2-185377		ication number		
□ Init □ Fina	ial ret	_	Doing business as	mail is not delivered to street address) Room/s	suite	E Te	elephone n	umber			
		on pending	235 Hope Road			(7	(732) 542-4777				
			City or town, state or province, co Tinton Falls, NJ 07724	untry, and ZIP or foreign postal code		G G	ross receip	ots \$ 22	2,595,584		
			F Name and address of princip DR JOHN W GRIFFITH 235 HOPE ROAD TINTON FALLS, NJ 07724	pal officer:		Is this a gro subordinate Are all subo	es?		□Yes ☑No		
-		mpt status:		1 (insert no.) □ 4947(a)(1) or □ 527	H(c)	included? If "No," atta Group exen		•	instructions)		
(Form	n of o	rganization	a: 🗹 Corporation 🗆 Trust 🗀 Ass	sociation Other ►	L Year o	of formation: 1	1968 M	State	of legal domicile: NJ		
Pa	rt I		nmary	ou moch significant activities.							
ņ	F	RANNEY S		T DAY SCHOOL SERVING STUDENTS IN I DAY CAMP & ENRICHMENT COURSES.	BEGINNEF	RS (3 YRS) 1	THROUGH	12TH	H GRADE. IT ALSO		
GOVERNANCE	-										
				iscontinued its operations or disposed of ing body (Part VI, line 1a)			net asse	ets. 3	14		
ACHVINES &			•	of the governing body (Part VI, line 1b)		· · ·		4	14		
VICIE	5	Total nu	mber of individuals employed in c			5	198				
124	6	Total nu	mber of volunteers (estimate if ne	ecessary)				6	75		
`				rt VIII, column (C), line 12				7a	(
	b	Net unre	elated business taxable income fro	om Form 990-T, line 39	<u> </u>			7b			
		C	tions and marks (Doub)(III line 41		_	Prior Ye			Current Year		
Ravenue			tions and grants (Part VIII, line 1h service revenue (Part VIII, line 2d	-		,142,310 ,629,681	-	1,171,85 20,558,30			
g.		-	, , ,	lines 3, 4, and 7d)			670,651		565,99		
<u> 7</u>		111100001111	che medine (i art vin, column (, t),	· · ·			186,283		112,40		
Rey	11	Other re	venue (Part VIII, column (A), lines				,628,925	 			
Rev			venue (Part VIII, column (A), lines venue—add lines 8 through 11 (m	ust equal Part VIII, column (A), line 12)		21	,020,525)	22,408,56		
Rei	12	Total rev		ust equal Part VIII, column (A), line 12)			,354,360		22,408,56 1,830,19		
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	12 13 14	Total rev Grants a Benefits	venue—add lines 8 through 11 (m nd similar amounts paid (Part IX, paid to or for members (Part IX,	column (A), lines 1–3)		1					
	12 13 14 15	Total rev Grants a Benefits Salaries,	venue—add lines 8 through 11 (mind similar amounts paid (Part IX, paid to or for members (Part IX, other compensation, employee between the part IX).	column (A), line 1-3)		1	,354,360 0		1,830,19		
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May the IRS discuss this return with the preparer shown above? (see instructions)

☑ Yes ☐ No

orm	990 (2019)					Page
Pa	rt III Stateme	ent of Program Service	Accomplishments			
	Check if S	chedule O contains a respor	se or note to any line in th	s Part III		
1		ne organization's mission:	,			
STUI DUR FIRM SMAI RANI	DENTS BECOME TOI DEEP CONVICTION ILY BELIEVE THAT T LL AND INCLUSIVE NEY STUDENT EMBA	SION IS TO SEE EACH STUI MORROW'S LEADERS, DIST I THAT A QUALITY EDUCATI THE MOST SATISFYING AND SETTINGS. THE RANNEY EX ARKS ON AN EDUCATIONAL INSTRUCTION AND TRADIT	NGUISHED BY THEIR INTE ON CAN MAKE A SIGNIFICA SUCCESSFUL LEARNING M PERIENCE REMAINS HIGHL JOURNEY THAT PROVIDES	LLIGENCE, ABILITY, S NT DIFFERENCE IN A OMENTS ARE IGNITE Y PERSONAL, INSPIR A BOUNTY OF OPPOR	SOCIAL CONSCIENCE, A STUDENT'S LIFE. AT ED AND NURTURED BY RING, RIGOROUS AND	AND CHARACTER. IT IS RANNEY SCHOOL, WE SKILLED EDUCATORS IN WELL BALANCED. EACH
2	Did the organizati	ion undertake any significar	t program convices during t	he year which were t	ant listed on	
2	the prior Form 99	· -	t program services during t	ne year which were r	lot listed on	☐ Yes ☑ No
	•	these new services on Sche	dula O			Lifes Lino
3	-			w it conducts and n	rogram	
3	services?	ion cease conducting, or ma	ke algilliloant Changes III III	w it conducts, any p	rograffi	☐ Yes ☑ No
		those changes on Schodule				Lifes EINO
4	,	these changes on Schedule		Etha blanca l		
4	Section 501(c)(3)	nization's program service and 501(c)(4) organization venue, if any, for each prog	s are required to report the			
4a	(Code:) (Expenses \$	13,522,865 including gra	nts of \$ 1,83	30,197) (Revenue \$	20,707,143)
	See Additional Data					
4b	(Code:) (Expenses \$	including gra	nts of \$) (Revenue \$)
4 -	(C- 1	\ /5	in all discussions) (D	
4c	(Code:) (Expenses \$	including gra	nts or \$) (Revenue \$)
4d		ervices (Describe in Schedul	•			,
	(Expenses \$	inclu	ding grants of \$) (Reve	enue \$)
4e	Total program s	service expenses >	13.522.865			

Form	990 (2019)			Page 3
Par	tiv Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A 2	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 🥞	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>	3		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>	4		No
5	Is the organization a section $501(c)(4)$, $501(c)(5)$, or $501(c)(6)$ organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D,</i> Part 9	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D,</i> Part III	8		No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi endowments? If "Yes," complete Schedule D, Part V	10	Yes	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.			
	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI.	11a	Yes	
	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 2	11b		No
	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		No
	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX 2	11d		No
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Yes	
	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	126	100	No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	Yes	
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	165	No
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		No
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		No
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I(see instructions)	17		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	Yes	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
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 \mathbf{b} If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?

21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic

government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II

20b

21

m	990 (2019)			Pag
ar	Checklist of Required Schedules (continued)			
			Yes	No
	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	22	Yes	
	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	Yes	
1	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a	Yes	
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		No
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		N-
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		N
1	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		N
	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		N
	Did the organization report any amount on Part X, line 5 or 22 for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		N
	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L,</i> Part III	27	Yes	
	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV	28a	 	N-
	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		N.
	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If "Yes," complete Schedule L, Part IV	28c		N-
	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M **	29	Yes	
	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		N
	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		N
	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		N
	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		N
	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		N
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		N
	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section $512(b)(13)$? If "Yes," complete Schedule R, Part V, line 2	35b		
	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36		N
	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		N
	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	
li	Statements Regarding Other IRS Filings and Tax Compliance			
-	Check if Schedule O contains a response or note to any line in this Part V			ᆜ
	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 49	\vdash	Yes	N
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			l
	Entrol and the more of the first politic transfer of the first opposition of the first politic transfer of the first politic t			4

	Statements Degarding Other IDS Filings and Tay Compliance (continued)			Page 3
	Statements Regarding Other IRS Filings and Tax Compliance (continued)			
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
3а	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		No
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		
	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)? If "Yes," enter the name of the foreign country:	4a		No
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5с		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		No
	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6 b		
	Organizations that may receive deductible contributions under section 170(c).			
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?		Yes	
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Yes	
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		No
	If "Yes," indicate the number of Forms 8282 filed during the year			
е	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?	7 g		No
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		No
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9 a		No
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		No
10	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			
11	Section 501(c)(12) organizations. Enter:			
a	Gross income from members or shareholders			
Б	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year.			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
	Enter the amount of reserves on hand			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		
	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N. Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	15 16		
	If "Yes," complete Form 4720, Schedule O.	-3		

orm	990 (2019)			Page 6
Par	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI	" respo	onse to i	ines
Se	ction A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 14			
	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 14			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? .	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		No
6	Did the organization have members or stockholders?	6		No
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7 b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	Yes	
	Each committee with authority to act on behalf of the governing body?	8b	Yes	
	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
Se	ction B. Policies (This Section B requests information about policies not required by the Internal Revenue			
30	ction b. Foncies (This Section & requests information about policies not required by the Internal Nevertal		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		No
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
Ь	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes	
13	Did the organization have a written whistleblower policy?	13	Yes	
14	Did the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		100	
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
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt			
	status with respect to such arrangements?	16b		
	ction C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ► NJ			
18	Section 6104 requires an organization to make its Form 1023 (or 1024-A if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.			
19	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: CHARLES ZALEWSKI 235 HOPE ROAD TINTON FALLS, NJ 07724 (732) 542-4777			
	, , , , , , , , , , , , , , , , , , , ,			. (2242)

Part VII

Trustee

 \checkmark

Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,

and Independent Contractors

Check if Schedule O contains a response or note to any line in this Part VII $\,$. Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

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

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

of reportable compensation from the organization	and any relate	d orga	nizati	ons.	, , , , , , , , , , , , , , , , , , ,		٠	pro, 555 mms 1555mm		,,,,,,
• List all of the organization's former directo organization, more than \$10,000 of reportable co	ompensation fro	m the								
See instructions for the order in which to list the	•									
L Check this box if neither the organization no (A) Name and title	(B) Average hours per week (list any hours	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation 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)	(W-2/1099- MISC)	organization and related organizations
(1) JOHN GRIFFITH	40.0	Х		×				475,703	0	64,350
HEAD OF SCHOOL	0.0									
(2) GREGORY MARTIN	40.0					×		270,083	0	36,859
US HEAD	0.0							· ·		, , , , , , , , , , , , , , , , , , ,
(3) Charles Zalewski	40.0	X		×				208,361	0	35,494
CFO CFO	0.0	, ,						250,551		
(4) JENNIFER COLLINS	40.0					×		197,140	0	25,491
CHIEF ADVANCEMENT OFFICER	0.0					^		197,140	0	23,491
(5) ANDREA DANIAL	40.0							160.100	0	22.005
LS HEAD	0.0					X		168,189	0	33,005
(6) ADAM MATERASSO	40.0									
DIR OF COUNSELLING & STUD SERV	0.0					X		140,053	0	9,867
(7) David Ketcham	40.0									
MS Head	0.0					X		120,807	0	9,241
(8) CHRISTIAN GIORDANO	1.0									
SECRETARY	0.0	Х		X				0	0	0
(9) JOSEPH GUILIANO	1.0									
VICE CHAIR	0.0	Х		X				0	0	0
(10) ROBERT CHANDLER	1.0									
CHAIR	0.0	X		X				0	0	0
(11) SHAMINA DHILLON MD	1.0	X						0	0	0
TRUSTEE	0.0									
(12) ROSS GALE	1.0	X						0	0	0
TRUSTEE	0.0	^						Ŭ	0	
(13) IRENE PAULUS TRUSTEE	0.0	X						0	0	0
(14) DIANE SCHMELZ TRUSTEE	1.0	X						0	0	0
(15) KAMALPREET VIRDI TRUSTEE	0.0	Х						0	0	0
(16) Michael Abboud Treasurer	0.0	Х		х				0	0	0
(17) Walter Greason PhD	1.0	Х						0	0	0

Part VII Section A. Officers, Directors	s Trustees K	av Fm	nlov		. ar	d Hic	ihad	et Compans	hate	Employees /	cont	inued)	rage o
(A) Name and title	(B) Average hours per	Position than o	on (d	(C o no) ot ch	eck m	ore	(D) Reportab	le	(E) Reportable compensation		(F Estima amount o	ated
	week (list any hours for related	ours director/trustee) o							from the from organization W-2/1099- (W-2			compen from organizat	the
	organizations below dotted line)	Individual trustee or director	Institutional T	Officer	Key employee	Highest compensat employee	Former	MISC)		MISC)		relat organiza	
		Stee	Trustee			ensated							
(18) David Maris	1.0	x							0		0		0
Trustee (19) Ramil Bhatnagar	1.0				-						_		
		x							0		0		0
Trustee (20) SANDY EPSTEIN	1.0				1						\dashv		
TRUSTEE		x							0		0		0
(21) KENNETH MOORE	1.0				1						_		
TRUSTEE	0.0	X							0		0		0
(22) JAMIE PRICE	1.0												
TRUSTEE EMERITUS	0.0	X							0		0		0
(23) BRIAN TORPEY MD	1.0	x							0		0		0
TRUSTEE EMERITUS	0.0												
					+						\dashv		
						Ц					\perp		
1b Sub-Total	VII, Section A				1			1,580,336			0		214,307
Total number of individuals (including but of reportable compensation from the org	t not limited to				ve) v	vho re	ceive		\$100		<u> </u>		211,307
												Yes	No
3 Did the organization list any former offic						-	-		ted er	nployee on			
line 1a? If "Yes," complete Schedule J for	r such individua.	•	•	•	•		•		•	• •	3		No
4 For any individual listed on line 1a, is the organization and related organizations gr										he			
individual		•		•	•	•	•			[4	Yes	
5 Did any person listed on line 1a receive of services rendered to the organization? <i>If</i>								ganization or	individ	dual for	5		No
Section B. Independent Contractors	5												
1 Complete this table for your five highest from the organization. Report compensat											npen	sation	
Name and	(A) business address)accrin	(B) tion of services		(C Compen	
Flik Independent School Dining, po box 417632 BOSTON, MA 022417632	business dudiess									TERING		сотрен	710,087
BOSTON, MA 022417032 Eastern Janitorial, 315 Ridgedale Avenue Unit 1 EAST HANOVER, NJ 07936								JANITO	RIAL SE	ERVICE			384,969
HILTON CONCRETE LLC,								CONTRA	ACTOR				102,273
499 Roxbury Road BELFORD, NJ 07748													
2 Total number of independent contractors (i compensation from the organization ▶ 3	ncluding but no	t limited	d to t	hose	e list	ed abo	ove)	who received	more	e than \$100,00	0 of		
												Form 996	(2019)

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orm 9 Part		Statement	of R	Revenue						Page 9
		Check if Scheo	dule	O contains a	respo	onse or note to any	(A) Total revenue	(B) Related or exempt function	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections
(6	1a	Federated campa	igns		1a			revenue		512 - 514
Contributions, Gifts, Grants and Other Similar Amounts	Ь	Membership due:	s .	. [1 b					
Gra mo	С	Fundraising even	its .	. [1c	210,439				
rs, FA	d	Related organiza	tions		1d					
ija N	е	Government grants	(conf	tributions)	1e	279,421				
ons, Sin	f	All other contributio								
utic Te		and similar amount above		L	1f	681,994				
흡흥	g	Noncash contribution lines 1a - 1f:\$	ns in	cluded in	1g	62,149				
on de	h	Total. Add lines	1a-1	 f						
						Business Code	1,171,854			
	2a	TUTION AND FEES				611600	20,558,302	20,558,302		
en l						011000				
Ven	b									
Program Service Revenue										
rvic	С									
- 3g	d									
gran	e									
ě	-									
	f	All other program	serv	ice revenue.						
		Total. Add lines 2				20,558,302	_	1	.	
		nvestment income imilar amounts)		luding divide	nds, i •	nterest, and other	354,384	ı		354,384
	4 I	ncome from invest			npt bo	ond proceeds	•			
	5 R	Royalties	_			•	0)		
				(i) Rea		(ii) Personal	4			
	6a	Gross rents	6a							
		Less: rental expenses	6b							
		Rental income					-			
		or (loss)	6с		(0			
	d	Net rental income	or ((loss) (i) Securit		(ii) Other	C	1		
	7a	Gross amount		(I) Securit	ies	(II) Other	-			
		from sales of assets other	7a	3.	21,892	2				
		than inventory	Н				4			
	_	Less: cost or other basis and	7b	1	10,278	3				
		sales expenses	Н				-			
		Gain or (loss)	7с	2	11,614	1				24.64
		Net gain or (loss) Gross income from fu			· ·	· · · >	211,614	1		211,614
n i		(not including \$		210,439 of						
E		contributions reporte See Part IV, line 18		ine 1c).	8a	40,311				
Re	b	Less: direct expen	ses		8b	76,744	<u> </u>			
Other Revenue	C	Net income or (los	s) fr	om fundraisii	ng ev	ents	-36,433 	3		-36,433
	۵2	Gross income from	nami	ing activities						
		See Part IV, line 19			9a	C	ı			
	b	Less: direct expen	ses		9b	С				
	С	Net income or (los	s) fr	om gaming a	ctivit	ies 🕨)		
	10a	Gross sales of inve	entor	y, less						
		returns and allowa			10a	C	_			
		Less: cost of good			10b					
-	С	Net income or (los Miscellaneo	_		nvent	Business Code		<u>'</u>		
-	11 a	TRANSPORTATIO		evenue		90009	9 21,750	21,750		
	b	MISCELLANEOUS	INC	OME		90009	9 127,091	127,091		
		2000								
	c									
	d	All other revenue	•							
	e	Total. Add lines 1	1a-1	l1d		•	148,841			
	12	Total revenue. S	ee ir	structions .			22,408,562			529,565
							22,400,302	.1 20,707,143	I	Form 990 (2019)

Part IX Statement of Functional Expenses				Page 10
Section $501(c)(3)$ and $501(c)(4)$ organizations must constant			ns must complete colu	mn (A).
Check if Schedule O contains a response or note to an	y line in this Part IX		(0)	<u>.</u>
Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	0			
2 Grants and other assistance to domestic individuals. See Part IV, line 22	1,830,197	1,830,197		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16.	0			
4 Benefits paid to or for members	0			
5 Compensation of current officers, directors, trustees, and key employees	783,909	626,807	157,102	
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0			
7 Other salaries and wages	8,902,326	6,513,918	2,126,736	261,672
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)	419,415	321,249	85,394	12,772
9 Other employee benefits	1,281,436	983,595	261,461	36,380
10 Payroll taxes	757,782	583,253	153,956	20,573
11 Fees for services (non-employees):	,	,	,	,
a Management	0			
b Legal	44,856		44,856	
c Accounting	0		1 1/000	
d Lobbying	0			
e Professional fundraising services. See Part IV, line 17	0			
	0		<u> </u>	
f Investment management fees			CO F20	
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	68,530		68,530	
12 Advertising and promotion	127,690		127,690	
13 Office expenses	314,138		294,592	19,546
14 Information technology	0			
15 Royalties	0			
16 Occupancy	794,518		794,518	
17 Travel	0			
18 Payments of travel or entertainment expenses for any federal, state, or local public officials	0			
19 Conferences, conventions, and meetings	0			
20 Interest	681,279		681,279	
21 Payments to affiliates	0			
22 Depreciation, depletion, and amortization	1,287,360	780,798	506,562	
23 Insurance	224,285		224,285	
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a REPAIRS AND MAINTENANCE	870,903		870,903	
b SCHOOL AND GYM SUPPLIES	703,443	703,443		
c TRANSPORTATION	159,992	159,992		
d OTHER PROGRAM EXPENSES	278,083	278,083		
e All other expenses	841,545	741,530	100,015	
25 Total functional expenses. Add lines 1 through 24e	20,371,687	13,522,865	6,497,879	350,943
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).				

Form 990 (2019)

Assets

11

12

13

14

15

16

17

18

19

20

21

23

24

25

26

27

28

31

32

33

Liabilities 22

Fund Balances

ō 29

Assets 30 0 6 0

305,839

26,085,021

14,697,100

7

10c

11

12

14

15

16

17

18

19

20

22

23

25

26

27

28

29

30

31

32

33

0 21

0 24

0

0 13

0

924,220

47,473,736

1,286,041

7,263,138

18.671.729

2,379,349

589,516

30.189.773

15,801,648

1,482,315

17,283,963

47,473,736

Page **11**

15,751

0

0

0

0

954,041

52,024,281

1,485,347

7,313,770

20.193.037

2,476,910

1,330,466

32,799,530

17,576,559

1,648,192

19,224,751

52,024,281

Form 990 (2019)

291,597

25,492,878

16,055,319

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

		Beginning of year		End of year
1	Cash-non-interest-bearing	5,455,534	1	9,207,745
2	Savings and temporary cash investments	0	2	0
3	Pledges and grants receivable, net	3 031	7	6 950

50,187,403

24,694,525

2	Savings and temporary cash investments	0	2	
3	Pledges and grants receivable, net	3,031	3	
4	Accounts receivable, net	2,991	4	
5	Loans and other payables to any current or former officer, director, trustee			

10a

10b

Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B).

Notes and loans receivable, net . . .

Prepaid expenses and deferred charges .

10a Land, buildings, and equipment: cost or other

Investments—publicly traded securities .

Investments—other securities. 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

Secured mortgages and notes payable to unrelated third parties

Unsecured notes and loans payable to unrelated third parties

Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity

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

Organizations that do not follow FASB ASC 958, check here ightharpoonup and

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

Retained earnings, endowment, accumulated income, or other funds

Organizations that follow FASB ASC 958, check here <a> \square and

Investments—program-related. See Part IV, line 11

basis. Complete Part VI of Schedule D

Other assets. See Part IV, line 11 .

Accounts payable and accrued expenses

or family member of any of these persons

and other liabilities not included on lines 17 - 24).

Total liabilities. Add lines 17 through 25 . .

Capital stock or trust principal, or current funds

Total liabilities and net assets/fund balances

Inventories for sale or use .

b Less: accumulated depreciation

Intangible assets .

Grants payable .

Deferred revenue . .

Tax-exempt bond liabilities .

Complete Part X of Schedule D

complete lines 27, 28, 32, and 33.

Net assets without donor restrictions

Net assets with donor restrictions

complete lines 29 through 33.

Total net assets or fund balances

2	Savings and temporary cash investments	O	2	
3	Pledges and grants receivable, net	3,031	3	
4	Accounts receivable, net	2,991	4	
5	Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons	0	5	

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single

Audit Act and OMB Circular A-133?

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.

Form 990 (2019)

3a

No

Additional Data

Software Version: **EIN:** 22-1853774

Software ID:

Name: Ranney School

Form 990 (2019)

Form 990, Part III, Line 4a:

Elementary & Secondary School

efile GRAPHIC print - DO NOT PRO			nt - DO NOT PROCESS	PROCESS As Filed Data -				DLN: 93493070013451		
SCI	HFD	ULE A	Public (Charity Statu	s and Bul	alic Supp	ort	OMB No. 1545-0047		
/TE 000			Complete if the or	ganization is a sect 4947(a)(1) nonexe Attach to Form	ion 501(c)(3) empt charitable	organization or trust.		2019		
		f the Treasury	► Go to <u>www.irs.</u>	gov/Form990 for in			ormation.	Open to Public Inspection		
Nam		nie Service he organiza ol	tion				Employer identific			
	•						22-1853774			
	rt I		for Public Charity Statu a private foundation because				See instructions.			
1	n gannz		onvention of churches, or as	•	•		(A)(i)			
2		·	escribed in section 170(b)(1							
3	✓				,	, ,				
		·	or a cooperative hospital serv	-			-			
4	Ц	name, city,	esearch organization operate and state:	d in conjunction with	a nospital descri	ibed in section :	1/U(b)(1)(A)(III). E	nter the hospital's		
5		-	ation operated for the benefit (iv). (Complete Part II.)	of a college or unive	rsity owned or op	perated by a gov	ernmental unit descri	ped in section 170		
6		A federal, s	tate, or local government or	governmental unit de	scribed in sectio	on 170(b)(1)(A	ı)(v).			
7			ation that normally receives a (O(b)(1)(A)(vi). (Complete		s support from a	governmental u	nit or from the gener	al public described in		
8		A communi	ty trust described in section	170(b)(1)(A)(vi).	(Complete Part I	I.)				
9			ural research organization de rant college of agriculture. Se					ege or university or a		
10		from activit	ation that normally receives: ties related to its exempt fund income and unrelated busing See section 509(a)(2). (Col	ctions—subject to cer ess taxable income (le	tain exceptions,	and (2) no more	than 331/3% of its su	pport from gross		
11		An organiza	ation organized and operated	exclusively to test fo	r public safety. S	See section 509	(a)(4).			
12		more public	ation organized and operated cly supported organizations d o through 12d that describes	escribed in section 5	i09(a)(1) or se c	ction 509(a)(2). See section 509(a			
а		organizatio	supporting organization opera n(s) the power to regularly a Part IV, Sections A and B.							
b		manageme	supporting organization supents of the supporting organiza plete Part IV, Sections A a	tion vested in the sar						
С		Type III f	unctionally integrated. A sopraganization(s) (see instruction	upporting organizatio				ted with, its		
d		Type III n	on-functionally integrated integrated. The organization (s). You must complete Par	I. A supporting organi generally must satis	ization operated fy a distribution	in connection wi requirement and	th its supported orgar			
e		Check this	box if the organization receiv or Type III non-functionally	ed a written determir	nation from the I		pe I, Type II, Type II	I functionally		
f	Enter	r the number	of supported organizations				<u> </u>			
g	Provi	de the follow	ing information about the su	pported organization(т'					
	(i) N	(ii) Name of supported organization organization (iii) EIN (iii) Type of organization (described on lines 1- 10 above (see instructions))		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)					
					Yes	No				
Tota			tion Act Notice, see the In	, .	Cat. No. 11285		Schedule A (Form 9			

Sch	edule A (Form 990 or 990-EZ) 2019						Page 2
P	art II Support Schedule for	Organizations	Described in S	Sections 170(b)(1)(A)(iv) ar	nd 170(b)(1)(A	(vi)
	(Complete only if you ch						under Part III.
	If the organization failed	to qualify unde	r the tests listed	below, please	complete Part I	II.)	
	ection A. Public Support Calendar year		I				
	(or fiscal year beginning in) ▶	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(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 The value of services or facilities						
3	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions by each person (other than a						
	governmental unit or publicly						
	supported organization) included on						
	line 1 that exceeds 2% of the amount shown on line 11, column (f).						
6	Public support. Subtract line 5 from						
	line 4.						
<u>s</u>	ection B. Total Support		T		1	1	
	Calendar year (or fiscal year beginning in) ▶	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
7	Amounts from line 4						
8	Gross income from interest,						
	dividends, payments received on securities loans, rents, royalties and						
	income from similar sources						
9	Net income from unrelated business						
	activities, whether or not the						
10	business is regularly carried on Other income. Do not include gain or						-
	loss from the sale of capital assets						
	(Explain in Part VI.).						
11	Total support. Add lines 7 through 10						
12	Gross receipts from related activities,	etc. (see instruction	ons)			12	
13	First five years. If the Form 990 is for	or the organization	's first, second, th	ird, fourth, or fifth	n tax year as a sec	tion 501(c)(3) org	anization,
	check this box and stop here					▶ [
S	ection C. Computation of Publi						
14	Public support percentage for 2019 (li	ne 6, column (f) di	vided by line 11,	column (f))		14	-
15	Public support percentage for 2018 Sc	hedule A, Part II,	line 14			15	
16a	33 1/3% support test—2019. If the						
	and stop here. The organization qual	ifies as a publicly s	supported organiza	ation			▶□
b	33 1/3% support test—2018. If th	e organization did	not check a box o	on line 13 or 16a,	and line 15 is 33 i	1/3% or more, chec	k this
	box and stop here. The organization	qualifies as a pub	licly supported or	ganization			▶ 🗆
17 a	10%-facts-and-circumstances tes	t— 2019. If the org	ganization did not	check a box on lin	ne 13, 16a, or 16b	, and line 14	
	is 10% or more, and if the organization in Part VI how the organization meets	n meets the facts	r-and-circumstanci cumstances" test.	es test, check thi The organization	s box and stop n e qualifies as a publ	e re. Explain icly supported	
	organization			-			►□
h	10%-facts-and-circumstances tes	st— 2018. If the o	rganization did no	t check a box on I	ine 13, 16a, 16b,	or 17a, and line	
_	15 is 10% or more, and if the organiz	zation meets the "i	facts-and-circums	tances" test, chec	k this box and sto	p here.	
	Explain in Part VI how the organization			-		• •	. \Box
_	supported organization		haven 15 40-4	C- 10b 47 4	76		▶⊔
18	_						. □
	instructions		<u> </u>		- Cabadu	lo A (Form 000 o	▶ ⊔

Р	art III Support Schedule for							
	(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)							
S	tne organization falls to ection A. Public Support	quality under	the tests listed i	pelow, please co	ompiete Part II.)			
30	Calendar year	() 2015	(1) 2016	() 2247	(1) 2010		(O.T.)	
	(or fiscal year beginning in) ▶	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total	
1	Gifts, grants, contributions, and							
	membership fees received. (Do not include any "unusual grants.").							
2	Gross receipts from admissions,							
	merchandise sold or services							
	performed, or facilities furnished in any activity that is related to the							
	organization's tax-exempt purpose							
3	Gross receipts from activities that are							
	not an unrelated trade or business							
4	under section 513 Tax revenues levied for the							
•	organization's benefit and either paid							
_	to or expended on its behalf							
5	The value of services or facilities furnished by a governmental unit to							
	the organization without charge							
6	Total. Add lines 1 through 5							
7a	Amounts included on lines 1, 2, and							
L	3 received from disqualified persons Amounts included on lines 2 and 3							
D	received from other than disqualified							
	persons that exceed the greater of							
	\$5,000 or 1% of the amount on line 13 for the year.							
c	Add lines 7a and 7b							
8	Public support. (Subtract line 7c							
	from line 6.)							
Se	ection B. Total Support		1				Г	
	Calendar year (or fiscal year beginning in) ▶	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total	
9	Amounts from line 6							
10a	Gross income from interest,							
	dividends, payments received on							
	securities loans, rents, royalties and income from similar sources.							
b	Unrelated business taxable income							
	(less section 511 taxes) from							
	businesses acquired after June 30, 1975.							
С	Add lines 10a and 10b.							
11	Net income from unrelated business							
	activities not included in line 10b,							
	whether or not the business is regularly carried on.							
12	Other income. Do not include gain or							
	loss from the sale of capital assets							
12	(Explain in Part VI.) Total support. (Add lines 9, 10c,							
13	11, and 12.).							
14	First five years. If the Form 990 is for	the organization	n's first, second, th	nird, fourth, or fift	h tax year as a sec	tion 501(c)(3) o	ganization <u>,</u>	
	check this box and stop here						▶ ⊔	
	ection C. Computation of Public S			! (6))		1 1		
15	Public support percentage for 2019 (lin		•			15		
16	Public support percentage from 2018 S	-	<u> </u>			16		
	ection D. Computation of Investr Investment income percentage for 201			line 13 column (f	:))	17		
17 10	Investment income percentage for 201	-		-		17		
18 10-	331/3% support tests—2019. If the		•			18 33 1/3% and lin	e 17 is not	
	more than 33 1/3%, check this box and s							
	more than 33 1/3%, check this box and s 33 1/3% support tests—2018. If the							
ט	not more than 33 1/3%, check this box	-			•		_	
20	Private foundation. If the organization	-	-					
	ritvate foundation. If the organization	ni ulu not check a	a DOX ON UNE 14, I	.a, or iad, check	, unis pox and see I	HSGRUCHONS	. 📂 📖	

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

6

7

8

the organization had excess business holdings).

Sections A and D, and complete Part V.) Section A. All Supporting Organizations Yes No

1	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,	
	describe the designation. If historic and continuing relationship, explain.	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

in section 509(a)(1) or (2). 2 Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.

3a 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

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.

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. 4a 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 4b supervised by or in connection with its supported organizations. 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

3с

10b

Schedule A (Form 990 or 990-EZ) 2019

to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes. 4c Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and 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

(c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported 5a amendment to the organizing document). Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document? 5b

5c Substitutions only. Was the substitution the result of an event beyond the organization's control?

Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) 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 organization's supported organizations? If "Yes," provide detail in Part VI. 6

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 substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ) .

7 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

Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes,"

provide detail in Part VI.

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

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

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

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

which the supporting organization also had an interest? If "Yes," provide detail in Part VI. 9c

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

10a certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 10b below. 10a

	edule A (101111 330 01 330 E2) 2013			age 3
Pa	rt IV Supporting Organizations (continued)			
_			Yes	No
	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		
	A family member of a person described in (a) above?	11b		
	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		
S	ection 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 elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part 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	-		
2	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	2		
	organization.			
S	ection 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			
	each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the	1		
	supporting organization was vested in the same persons that controlled or managed the supported organization(s).			
S	ection 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 tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the 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 tax			
	year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.	3		
S	ection 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 instruct	ions):		
	The organization satisfied the Activities Test. Complete line 2 below.			
	b			
•	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see	instru	ctions)	
2	Activities Test. Answer (a) and (b) below.	ſ	Yes	No
•	a 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		
ı	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 supported organizations? <i>Provide details in Part VI</i> .	3a		
	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.	3h		

3b

1	Type III Non-Functionally Integrated 509(a)(3) Supporting O Check here if the organization satisfied the Integral Part Test as a qualifying true.			. Part VIV See
	Check here if the organization satisfied the Integral Part Test as a qualifying truinstructions. All other Type III non-functionally integrated supporting organization			
	Section A - Adjusted Net Income		(A) Prior Year	(B) Current Yea (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		
5	Depreciation and depletion	5		
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 Yea (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		
	Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6		

2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	
4	Amounts paid to acquire exempt-use assets	
5	Qualified set-aside amounts (prior IRS approval required)	
6	Other distributions (describe in Part VI). See instructions	
7	Total annual distributions. Add lines 1 through 6.	

7 Total annual distributions. Add lines 1 through 6.					
8 Distributions to attentive supported organizations to wh details in Part VI). See instructions					
9 Distributable amount for 2019 from Section C, line 6					
10 Line 8 amount divided by Line 9 amount					
Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2019	(iii) Distributable Amount for 2019		
1 Distributable amount for 2019 from Section C, line 6					
2 Underdistributions, if any, for years prior to 2019 (reasonable cause required explain in Part VI).					

8 Distributions to attentive supported organizations to wh details in Part VI). See instructions			
9 Distributable amount for 2019 from Section C, line 6			
10 Line 8 amount divided by Line 9 amount			
Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2019	(iii) Distributable Amount for 2019
1 Distributable amount for 2019 from Section C, line 6			
Underdistributions, if any, for years prior to 2019 (reasonable cause required explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2019:			
a From 2014			
b From 2015			
c From 2016		-	

10 Line 8 amount divided by Line 9 amount			
Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2019	(iii) Distributable Amount for 2019
1 Distributable amount for 2019 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2019 (reasonable cause required explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2019:			
a From 2014			
b From 2015			
c From 2016			
d From 2017			
e From 2018			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			

h Applied to 2019 distributable amount i Carryover from 2014 not applied (see

j Remainder. Subtract lines 3g, 3h, and 3i from 3f. 4 Distributions for 2019 from Section D, line 7:

a Applied to underdistributions of prior years **b** Applied to 2019 distributable amount c Remainder. Subtract lines 4a and 4b from 4.

instructions)

d Excess from 2018. e Excess from 2019.

\$

5 Remaining underdistributions for years prior to 2019, if any. Subtract lines 3g and 4a from line 2. If the amount is greater than zero, explain in Part VI. See instructions.		
6 Remaining underdistributions for 2019. Subtract lines 3h and 4b from line 1. If the amount is greater than zero, explain in Part VI. See instructions.		
7 Excess distributions carryover to 2020. Add lines 3j and 4c.		
8 Breakdown of line 7:		
a Excess from 2015		
b Excess from 2016		
c Excess from 2017.		

Schedule A (Form 990 or 990-EZ) (2019)

Additional Data

Software ID: Software Version:

EIN: 22-1853774

Name: Ranney School

Part VI
Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V, Section B, line 1e; Part V Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions).

Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions).

Facts And Circumstances Test

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

DLN: 93493070013451

OMB No. 1545-0047

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.

Open to Public Inspection

Department of the Treasury Internal Revenue Service

(Form 990)

▶ Go to www.irs.gov/Form990 for instructions and the latest information. Name of the organization **Employer identification number** Ranney School 22-1853774 Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year 1 2 Aggregate value of contributions to (during year) Aggregate value of grants from (during year) Aggregate value at end of year 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No 6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible ☐ Yes ☐ No Part II **Conservation Easements.** Complete if the organization answered "Yes" on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure ☐ Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Year 2b Number of conservation easements on a certified historic structure included in (a) 20 Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register . . . Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the 3 tax year 🕨 Number of states where property subject to conservation easement is located > 5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 6 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) ☐ Yes In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items. If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:

If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the

 $\boldsymbol{c} \ \ \text{Leasehold improvements}$

d Equipment

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).)

Sche	dule D (Form 990) 2019								Page 2
Par	Organizations Ma	aintaining Collections	of Art, Hist	orical T	reası	ıres, or Other	Similar As	sets (cont	:inued)
3	Using the organization's acq items (check all that apply):			•	the fo	llowing that are	a significant u	ise of its col	lection
а	Public exhibition			d 🗌	Loan	or exchange pro	grams		
b	Scholarly research			е 🗌	Othe	r			
С	Preservation for future	generations							
4	Provide a description of the Part XIII.	organization's collections a	nd explain how	they furt	her the	e organization's e	exempt purpo	se in	
5	During the year, did the orgassets to be sold to raise fur							☐ Yes	□ No
Par		odial Arrangements. ganization answered "Ye	es" on Form 9	990, Part	: IV, li	ne 9, or report	ed an amou	ınt on Forr	n 990, Part
1a	Is the organization an agent included on Form 990, Part	•						☐ Yes	□ No
h	If "Yes," explain the arrange	ement in Bart VIII and com	nlata tha fallaw	ing table	,		Λ	mount	
b c	Beginning balance	'		-		1c	A	vant	
d	Additions during the year .					1			
e	Distributions during the year.					· ·			
f	Ending balance					·			
	•						1.111. 2		
2a	Did the organization include							_	∐ No
	If "Yes," explain the arrange		ere if the expla	nation ha	s been	provided in Part	XIII		
Pa	rt V Endowment Fund	ds. ganization answered "Ye	es" on Form (000 Dari	· T\/ i	ne 10			
	Complete in the on			b) Prior ye		(c) Two years back	(d) Three yea	ars back (e)	Four years back
1a	Beginning of year balance .		442,464	39	3,177	225,30	6	212,457	205,247
b	Contributions				19	154,58	1		5,000
c	Net investment earnings, gair	rs, and losses	19,629	4	9,268	13,29	0	12,848	2,210
d	Grants or scholarships								
	Other expenditures for facilities and programs	es							
f	Administrative expenses .								
g	End of year balance		462,093	44	2,464	393,17	7	225,305	212,457
2 a	Provide the estimated perce Board designated or quasi-e	-	nd balance (lin	e 1g, colu	ımn (a)) held as:			
b	Permanent endowment >	71.320 %							
c	Temporarily restricted endov	wment ▶ 28.680 %							
	The percentages on lines 2a	, 2b, and 2c should equal 1	.00%.						
3a	Are there endowment funds organization by:	not in the possession of the	e organization	that are h	ield an	d administered f	or the		Yes No
	(i) unrelated organizations							3a(i)	
	(ii) related organizations .							3a(ii))
b •	If "Yes" on 3a(ii), are the re				₹?.			3b	
4 Par	Describe in Part XIII the interest VI Land, Buildings,	and Equipment.							
	•	ganization answered "Ye							
	Description of property	(a) Cost or other basis (investment)	(b) Cost or o	ther basis (other)	(c) Accumulated	depreciation	(d) E	Book value
 1a	Land			1,0	00,500				1,000,500
b	Buildings			41,5	51,244		18,022,211		23,529,033

7,294,751

340,908

622,437

340,908

6,672,314

Part VII	Investments—Other Securities.	D=-+ T) /	: 446	. C F 000 F	\t.\/	line 10
	Complete if the organization answered "Yes" on Form 990, (a) Description of security or category (including name of security)	(b) Book value	ine 11b	c.See Form 990, F (c) Method Cost or end-of-	d of va	luation:
(1) Financia	ıl derivatives	value				
(2) Closely- (3)Other	held equity interests					
(A)						
(B)						
(C)						
(D)						
(E)						
(F)						
(G)						
(H)						
Total. (Colum	n (b) must equal Form 990, Part X, col. (B) line 12.)	•				
Part VIII	Investments—Program Related. Complete if the organization answered 'Yes' on Form 990, I	Part IV li	ine 11c	See Form 990 I	Part X	Cline 13
	(a) Description of investment	raic IV, i	ille 11c	(b) Book value	(c)	Method of valuation: or end-of-year market
(1)						value
(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 'Yes' on Form 990, P (a) Description	art IV, III	ne 11a.	. See Form 990, Par	t X, lir	ne 15. (b) Book value
(1)						
(2)						
(3)						
(4)						
(5)						
(6)						
(7)						
(8)						
(9)						
	mm (b) must equal Form 990, Part X, col.(B) line 15.)				•	
Part X	Other Liabilities. Complete if the organization answered 'Yes' on Form 990, P	art IV, li	ne 11e	or 11f.See Form		
1.	(a) Description of liability				(b) E	
	income taxes ITEREST LIABILITY				1,330	.466
(2)	TENEDI ENGLETT				1,330	, 100
(3)						
(4)						
(5)						
(6)						
(7)						
(8)						<u></u>
(9)						
	n (b) must equal Form 990, Part X, col.(B) line 25.)				1,330	0,466
2. Liability fo	or uncertain tax positions. In Part XIII, provide the text of the footnot			ion's financial stater	nents	
uncertain ta	x positions under FIN 48 (ASC 740). Check here if the text of the foot	note nas t	been pro	viueu in Part XIII		

2

b

1

2

C

d

3

4

b

5

Part XIII

See Additional Data Table

Schedule D (Form 990) 2019

Page 4

691,785

20,576,993

1,831,569

22,408,562

18,616,862

76,744

18,540,118

1,831,569

20.371.687

Schedule D (Form 990) 2019

Donated services and use of facilities	2b		
Recoveries of prior year grants	2c		
Other (Describe in Part XIII.)	2d	76,744	

c

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

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

е 3 4

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

Net unrealized gains (losses) on investments

Investment expenses not included on Form 990, Part VIII, line 7b .

b

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

XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

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

Add lines **4a** and **4b**

C 5

Amounts included on line 1 but not on Form 990, Part IX, line 25:

Donated services and use of facilities . . .

Add lines 2a through 2d .

Return Reference

Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Total expenses and losses per audited financial statements

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 . . .

Add lines **4a** and **4b**

Supplemental Information

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

4b

4a

2a 2b

2c

2d

4a 4b

Explanation

2a

76,744

1,831,569

615.041

1,831,569

2e

3

4c

5

2e 3

4c

5

chedule D (Form 990) 2019	Page 5
Part XIII Supplemental Information (continued)	
Return Reference Explanation	

Schedule D (Form 990) 2019

Additional Data

Return Reference

part XI, LINE 2D

EIN: 22-1853774 Name: Ranney School **Supplemental Information**

FUNDRAISING EXPENSE = \$76,744

Software ID: Software Version:

Explanation

Supplemental Information Return Reference Explanation FINANCIAL AID \$1,830,197 BAD DEBTS RECOVERIES \$ 1,372 TOTAL \$1,831,569 PART XI, LINE 4B

pplemental Information	
Return Reference	Explanation
RT XII, LINE 2D	FUNDRAISING EXPENSE = \$ 76,744

Sur

Supplemental Information Return Reference Explanation FINANCIAL AID \$1,830,197 BAD DEBTS RECOVERIES \$ 1,372 TOTAL \$1,831,569 PART XII, LINE 4B

Supplemental Information	
Return Reference	Explanation
PART X, LINE 2	The Internal Revenue Service ("IRS") has classified the School as a tax-exempt corporation under Section 501(c)(3) of the Internal Revenue Code. Management has analyzed the tax positions taken by the School, and has concluded that as of June 30, 2019 and 2020, there are no uncertain positions taken or expected to be taken that would require recognition of a liability or disclosure in the financial statements. The School recognizes accrued interes t and penalties associated with uncertain tax positions, if any. There was no income tax-r elated interest or penalties recorded for the years ended June 30, 2019 and 2020.

Supplemental Information	
Return Reference	Explanation
PART V, LINE 4	The endowment supports student scholarships and financial aid and teacher professional development.

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efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493070013451 OMB No. 1545-0047 SCHEDULE E **Schools** (Form 990 or 990-▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 13, or Form 990-EZ, Part VI, line 48. ▶ Attach to Form 990 or Form 990-EZ. Open to Public ▶ Go to www.irs.gov/Form990EZ for the latest information. Inspection Department of the Treasury Namel Retherosganization **Employer identification number** Rannev School 22-1853774 Part I YES NO Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, 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? 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," 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 4b Yes c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing 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: 5a Nο **b** Admissions policies? 5b Νo c Employment of faculty or administrative staff? . 5c Νo **d** Scholarships or other financial assistance? . 5d Νo e Educational policies? . . 5e No f Use of facilities? . . 5f No **g** Athletic programs? 5g Νo 5h Νo 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? Yes 6a b Has the organization's right to such aid ever been revoked or suspended? 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. Cat. No. 50085D Schedule E (Form 990 or 990-EZ) (2019)

Schedule E (Form 990 or 990EZ) (2019)	Page 2
Part II Supplemental Information. Provide the expla any other additional information. See instructions.	anations required by Part I, lines 3, 4d, 5h, 6b, and 7, as applicable. Also provide
Return Reference	Explanation
LINE 3	NEWSPAPER ADVERTISING AND REGISTRATION LITERATURE PUBLICIZE THE SCHOOL NONDISCRIMINATION POLICY.
	Schedule E (Form 990 or 990-EZ) (2019)

efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493070013451 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 Go to www.irs.gov/Form990 for instructions and the latest information. **Employer identification number** Name of the organization Ranney School 22-1853774 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 Internet and email solicitations ☐ 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 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. (i) Name and address of individual (ii) Activity (iii) Did (iv) Gross receipts (v) Amount paid to (vi) Amount paid to or entity (fundraiser) fundraiser have from activity (or retained by) (or retained by) custody or fundraiser listed in organization control of col. (i) contributions? Yes No 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. For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Cat. No. 50083H Schedule G (Form 990 or 990-EZ) 2019

- 1		(a)Event #1	(b) Event #2	(c)Other events	(d) Total events (add col. (a) through
		Panther Ball	BOOK FAIR	8	col. (c))
Keverkie		(event type)	(event type)	(total number)	
	1 Gross receipts	207,838	17,389	25,522	250,74
	2 Less: Contributions	210,439	2.7555		210,43
- 1	3 Gross income (line 1 minus line 2)	-2,601	17,389	25,522	·
	4 Cash prizes				
	5 Noncash prizes				
22	6 Rent/facility costs				
<u> </u>	7 Food and beverages				
Direct Expenses	8 Entertainment				
	9 Other direct expenses	39,747	13,224	23,772	76,74
				_	
	10 Direct expense summary. Add lines 4 t	through 9 in column (d)			76,74
	11 Net income summary. Subtract line 10	from line 3, column (d)			76,74: -36,43:
	·	from line 3, column (d)		▶ V, line 19, or reported	-36,43
Pari	11 Net income summary. Subtract line 10 Gaming. Complete if the organizations.	from line 3, column (d)		► V, line 19, or reported (c) Other gaming	-36,43 more than \$15,000 (d) Total gaming (add
Part	11 Net income summary. Subtract line 10 111 Gaming. Complete if the organism on Form 990-EZ, line 6a.	from line 3, column (d) anization answered "Ye	s" on Form 990, Part I (b) Pull tabs/Instant		-36,43 more than \$15,000 (d) Total gaming (add
Part Keverine	11 Net income summary. Subtract line 10 Gaming. Complete if the organizations.	from line 3, column (d) anization answered "Ye	s" on Form 990, Part I (b) Pull tabs/Instant		-36,43 more than \$15,000 (d) Total gaming (add
Part Keverine	11 Net income summary. Subtract line 10 Gaming. Complete if the organism on Form 990-EZ, line 6a. 1 Gross revenue	from line 3, column (d) anization answered "Ye	s" on Form 990, Part I (b) Pull tabs/Instant		-36,43 more than \$15,000
Expenses Keverne	11 Net income summary. Subtract line 10 Gaming. Complete if the organism on Form 990-EZ, line 6a. 1 Gross revenue	from line 3, column (d) anization answered "Ye	s" on Form 990, Part I (b) Pull tabs/Instant		-36,43 more than \$15,000 (d) Total gaming (add
orect Expenses Reversie	11 Net income summary. Subtract line 10 Gaming. Complete if the organ on Form 990-EZ, line 6a. 1 Gross revenue	from line 3, column (d) anization answered "Ye	s" on Form 990, Part I (b) Pull tabs/Instant		-36,43 more than \$15,000 (d) Total gaming (add
orect Expenses Reversie	11 Net income summary. Subtract line 10 Gaming. Complete if the organ on Form 990-EZ, line 6a. 1 Gross revenue	from line 3, column (d) anization answered "Ye	s" on Form 990, Part I (b) Pull tabs/Instant		-36,43 more than \$15,000 (d) Total gaming (add
Direct Expenses Reverale	11 Net income summary. Subtract line 10 Gaming. Complete if the organ on Form 990-EZ, line 6a. 1 Gross revenue	from line 3, column (d) anization answered "Ye (a) Bingo	s" on Form 990, Part I (b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	-36,43 more than \$15,000 (d) Total gaming (add
Dieci Expenses Reveixie	1 Gross revenue	rom line 3, column (d) anization answered "Ye (a) Bingo Yes	s" on Form 990, Part I (b) Pull tabs/Instant bingo/progressive bingo — Yes%	(c) Other gaming	-36,43 more than \$15,000 (d) Total gaming (add
Part Experises Revenue	Gaming. Complete if the organ on Form 990-EZ, line 6a. Gross revenue	rom line 3, column (d) anization answered "Ye (a) Bingo Yes % No through 5 in column (d)	s" on Form 990, Part I (b) Pull tabs/Instant bingo/progressive bingo Yes % No	(c) Other gaming Yes % No	-36,43 more than \$15,000 (d) Total gaming (add
a Direct Experises Keverine	Gaming. Complete if the organization form 990-EZ, line 6a. Gaming. Complete if the organization form 990-EZ, line 6a. Gross revenue	rom line 3, column (d) anization answered "Ye (a) Bingo Yes % No through 5 in column (d) t line 7 from line 1, column (d) aming activities in each of	s" on Form 990, Part I (b) Pull tabs/Instant bingo/progressive bingo Yes	(c) Other gaming Yes % No	-36,43 more than \$15,000 (d) Total gaming (add col.(a) through col.(c))
Olect Experises Reverse	Gaming. Complete if the organization on Form 990-EZ, line 6a. Gaming. Complete if the organization on Form 990-EZ, line 6a. Gross revenue	rom line 3, column (d) anization answered "Ye (a) Bingo Yes % No through 5 in column (d) t line 7 from line 1, column (d) aming activities in each of	(b) Pull tabs/Instant bingo/progressive bingo Yes	(c) Other gaming Yes % No	-36,43 more than \$15,000 (d) Total gaming (add col.(a) through col.(c))

Sche	dule G (Form 990 or 990-EZ) 20	19				F	age 3
11	Does the organization conduct	gaming activities with nonmembers	5?		Yes	Пио	
12	Is the organization a grantor, be formed to administer charitable		member of a partnership or other entity		Yes		
13	Indicate the percentage of gam	ning activity conducted in:					
а	The organization's facility .			13a			%
b	An outside facility			13b			%
14	Enter the name and address of	the person who prepares the organ	nization's gaming/special events books and	records:			
	Name •						
	Address >						
15a			m the organization receives gaming		· Yes	Пио	
b	If "Yes," enter the amount of g	aming revenue received by the orgained by the third party $ ightharpoons$	anization 🕨 \$ and	the			
c	If "Yes," enter name and addre	ss of the third party:					
	Name •						
	Address ▶						
16	Gaming manager information:						
	Name 🟲						
	Gaming manager compensation	1 ▶ \$					
	Description of services provided	d ▶					
	☐ Director/officer	☐ Employee	☐ Independent contractor				
17	Mandatory distributions:						
а	<u>-</u>		stributions from the gaming proceeds to		□Yes	Пио	
b	Enter the amount of distributio	ns required under state law distribu	ited to other exempt organizations or spent	:	☐ 1e3		
		pt activities during the tax year					
Pai			ions required by Part I, line 2b, colum licable. Also provide any additional inf				s.
	Return Reference		Explanation				

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

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

Schedule I | Content of the select landscape mode (21" x 8.5") when printing.

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

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

▶ Attach to Form 990.

► Go to <u>www.irs.gov/Form990</u> for the latest information.

OMB No. 1545-0047

DLN: 93493070013451

2019
Open to Public

Inspection

nternal Revenue Service							
Name of the organization Ranney School						Employer identifica	ation number
Part I General Inform	nation on Grants	and Assistance				22-1853774	
1 Does the organization mai			the grante or accietance	the grantees' eligibility	for the grapts or assistant		
the selection criteria used						.e, and	☑ Yes ☐ No
2 Describe in Part IV the org	•	_	_				
Part II Grants and Other that received more	Assistance to Dom than \$5,000, Part II	estic Organizations a	and Domestic Governme ditional space is needed.	ents. Complete if the o	rganization answered "Yes'	on Form 990, Part IV, line	21, for any recipient
(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1)							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							
2 Enter total number of sect	ion 501(c)(3) and go	overnment organization:	s listed in the line 1 table			•	
3 Enter total number of other	er organizations liste	d in the line 1 table .				-	

(Form 990)

Department of the

Schedule I (Form 990) 2019

Explanation Return Reference

OUALIFY.

part i, line 2 FINACIAL AID GRANTS ARE AWARDED TO FAMILIES. AT AN AMOUNT DETERMINED BY THE SCHOOL, THAT REQUIRE NEED BASED AID FOR THOSE WHO APPLY AND

efil	e GRAPHIC pr	int - DO NOT PROCESS A	s Filed Data	a -	DLN: 93493	0700	134	51
Sch	edule J	Con	npensati	ion Information	ОМВ	lo. 154	45-00)47
(For	n 990)	For certain Officers,		rustees, Key Employees, and Highest				
		► Complete if the organ	Compensa ization answ	ited Employees ered "Yes" on Form 990, Part IV, line 23.	2	01	9	
Б			▶ Attach	to Form 990. instructions and the latest information.		n to		
•	tment of the Treasury al Revenue Service	F Go to <u>www.ms.gov</u> /	101111990	mstructions and the fatest miormation.		spec		
	ne of the organiza	ation		Employer	dentification	numl	ber	
Kan	ney sensor			22-18537	74			
Pa	rt I Questi	ons Regarding Compensatio	n					
						Y	es	No
1a				the following to or for a person listed on Form y relevant information regarding these items.				
		s or charter travel	✓	Housing allowance or residence for personal us				
	_	companions		Payments for business use of personal residen	ce			
		nification and gross-up payments		Health or social club dues or initiation fees Personal services (e.g., maid, chauffeur, chef)				
	Discretion	nary spending account		reisonal services (e.g., maid, chauffeur, cher)				
b				follow a written policy regarding payment or ve? If "No," complete Part III to explain	1	ь ү	es	
2				or allowing expenses incurred by all r, regarding the items checked on Line 1a? .		2 Y	es	
	directors, truste	es, officers, including the CEO/Exe	cutive Director	, regarding the items checked on Line 1a: .				
3		if any, of the following the filing org EO/Executive Director. Check all th		d to establish the compensation of the				
	_	•		CEO/Executive Director, but explain in Part III.				
	✓ Compensa	ation committee	✓	Written employment contract				
		ent compensation consultant	✓	Compensation survey or study				
	✓ Form 990	of other organizations	\checkmark	Approval by the board or compensation comm	ittee			
4	During the year related organiza), Part VII, Se	ction A, line 1a, with respect to the filing organi	zation or a			
а	Receive a sever	ance payment or change-of-control	payment? .		4	a		No
b		• •		ified retirement plan?	4	b		No
С		. , , . ,		nsation arrangement?	4	·c		No
	If "Yes" to any o	of lines 4a-c, list the persons and p	rovide the app	licable amounts for each item in Part III.				
	Only 501(c)(3), 501(c)(4), and 501(c)(29) or	raanizations	must complete lines 5-9				
5		ed on Form 990, Part VII, Section A	-	•				
	compensation c	ontingent on the revenues of:						
а	The organization	1?			5	а		No
b		anization?			. 5	b		No
_	,	•						
6		ed on Form 990, Part VII, Section A ontingent on the net earnings of:	a, iine Ta, did i	the organization pay or accrue any				
a	-	1?				a .		No
b		anization?			6	b	-	No_
7	•	•	line 15 did 6	the organization provide any nonfixed				
,				rt III		7		No
8				red pursuant to a contract that was section 53.4958-4(a)(3)? If "Yes," describe				
	in Part III . .					3		No
9				presumption procedure described in Regulation		,		
For F	Panerwork Redu	iction Act Notice, see the Instru	ctions for Fo	orm 990. Cat. No. 50053T	Schedule J (F	rm 9	90) 2	2019

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

(A) Name and Title		(B) Breakdown	of W-2 and/or 1099-MIS	C compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation in
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(i)-(D)	column (B) reported as deferred on prior Form 990
L JOHN GRIFFITH HEAD OF SCHOOL	(i) (ii)	475,703			35,800	28,550	540,053	
2 Charles Zalewski CFO	(i) (ii)	208,361			12,694	22,800	243,855	
3 ANDREA DANIAL S HEAD	(i) (ii)	168,189			9,554	23,451	201,194	
1 JENNIFER COLLINS CHIEF ADVANCEMENT DFFICER	(i) (ii)	197,140				25,491	222,631	
GREGORY MARTIN US HEAD	(i) (ii)	270,083			11,304	25,555	306,942	
	+							
	+							
	+							

Schedule J (Form 990) 2019	Page 3						
Part III Supplemental Information							
Provide the information, explanation, or	descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.						
Return Reference	Explanation						
PART I, LINE 1	THE HEAD OF SCHOOL RECEIVES A HOUSING ALLOWANCE WHICH IS TREATED AS TAXABLE COMPENSATION.						
PART II, COLUMN D	Non-taxable benefits for individuals listed include Life and STD Insurance, medical and dental benefits paid by the School.						
	Schedule 1 (Form 990) 2019						

DLN: 93493070013451 Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing. OMB No. 1545-0047 Schedule K **Supplemental Information on Tax-Exempt Bonds** (Form 990) ▶ Complete if the organization answered "Yes" to Form 990, Part VI, line 24a. Provide descriptions, explanations, and any additional information in Part VI. Open to Public ▶ Attach to Form 990. Department of the Treasury Internal Revenue Service ▶Go to www.irs.gov/Form990 for instructions and the latest information. Inspection Name of the organization **Employer identification number** Ranney School 22-1853774 Part I **Bond Issues** (b) Issuer EIN (c) CUSIP # (f) Description of purpose (i) Pool (a) Issuer name (d) Date issued (e) Issue price (q) Defeased (h) On behalf of financing issuer Yes No Yes No Yes No 21,146,500 BUILDING Х NEW JERSEY ECONOMIC 22-2045817 06-30-2015 Χ Χ DEVELOPMENT AUTHORITY CONSTRUCTION/REFINANCE **Proceeds** Part ${f I}$ C В D Α 2 3 21,146,500 5 6 20,938,500 7 208,000 8 9 10 11 12 13 Yes No Yes No Yes No Yes No Were the bonds issued as part of a current refunding issue of tax-exempt 14 Χ Were the bonds issued as part of an advance refunding issue of taxable 15 Χ Χ 16 Does the organization maintain adequate books and records to support the final allocation of 17 Χ Part 🏻 **Private Business Use** Α R C D Yes No Yes No Yes No Yes No Was the organization a partner in a partnership, or a member of an LLC, which owned property Χ Are there any lease arrangements that may result in private business use of bond-financed Cat. No. 50193E Schedule K (Form 990) 2019 For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule K (Form 990) 2019

d

6

Part IV

b

C

Arbitrage

Page 2

D

Schedule K (Form 990) 2019

Yes

No

1			•		9		· .	, .	,
1		Yes	No	Yes	No	Yes	No	Yes	No
3a	Are there any management or service contracts that may result in private business use of bond-financed property?		Х						
b	If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts relating to the financed property?								
С	Are there any research agreements that may result in private business use of bond-financed							1	

Α

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Χ

Χ

Χ

Χ

Χ

Χ

10 %

Yes

Χ

Х

Wells fargo

Χ

Χ

Χ

Χ

Χ

Yes

В

No

C

No

Yes

0 %

'	counsel to review any management or service contracts relating to the financed property?	
	Are there any research agreements that may result in private business use of bond-financed property?	
	If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside counsel to review any research agreements relating to the financed property?	ſ

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

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)

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

Exception to rebate?

hedge with respect to the bond issue?

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

Was the hedge superintegrated?

Term of hedge

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

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

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

Were gross proceeds invested in a guaranteed investment contract (GIC)?	Х

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

Schedule K (Form 990) 2019

period?

Arbitrage (Continued)

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

if self-remediation is not available under applicable regulations?

the GIC satisfied?

requirements of section 148? . . .

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

No

Yes

Χ

Yes

Yes

No

No

Yes

Nο

No

D

Yes

Page 3

No

D

Yes

efile GRAPHIC	C print - C	O NO	T PROCES	S As	Filed Data -					DL	N: 93	4930	7001	L3451
Schedule L			Tran	sacti	ons with	Intereste	d Persor	าร			01	MB No.	1545	-0047
(Form 990 or 990	-EZ) ► Co	omplet	e if the org	anizatio . 28b, or	n answered "Ye 28c, or Form 9 tach to Form 9	es" on Form 9 990-EZ, Part V	90, Part IV, li , line 38a or 4	ines 2	5a, 2	25b, 20	5,	2 0	1	9
Department of the Trea		▶G	o to <u>www.i</u>		F <u>orm990</u> for ins			forma	tion.		(Open t Insp		
Name of the orga Ranney School	anization							Er	nplo	yer ide	entifica	ation n		
					101()(0)	=0.1 () (1)	=0.16			3774				
			•		i01(c)(3), sectior on Form 990, Par		•		_					
) Name of d				b) Relationship					escript			Corr	ected?
						organization			tr	ansacti	on	Ye	es	No
								\perp						
_								+						
Part II Loa	ans to and applete if the prized an am	d/or F organi ount or	From Inter zation answe n Form 990, (c) Purpose	rested I ered "Yes Part X, li (d) Lo	Persons. " on Form 990-E ne 5, 6, or 22 an to or from the rganization?	Z, Part V, line 3	,	(g)	rt IV, In	line 26	s; or if h) ved by rd or nittee?	(i	aniza) Writ	ten
				То	From			Yes	No	Yes	No	Yes	l	No
												\vdash		
_														
Total Part III Gra			D64	 		▶ \$								
	nts or As: Inlete if th	sistan e orga	i ce Bene rit inization an	i ng in i Iswered	erested Pers "Yes" on Form	ons. 1990: Part IV.	line 27							
(a) Name of inter		n (b)	Relationship erested perso organizat	betwee	n (c) Amoun	t of assistance	(d) Type (of assi	stanc	e	(e) Pu	rpose o	f assi	stance
(1) John Griffith		Head	l of School			28,600	Tution Remis	sion		E	ducatio	n for ch	ildre	ı
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For Paperwork Red	uction Act N	otice, s	ee the Instru	ctions for	Form 990 or 990)-EZ. C:	at. No. 50056A		Sci	nedule l	l (Form	990 or	990-	F7) 2(

Explanation

Return Reference

Schedule I. (Form 990 or 990-F7) 2019

DLN: 93493070013451 SCHEDULE M OMB No. 1545-0047 **Noncash Contributions** (Form 990) 2019 ▶Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30. Attach to Form 990. ▶Go to www.irs.gov/Form990 for the latest information. Open to Public Department of the Treasury Internal Revenue Service Inspection Name of the organization Employer identification number Ranney School 22-1853774 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 . . Art—Historical treasures Art—Fractional interests Books and publications **5** Clothing and household aoods 6 Cars and other vehicles 7 Boats and planes . . 8 Intellectual property . . 26,813 MARKET VALUE 9 Securities-Publicly traded . Χ 10 Securities—Closely held stock . 11 Securities—Partnership, LLC, or trust interests . . . 12 Securities—Miscellaneous . 13 Qualified conservation contribution-Historic structures 14 Qualified conservation contribution—Other . . 15 Real estate—Residential . 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 . . Archeological artifacts . . Χ 1 9,444 MARKET VALUE Robotics Other ► (Equipment New Parent Χ 9,290 Market Value Welcome Other ► (Reception Χ 1 9,965 Market Value Gift to Baseball Other ▶ (Team Other Gifts in 6,637 Market Value Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement 29 Yes No 30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required to be used for exempt 30a Nο **b** If "Yes," describe the arrangement in Part II. 31 31 Nο Does the organization have a gift acceptance policy that requires the review of any nonstandard 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. 33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II. For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat. No. 51227J Schedule M (Form 990) (2019)

Schedule M (Form 990) (2019)	Page 2					
	tion. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization					
is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.						
Return Reference	Explanation					
	Schedule M (Form 990) (2019)					

efile GRAPH	IC print - DO NOT PROCESS As Filed Data -	DLN	: 93493070013451
SCHEDUL (Form 990 or EZ) Department of the T	m 990 or 990-EZ o specific questions on onal information. EZ. est information.	OMB No. 1545-0047 2019 Open to Public Inspection	
tamel & the of g Ranney School 990 Schedule	e O, Supplemental Information	Employer iden 22-1853774	tification number
Return Reference	Explanation		
PART VI, LINE 12C	THE MEMBERS OF THE BOARD OF TRUSTEES ANNUALLY COMPLE UESTIONNAIRE. THE TRUSTESS SHALL EXERCISE THE UTMOST G NG UPON THEIR DUTIES TO THE ORGANIZATION AND ITS PROPER S, THE INDIVIDUAL WITH THE CONFLICT IS EXPECTED TO DISCLOSE CONFLICT. RANNEY SCHOOL'S POLICY REQUIRES THAT A POTE TED AT ANY TIME THAT IT ARISES.	OOD FAITH IN ALL TRANSACTION RTIES. IF A POTENTIAL CONFLIC SE IN WRITING THE EXISTENCE	ONS TOUCHI CT ARISE E OF TH

990 Schedule O, Supplemental Information

Reference	Explanation
PART VI.	FORM 990 IS DISTRIBUTED TO THE SCHOOL'S BOARD OF TRUSTEES PRIOR TO FILING FOR REVIEW AND COMMENT.

Evolopotion

LINE 11B

Datum

Return Reference	Explanation
PART VI, LINE 15	THE HEAD OF SCHOOL'S COMPENSATION IS DETERMINED BY THE COMPENSATION COMMITTEE OF THE BOARD OF TRUSTEES. TO DETERMINE COMPENSATION, THE COMMITTEE REVIEWS A COMPARATIVE COMPENSATION REPORT OBTAINED FROM NAIS. THIS REPORT PROVIDES BENCHMARKING INFORMATION REGARDING COMPENS ATION OF HEADS OF SCHOOL FROM A NUMBER OF PEER INDEPENDENT SCHOOLS. IN ADDITION, THE FULL B OARD CONDUCTS AN ANNUAL REVIEW OF THE HEAD'S PERFORMANCE IN RELATION TO GOALS. THE COMPENS ATION COMMITTEE REPORTS ITS RECOMMENDATIONS TO THE EXECUTIVE COMMITTEE OF THE BOARD. THE C OMMITTEE'S DELIBERATION AND DECISIONS ARE DOCUMENTED IN MEETING MINUTES. COMPENSATION OF T HE CHIEF FINANCIAL OFFICER AND OTHER KEY ADMINISTRATIVE EMPLOYEES IS DETERMINED BY THE HEAD OF SCHOOL USING COMPARATIVE BENCHMARKING DATA FROM NAIS REGARDING COMPENSATION OF COMPAR ABLE ADMINISTRATORS AT A NUMBER OF PEER INDEPENDENT SCHOOLS. THE COMPENSATION OF THESE KEY ADMINISTRATORS COMPARED TO BENCHMARKED DATA IS REVIEWED BY THE FINANCE COMMITTEE OF THE B OARD WHICH IS REFLECTED IN THE MINUTES.

Return Explanation

Reference	
PART VI,	RANNEY SCHOOL MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL STA

LINE 19 TEMENTS AVAILABLE TO THE PUBLIC BY WRITTEN REQUEST TO THE SCHOOL'S BUSINESS OFFICE..

990 Schedule O, Supplemental Information

Reference	Explanation
PART XI	Change in value of heneficial interest in other charitable trust = \$29,822 Change in value of split interest agreement = \$(740,950)

Evalanation

FARLAI. LINE 9

Doturn

Return Explanation

Reference

PART XII,

THERE WERE NO CHANGES IN THE OVERSIGHT OR SELECTION PROCESS DURING THE TAX YEAR
LINE 2C

Return Explanation

Reference
PART VII, JOHN GRIFFITH AND CHARLES ZALEWSKI ARE NON-VOTING MEMBERS OF THE BOARD..
SECTION A