COMMITTEE ON NATURAL RESOURCES Disclosure Form As required by and provided for in House Rule XI, clause 2(g) and the Rules of the Committee on Natural Resources

Hearing on HR 869: "To clarify the definition of flood control operations for the purposes of the operation and maintenance of Project No. 2179 on the Lower Merced River."

Subcommittee on National Parks and Public Lands June 14, 2011

* * * * *

For Witnesses Representing Organizations:

- 1. Name: Ronald Stork
- 2. Name of Organization(s) You are Representing at the Hearing: Friends of the River
- 3. Business Address: 1418 20th Street, Suite 100, Sacramento CA 95811
- 4. Business Email Address: [Information redacted for privacy]
- 5. Business Phone Number: (916) 442-3155 [Information redacted for privacy]

Friends of the River Testimony on HR 869, National Parks and Public Lands hearing, June 14, 2011

a. Any training or educational certificates, diplomas or degrees or other educational experiences that are relevant to your qualifications to testify on or knowledge of the subject matter of the hearing.

Bachelor of Science, University of California Davis, School of Agriculture, Plant Science

b. Any professional licenses, certifications, or affiliations held that are relevant to your qualifications to testify on or knowledge of the subject matter of the hearing.

c. Any employment, occupation, ownership in a firm or business, or work-related experiences that relate to your qualifications to testify on or knowledge of the subject matter of the hearing.

Chair and conservation chair, Merced Group, Sierra Club (1980s); executive director, Merced Canyon Committee (1985–1987); conservation staff, Friends of the River, 1987– present; member appointed by Interior Secretary Manuel Lujan and California Department of Resources (DWR) Director David Kennedy, citizens advisory committee, joint state-federal San Joaquin Valley Drainage Program; liaison to the National Research Council's Committee on Flood Control Alternatives in the American River Basin (1994); member, Sacramento Flood Control Agency's Lower American River Task Force 1993present; member, working groups of the joint state-federal Corps of Engineers Reclamation Board Sacramento & San Joaquin Basins Comprehensive Study; member, City/County office of Water Planning Sacramento Area Water Forum; member of the DWR California Floodplain Management Task Force; member, citizens advisory committee, Governor Wilson's Flood Emergency Action Team on the 1997 floods; member, interagency Yuba Feather Workgroup focusing on flood-management issues in this basin; member, Tuolumne River Trust advisory council; member, citizens advisory committee for the Lower American River Parkway Plan and wild and scenic river management plan update; member of the independent review panel on Central Valley flood management chartered by DWR, chaired by General Gerald Galloway, which published "A California Challenge—Flooding in the Central Valley; member, lower Sacramento Valley workgroup, **DWR** Central Valley Flood Protection Plan, 2010–present.

d. Any federal grants or contracts (including subgrants or subcontracts) from the <u>Department</u> <u>of the Interior (and /or other agencies invited)</u> that you have received in the current year and previous four years, including the source and the amount of each grant or contract.

None.

e. A list of all lawsuits or petitions filed by you against the federal government in the current year and the previous four years, giving the name of the lawsuit or petition, the subject matter of the lawsuit or petition, and the federal statutes under which the lawsuits or petitions were filed.

None.

f. Any other information you wish to convey that might aid the Members of the Committee to better understand the context of your testimony.

I was the executive director of the Merced Canyon Committee and later on the staff of Friends of the River responsible for advising federal agencies, negotiating with interested parties, and providing Congressional testimony for what would become the designation of the Merced National Wild & Scenic River.

In addition, for witnesses representing organizations:

g. Any offices, elected positions, or representational capacity held in the organization(s) on whose behalf you are testifying.

Senior Policy Advocate, Friends of the River

h. Any federal grants or contracts (including subgrants or subcontracts) from the <u>Department</u> <u>of the Interior (and /or other agencies invited)</u> that were received in the current year and previous four years by the organization(s) you represent at this hearing, including the source and amount of each grant or contract for each of the organization(s).

None.

i. A list of all lawsuits or petitions filed by the organization(s) you represent at the hearing against the federal government in the current year and the previous four years, giving the name of the lawsuit or petition, the subject matter of the lawsuit or petition, and the federal statutes under which the lawsuits or petitions were filed for each of the organization(s).

Pacific Coast Federation of Fishermens Associations, et al. (including Friends of the River), v. Carlos M. Gutierrez, Secretary of Commerce. 2008. Challenged the National Marine Fisheries Service's (Dept. of Commerce) inadequate ESA biological opinion for Central Valley salmon and steelhead.

Friends of the River Testimony on HR 869, National Parks and Public Lands hearing, June 14, 2011

South Yuba River Citizens League and Friends of the River v. National Marine Fisheries Service, et al. 2007. Challenged the National Marine Fisheries Service's inadequate ESA biological opinion in regard to passage for threatened salmon on the Yuba River.

California Trout, California-Nevada Chapter of the American Fisheries Society, Center for Biological Diversity, and Friends of the River v. Dirk Kempthorne, Secretary of the Interior and H. Dale Hall, Director, U.S. Fish and Wildlife Service. 2007. Challenged the USFWS' failure to designate under the ESA critical habitat for the endangered Santa Ana sucker.

California Sportfishing Protection Alliance, et al. (including Friends of the River), v. Federal Energy Regulatory Commission. 2006. Requested the Federal Energy Regulatory Commission to take action under the Federal Power Act to protect threatened salmon in Butte Creek in regard to the operation of Pacific Gas & Electric Company's federally licensed hydroelectric project.

Natural Resources Defense Council, et al. (including Friends of the River), v. Gale A. Norton, Secretary of the Interior. 2006. Challenged the USFWS' inadequate ESA biological opinion for threatened Delta smelt.

j. A list of any countries from which the organization(s) you represent at the hearing have received foreign donations and the total amount of donations received from each country, for the current year and the previous four years, by each organization.

None.

k. For tax-exempt organizations and non-profit organizations, copies of the three most recent public IRS Form 990s (including Form 990-PF, Form 990-N, and Form 990-EZ) for each of the organization(s) you represent at the hearing (not including any contributor names and addresses or any information withheld from public inspection by the Secretary of the Treasury under 26 U.S.C. 6104)).

Attached

Form 990

1

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

2009 Open to Public Inspection

OMB No. 1545-0047

•	The organization may have to use a copy of this return to satisfy state reporting requirements.

Dap Inter	artment o rnal Revei	f the Treasury nue Service		► The organiz	ation may have to us	se a copy o	f this return to :	satisfy	state repoi	rting require	ments.	Ope	n to Public Inspection
	For the	e 2009 calendai	r year, o	r tax year beg	inning		, 2	009, a	nd endi	ng	•		
B	Add Nan Initia Terr	Iress change I ne change af return	lease use RS label or print or type. See specific Instruc- tions.	1418 20T	OF THE RIV H STREET, TO, CA 958	SUITE		N			94- E Telepho 442	24002 one numb -3155	er 5 X214
			Name a	nd address of prin	cipal officer:					H(a) is this	Gross r a group retur		
				AS C ABOV.							l affiliates incl		Yes No
1	Tax	exempt status) (insert no.)		1947(a)(1) or	. [527	If 'No,	' attach a list.	(see Inst	ructions)
<u>'</u>					RIVER, ORG		+3+7 (a)(7) O		/		exemption n		
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1058066				anization's mi	ssion or most si	ignificant	activities:	PRO	MOTE	PRESE	RVATION	OFF	RTVERS
Activities & Governance	3 M 4 M 5 T 6 T 7a T	Check this box Number of votin Number of indep Total number of Total number of Total gross unre	▶ i ng memi pendent f employ f volunte elated b	if the organiza bers of the go t voting memb yees (Part V, I bers (estimate usiness reven	tion discontinue verning body (P ers of the gover ine 2a) if necessary). ue from Part VI ne from Form 99	ed its ope Part VI, lin rning boo	rations or d ne 1a) dy (Part VI, I n (C), line 1:	ispose	ed of ma	pre than 25	5% of its as	sets.	
			4511055				J 1				Prior Year	- 10	
Revenue	9 F 10 II 11 C	Program service nvestment inco Other revenue (e revenu me (Pai Part VII	⊭e (Part VIII, I rt VIII, column I, column (A),	ne 1h) ine 2g) i (A), lines 3, 4, lines 5, 6d, 8c,	and 7d) , 9c, 10c,	and 11e)	• • • • • • • •	• • • • • • • • •	• •	2,108,9 4,5 55,6 5,5	00. 62. 40.	Current Year 862, 625.
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: 9			•		, column (A), lir				•		L, 140, 9		570,411.
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:					lines 11a-11d,						<u>1,484,7</u>		1,165,489.
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L	rt IL	Signatur				ie 20,	• • • • • • • • • • • •		••••••	· ·	L,348,3	03.	911,721.
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Ōn		employed),	-		BLVD. STE	301				E	IN 🏲 N,		
		ZIP + 4			CA 95826							(916)	
May	the IR	S discuss this r	eturn <u>w</u>	ith the prepare	er shown above	? (see in	structions).				<u></u>	• · • ·	X Yes No

BAA For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.

Form 990 (2009) TEEA0113L 12/29/09

	990 (2009) FRIENDS OF THE RIVER FOUNDATION	94-2400210	Page 2
	Statement of Program Service Accomplishments		
1	Briefly describe the organization's mission:	. •	
	PROMOTE PRESERVATION OF RIVERS.		
2	Did the organization undertake any significant program services during the year which were not listed on th	e prior	_
	Form 990 or 990-EZ?	Yes	X No
	If 'Yes,' describe these new services on Schedule O.		TT
Э	Did the organization cease conducting, or make significant changes in how it conducts, any program servic	es? Yes	X No
	If 'Yes,' describe these changes on Schedule O.	Contine E01(a)	/m
4	Describe the exempt purpose achievements for each of the organization's three largest program services b and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and a expenses, and revenue, if any, for each program service reported.	allocations to others, the tot	lal
Δ.		(Revenue \$)
	FISCAL SPONSORED PROGRAM EXPENDITURES: ORGANIZATIONS RELATED TO	FRIENDS OF THE	RIVER
	FOR WHOM FRIENDS OF THE RIVER ACTS AS FISCAL SPONSOR.		
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•			
	RESOURCES; ALSO ADVOCATE FOR HYDROPOWER REFORM.		
			·
•			
4	c (Code:) (Expenses \$ including grants of \$) PUBLIC EDUCATION PROGRAMS: EDUCATE AND GRASSROOTS ORGANIZING OF FOR THE PRESERVATION AND PROTECTION OF RIVERS	(Revenue \$ THE GENERAL PUB	
			·
			
		 	
	· · · · · · · · · · · · · · · · · · ·		
		 	
4	d Other program services. (Describe in Schedule O.)	Ś)
	(Expenses \$ including grants of \$) (Revenue	Y	·
_ 4	le Total program service expenses 🕨 1,738,588.	······································	

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/- Forn	1990 (2009) FRIENDS OF THE RIVER FOUNDATION 94-240021	0	P	age 3
	Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A	1	x	•
2	and the second	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I.	3	х	
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If 'Yes,' complete Schedule C, Part II.	4		<u>x</u>
5	not set with a state with the second state subject to the section 5073(a) police and	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, Part I	6		<u>x</u>
• •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	· ·	X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III	_8		<u>x</u>
. 9	Did the organization report an amount in Part X, line 21; 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		x
10	Schedule D, Part IV Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If 'Yes,' complete Schedule D, Part V	10		x
11	Is the organization's answer to any of the following questions 'Yes'? If so, complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable	11	X	
	Did the organization report an amount for land, buildings and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part Vi.			
	 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. 			
	 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. 			
	 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 Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X. 			
	-			
	• Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48? If Yes,' complete Schedule D, Part X.			
	Did the organization obtain separate, independent audited financial statement for the tax year? If 'Yes,' complete Schedule D, Parts XI, XII, and XIII.	12	X	
12	A Was the organization included in consolidated, independent audited financial statement for the tax			
	year? If 'Yes,' completing Schedule D, Parts XI, XII, and XIII is optional.	13		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	14a		X
	 b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If 'Yes,' complete Schedule F, Part I	14b		x
	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If 'Yes,' complete Schedule F, Part II.	15		x
	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If 'Yes,' complete Schedule F, Part III.	16		X
	 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. 	17	· . ·	X
	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	x	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,'	19		x
20	Did the organization operate one or more hospitals? If 'Yes,' complete Schedule H	20		X

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FRIENDS OF THE RIVER FOUNDATION <u>Form</u> 990 (0000)

Par

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	Checklist of Required Schedules (continued)			
a.	V Checklist of Required Schedules (continued)		Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II.	21		<u>X</u>
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If 'Yes,' complete Schedule I, Parts I and III.	22		x
23	Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If 'Yes,' complete Schedule J</i>	23		x
	a 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, and that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No.'go to line 25	24 a		x
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	245		
	c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
c	Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		· .
2 5a	a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I	<u>25a</u>		x
	b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If 'Yes,' complete Schedule L, Part L	<u>25b</u>		x
26	Was a loan to or by a current or former officer, diractor, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If 'Yes,' complete Schedule L, Part II	26	<u> </u>	<u>x</u>
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection comittee member, or to a person related to such an individual? If 'Yes,' complete Schedule L, Part III.	27		X
28	Was the organization a party to a business transation with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			v
;	a A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV.	28 a	L	<u> </u>
	b A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	285		x
	c An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or direct or indirect owner? If 'Yes,' complete Schedule L, Part IV.	280		x
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M.	29		X
30	contributions? If 'Yes' complete Schedule M	30	_	X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31	+	X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II.	32	<u> </u>	<u>x</u>
	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		x
34	Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts II, III, IV, and V, line 1	34		x
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2	35		<u>x</u>

Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2.... 36 36 37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI. 37 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note, All Form 990 filers are required to complete Schedule O 38 38

Form 990 (2009)

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94-2400210

Form 990 (2009) FRIENDS OF THE RIVER FOUNDATION	94-2400 <u>210</u>	F	Page 5
Part V Statements Regarding Other IRS Filings and Tax Compliance			
		Yes	No
1 a Enter the number reported in Box 3 of form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable	35		
b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	0		
c Did the organization comply with backup withholding rules for reportable payments to vendors and re (gambling) winnings to prize winners?	portable gaming	1c X	
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	22		
2b If at least one is reported on line 2a, did the organization file all required federal employment tax retuined	urns?	2b X	
Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see	e instructions)		
3a Did the organization have unrelated business gross income of \$1,000 or more during the year covere this return?	ed by	3a	x
b If 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule O		3b	
4a At any time during the calendar year, did the organization have an interest in, or a signature or other financial account in a foreign country (such as a bank account, securities account, or other financial	r authority over, a	4a	X
b If 'Yes,' enter the name of the foreign country: *			
See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Financial Accounts.	1 · · · · · · · · · · · · · · · · · · ·		
5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?.		5a	X
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transa	action?	5b	X
c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Reg Tax Shelter Transaction?	arding Prohibited	5c	
6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the solicit any contributions that were not tax deductible?	he organization	6a	x
b If 'Yes,' did the organization include with every solicitation an express statement that such contribution deductible?	ons or gifts were not	6b	
7 Organizations that may receive deductible contributions under section 170(c).			
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for provided to the payor?	goods and services	7a	X
b If 'Yes,' did the organization notify the donor of the value of the goods or services provided?		7b	· · ·
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it w Form 8282?	as required to file	7 c	X
d If 'Yes,' indicate the number of Forms 8282 filed during the year	personal		
e Did the organization, during the year, receive any funds, directly of indirectly, to pay premiums of a benefit contract?		7e	X
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit cont	tract?,	7f	X
g For all contributions of qualified intellectual property, did the organization file Form 8899 as required	?	7g	
h For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-	C as required?	7h	
8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organization, or a donor advised fund maintained by a sponsoring organization, have exc holdings at any time during the year?	izations. Did the cess business	8	
 9 Sponsoring organizations maintaining donor advised funds. 			
a Did the organization make any taxable distributions under section 4966?		9a	
b Did the organization make any distribution to a donor, donor advisor, or related person?		9b	+
10 Section 501(c)(7) organizations. Enter:			
a initiation fees and capital contributions included on Part VIII, line 12			
b 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 other members or shareholders			
b Gross income from other sources (Do not net amounts due or paid to other sources against			
B Gross income from other sources (bb nor net amounts due of paid to other sources against11b	041?	12a	
b if 'Yes,' enter the amount of tax-exempt interest received or accrued during the year	·		
D IT Yes, enter the amount of tax-exempt interest received of accrued during the year	K888	<u></u>	
BAA	F	orm 990	(2009)

Form 990 (2009) FRIENDS OF THE RIVER FOUNDATION

94-2400210

Page 6

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Yes

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16b

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

Se	ection A. Governing Body and Management			
<u> </u>		100000000000000000000000000000000000000	Yes	No
-	I a Enter the number of voting members of the governing body 1 a 1 b Enter the number of voting members that are independent 1 b 1	<u>1</u> 		
1	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		X
	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? . SEE. SCH. O	. 3	x	
	4 Did the organization make any significant changes to its organizational documents	4		X
	since the prior Form 990 was filed?	5		x
	 Did the organization become aware during the year of a material diversion of the organization of dubers. 6 Does the organization have members or stockholders?	6		X
ا • • •	6 Does the organization have members of stockholders, or other persons who may elect one or more members of the governing body?	. 7a		x
	b Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	. 7b		X
	8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
	a The governing body?	. 8a		<u> </u>
	b Each committee with authority to act on behalf of the governing body?	. 8b	X -	· · ·
	9 Is there any officer, director or 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		x
S	ection B. Policies (This Section B requests information about policies not required by the Inter-	nal		

Section B. Policies (This Section B requests information about prevenue Code.)	
10a Does the organization have local chapters, branches, or affiliates?	
b If 'Yes,' does the organization have written policies and procedures governing the and branches to ensure their operations are consistent with those of the organization	e activities of such chapters, affiliates.
 11 Has the organization provided a copy of this Form 990 to all members of its gove 11ADescribe in Schedule O the process, if any, used by the organization to review the 	erning body before filing the form? 11
12a Does the organization have a written conflict of interest policy? If 'No,' go to line	<i>13</i> <u>12a</u>
b Are officers, directors or trustees, and key employees required to disclose annua to conflicts?	ly interests that could give rise
c Does the organization regularly and consistently monitor and enforce compliance Schedule O how this is done	
13 Does the organization have a written whistleblower policy?	
14 Does the organization have a written document retention and destruction policy?	
15 Did the process for determining compensation of the following persons include a persons, comparability data, and contemporaneous substantiation of the deliberation	review and approval by independent ation and decision?
a The organization's CEO, Executive Director, or top management official	
b Other officers of key employees of the organization.	
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 ventur entity during the year?	
a series of the second s	organization to evaluate its participation

b If 'Yes,' has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?

Section C. Disclosures

17 List the states with which a copy of this Form 990 is required to be filed > CA

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

X Upon request Another's website Own website

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

State the name, physical address, and telephone number of the person who possesses the books and records of the organization: 20 ▶ BILL DUARTE 1418 20TH STREET, SUITE 100 SACRAMENTO CA 95811 (916) 442-3155

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

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organizations's tax year. Use Schedule J-2 if additional space is needed.

• 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. See instructions for definition of 'key employees.'

• 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, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

• List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

Check this box if the organization did not compensate any current officer, director, or trustee.

(A)	(B)			- (6	ć)			(D)	(E)	(F)
Name and Title	Average	Posi	tion (k all t	hat app		Reportable	Reportable	Estimated amount of other
	hours per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	compensation from the organization and related organizations
SEE ATTACHED	i									
BOARD OF DIREC.	1 1			İ				0.	0.	0.
PAUL TEBBEL	<u> </u>									
EXECUTIVE DIREC	40	x						78,625.	· 0.	0.
CRAIG THOMAS	- 10			_	1					·
DIRECTOR	40	x						82,153.	0.	0.
STEVE EVANS	10		· · ·	,						
DIRECTOR	40	x						66,231.	0.	0.
BJORN STROMSNESS										······································
DIRECTOR	40	X						21,966.	· 0.	0.
KEITH NAKATANI										
DIRECTOR	40	x			ļ			66,558.	0.	0.
DAVID NESMITH										
DIRECTOR	40	X	•				· ·	40,01 <u>5</u> .	0.	0.
BARBARA BARRIGAN-PARILLA					<u> </u>			a second s		
DIRECTOR	40	X		•			. <u>.</u>	55,201.	0.	0.
						•				
	1									
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	<u> </u>	<u> </u>	+		-				· · · · · · · · · · · · · · · · · · ·	
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Form 990 (2009) FRIENDS OF THE RIVER FOUN	DATIC)N				_			94-24002	10 Page 8
Part VII Section A. Officers, Directors, Trus	tees, I	Key	Em	ιple	oye	es,	an	d Highest Co	mpensated E	mployees (cont.)
(A)	(B)			(:)			(D)	(E)	(F)
	Average	Posit	ion (d			nat ar	oply)	• •	Reportable	Estimated
Name and Title	hours per week	-		Officer		Highest compensate	Former	Reportable compensation from the organization (W-2/1099-MISC)	compensation from related organization (W-2/1099-MISC)	a amount of other s compensation from the organization and related organizations
		trustee	al trustee		A de	mpensated				
· · · · · · · · · · · · · · · · · · ·	<u> </u>									<u> </u>
	· ·						i	<u></u>		
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					_	 				
					: .					
	·			Ì						
1 h Total				• · · ·			•	410,749.		0. 0.
2 Total number of individuals (including but not limited	i to thos	se lis	ted	abo	ve)	who	rec	eived more than :	\$100,0 00 in repor	· · · · · · · · · · · · · · · · · · ·
	es hurst				love.		r hir	hart compensate	d employee	Yes No
on line 1a? If 'Yes.' complete Schedule J for such if	ngiviqua	W								<u>3 X</u>
individual			••••	• • • •	••••	• • • •		• • • • • • • • • • • • • • • • • • • •		Accession (10) 0000000000000000000000000000000000
Continue B. Independent Contractors										<u>5</u> X
Complete this table for your five highest compensation from the organization.	ied inde	penc	lent	con	itrac	tors	that	received more th	an \$100,000 of	
 2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization ▶ 0 3 Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? If 'Yes,' complete Schedule J for such individual. 4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If 'Yes' complete Schedule J for such individual. 5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? If 'Yes,' complete Schedule J for such person 5 X 5 S X 										
OPEN OCEAN, LLC ,	<u> </u>							PRODUCTION	OF VIDEO	128,484.
		limi	ed t	o th	ose	liste	ed al	bove) who receive	ed more than	

۰,

Form 990 (2009)

Form	990	(2009) FRIENDS OF THE RIVER FOUNDAT	<u> EON</u>		<u>94-2400210</u>	Page 9
Par	t VI	Statement of Revenue				
			(A) Total revenue	(B) Related or. exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
CONTRIBUTIONS, GEFTS, GRANTS AND OTHER SIMILAR AMOUNTS	b c d	Federated campaigns. 1 a Membership dues 1 b Fundraising events 1 c 209,092 Related organizations. 1 d Government grants (contributions). 1 e				
ND OTHER :	a	All other contributions, gifts, grants, and similar amounts not included above. 1 f 653, 533 Noncash contribus included in Ins 1a-1f: \$				
	h	Total. Add lines 1a-1f.	▶ 862,625.			
PROGRAM SERVICE REVENUE	b	Business Code				· · · · · · · · · · · · · · · · · · ·
ROGRAM SER	e f	All other program service revenue	►			
<u> </u>	3	Investment income (including dividends, interest and other similar amounts). Income from investment of tax-exempt bond proceeds. Royalties.	►			
	b	(i) Real (ii) Personal Gross Rents 5,358. Less: rental expenses 5,358. Rental income or (loss) 5,358. Net rental income or (loss)	► 5,358.			5,358.
	b	Gross amount from sales of assets other than inventory				
OTHER REVENUE	8a	Net gain or (loss). Gross income from fundraising events (not including. \$	<u>i.</u>			
Ë		Less: direct expenses b49, 757				122,278.
ÿ		Net income or (loss) from fundraising events Gross income from gaming activities. See Part IV, line 19a.	► <u>122,278</u> .			122,270.
		Less: direct expenses b	_			
		Net income or (loss) from gaming activities	<u>-</u>			
		Gross sales of inventory, less returns and allowances				
		Net income or (loss) from sales of inventory	>			
		Miscellaneous Revenue Business Code	_			
	11 a E c					
		All other revenue				
		Total. Add lines 11a-11d	▶ 990,261.	. 0.	0.	127,636.

Form 990 (2009) FRIENDS OF THE RIVER FOUNDATION

Part IX Statement of Functional Expenses

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	All other organizations must com	nete column (A) but are			
Do I 6b, 1	not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21				
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	410,749.	410,749.	0.	0
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.	0.	0.	
7	Other salaries and wages.	480,531.	304,271.	132,758.	43,502
, 8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				· · · · ·
۵	Other employee benefits.	85,131.	72,322.	9,504.	3,305
9 10	Payroll taxes.	00,101.			0,000
10 11	Fees for services (non-employees).				· ····
	a Manegement				
	b Legal				
	Accounting				
	Lobbying		· · · · · · · · · · · · · · · · · · ·		
	e Prof fundraising svcs. See Part IV, In 17				
	Investment management fees				
	g Other	· · ·			
	Advertising and promotion	16,372.	16,250.	122.	• • • • • • • • • • • •
3	Office expenses.	47,710.	36,778.	6,984.	3,948
4	Information technology	1,676.	1,676.		
5	Royalties			······································	
16	Occupancy	71,121.	17,475.	46,375.	7,271
17	Travel.	69,478.	58,286.	910.	10,282
18	Payments of travel or entertainment expenses for any federal, state, or local public officials.				
19	Conferences, conventions, and meetings	4,811.	4,452.	199.	160
20	Interest	7,655.		7,655.	
21	Payments to affiliates.				
22		1,594.			1,594
23	Insurance.	10,563.	95.	5,401.	5,067
24	Other expenses, Itemize expenses not				
	covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25				
	a CONTRACT SERVICES	628,629.	596,479.	25,450.	6,700
	ADMINISTRATIVE FEES	95,291.	95,291.	20, 100.	5,700
	c MEALS & ENTERTAINMENT	36,179.	21,502.	1,337.	13,340
	d PROFESSIONAL FEES	30,136.	23,905.	6,231.	
	e TELEPHONE & INTERNET	29,772.	17,321.	10,665.	1,786
		114,502.	61,736.	50,040.	2,726
	f All other expenses,	2,141,900.	1,738,588.	303,631.	99,681
25		2,141,700.	1,130,300.	303,031.	59,001
26	Joint costs. Check here ► if following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

BAA

Form 990 (2009)

Form 990 (2009) FRIENDS OF THE RIVER FOUNDATION Part X Balance Sheet

 		(A) Beginning of year		(B) End of year
1 Cash - non-interest-bearing		429,066.	1	673,402.
2 Savings and temporary cash investments		908,498.	2	492,708.
3 Pledges and grants receivable, net			3	
4 Accounts receivable, net		92,066.	4	9,567.
5 Receivables from current and former officers, direct and highest compensated employees. Complete P	tors, trustees, key employees,		5	
6 Receivables from other disqualified persons (as de	fined under section 4958(f)(1))			
and persons described in section 4958(c)(3)(B). Co	mplete Part II of Schedule L		6	
 A S 7 Notes and loans receivable, net S 8 Inventories for sale or use 7 Prepaid expenses and deferred charges 			7	
8 8 Inventories for sale or use			8	
s 9 Prepaid expenses and deferred charges		21,736.	9	10,346.
10a Land, buildings, and equipment: cost or other basi	s. $ 10a $ 17,271.			
Complete Part VI of Schedule D				
b Less: accumulated depreciation	10Ь 8,664.	10,201.	10c	8,607.
11 Investments – publicly-traded securities			11	
12 Investments – other securities. See Part IV, line 1			12	
13 Investments – program-related. See Part IV, line			13	
			14	•····· -··
14Intangible assets.15Other assets. See Part IV, line 11.		23,148.	15	23,148.
16 Total assets. Add lines 1 through 15 (must equal li		1,484,715.	16	1,217,778.
17 Accounts payable and accrued expenses		70,504.	17	15,336.
18 Grants payable			18	
19 Deferred revenue			19	
L 20 Tax-exempt bond liabilities			20	
B 21 Escrow or custodial account liability. Complete Pa		· ·	21	
 Payables to current and former officers, directors, highest compensated employees, and disqualified 	trustees, key employees.			
of Schedule L			22	Х
s 23 Secured mortgages and notes payable to unrelate	d third parties		23	4
24 Unsecured notes and loans payable to unrelated th			24	250,000.
25 Other liabilities. Complete Part X of Schedule D.		65,828.	25	40,721.
26 Total liabilities. Add lines 17 through 25		136,332.	26	306,057.
N Organizations that follow SFAS 117, check here 27 through 29 and lines 33 and 34.				
		-55,332.	27	-142,170.
3 27 Unrestricted net assets 2 28 Temporarily restricted net assets		1,403,715.	28	1,053,891.
 I 29 Permanently restricted net assets. 			29	2,000,000.
Organizations that do not follow SFAS 117, check				
No a construction of the second s			30 BC	-
			31	
B 31 Paid-in or capital surplus, or land, building, and ec		·	32	
32 Retained earnings, endowment, accumulated incom		1,348,383.	33	911,721.
 B 31 Paid-in or capital surplus, or land, building, and ecc. 32 Retained earnings, endowment, accumulated income 33 Total net assets or fund balances. 34 Total liabilities and net assets/fund balances. 	-			
5 34 Total liabilities and net assets/fund balances. BAA		1,484,715.	34	<u>1,217,778.</u> Form 990 (2009)

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Form 990 (2009) FRIENDS OF THE RIVER FOUNDATION
Part XII Financial Statements and Reporting

;

			Yes	No
1	Accounting method used to prepare the Form 990: 🗌 Cash 🛛 🕅 Accrual 🗌 Other			
	If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		X
b	Were the organization's financial statements audited by an independent accountant?	2Ь	X	
¢	: If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.			
d	I If 'Yes' to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both:			
	X Separate basis Consolidated basis Both consolidated and separate basis			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a		х
b	If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.	3b		
BAA		Forn	n 990 ((2009)

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1

SCH	EDUL	.E A	
(Form	990 of	r 990-E	Z)

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1)

		Complete il tile orga	nonexempt cha	ritable tru	ist.				•	Open to	o Publ	ic
Departi Interna	ment of the Treasury I Revenue Service	► Attach to	Form 990 or Form 990-l	EZ, ≻ See	e separa	te instru	uctions.				oction	
	of the organization							1	r identificati			
FRI		RIVER FOUNDATION							400210			
Par		r Public Charity Stat						.) See	instruc	tions		
The o		a private foundation becau										
1		vention of churches or ass			section	170(b)(1)(A)(i).					
2		ribed in section 170(b)(1)(/										
3		cooperative hospital service										
4	A medical res	earch organization operate	d in conjunction with a h	ospital de	escribec	l'in sect	io n 170	(b)(1)(A)	(iii). Ente	r the hosp	ital's	
5	170(b)(1)(A)(iv	on operated for the benefit /). (Complete Part II.)						mental	unit desc	ribed in se	ction	
6 7	An organizati	te, or local government or p on that normally receives a 0 (b)(1)(A)(vi). (Complete Pa	substantial part of its su	bed in se pport fro	ection 17 m a gov	/0(b)(1)(/ernmen	A)(v). tal ⁻ unit	or from	lhe gene	ral public d	escrib	ed
8		trust described in section 1								•		
9	investment in June 30, 1975	on that normally receives: (s related to its exempt funct come and unrelated busine s, See section 509(a)(2). (C	omplete Part III.)	section 5	11 tax)	from bu	sinesse	s acquire	ship fees 3 % of its ed by the	s, and gros s support fi organizati	s rece rom gr on afte	ipts oss er
10		on organized and operated										
11	- more publicly	on organized and operated supported organizations o type of support <u>ing</u> organiz	lescribed in section 5096	a)(1) or s	ection 5	09(a)(2)	tions of . See s	f, or carr ection 5	y out the 09(a)(3).	Check the	box tr	hat
	a 🗌 Type I	b Туре II		II — Fund	-				a 🗌	Type III-		
e	By checking t than foundation 509(a)(2).	his box, I certify that the or on managers and other tha	ganization is not controll n one or more publicly s	ed direct upported	ly or ind organiz	lirectly b ations d	y one o escribe	r more o d in sect	lisqualifie ion 509(a	ad persons a)(1) or sec	; other :tion	f -: v
f	If the oroaniz	ation received a written det x	ermination from the IRS	that is a	Type I,	Type II	or Type	III supp	orting or	ganization,		
g	I Since August	17, 2006, has the organiza	tion accepted any gift o	r contribu	ution fro	m any o	f the fo	llowing p	ersons?			
	45			locather	with nor	eone da	earibed	in (ii) ar	od (iii)		Yes	No
	(i) a perso below, t	n who directly or indirectly he governing body of the s	upported organization?	togetter						11 g (i)		
		member of a person desc								11 g (ii)		
	(iii) a 35% o	controlled entity of a person	described in (i) or (ii) al	bove?						11 g (iii)		
h	• •	llowing information about							<u> </u>			
	(i) Name of Support Organization		(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) organizat (i) listed	ls the Ion in col. I in your ming ment?	the organ col.	ou notify nization in (i) of upport?	organizat (i) organiz	s the lon in col, zed in the 5.?	(vii) Amoun	t of Sup	port
				Yes	No	Yes	No	Yes	No			
		· · ·										
	· .											
 Tota												

BAA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule A (Form 990 or 990-EZ) 2009

OMB No. 1545-0047

2009

 Schedule A (Form 990 or 990-EZ) 2009
 FRIENDS OF THE RIVER FOUNDATION
 94-2400210

 Part III
 Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I.)

Sec	tion A. Public Support			······			
Cale begi	ndar year (or fiscal year nning in) ►	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1	Gifts, grants, contributions and membership fees received. (Do not include 'unusual grants.')						
2	Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf					·	
3	The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public 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						
Sec	tion B. Total Support				• .	• •	
	ndar year (or fiscal year nning in) ►	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 200 9	(f) ⊺otal
7	Amounts from line 4						
. 8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources						н -
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
	Total support. Add lines 7 through 10						
12	Gross receipts from related activ	ities, etc. (see ins	tructions)		•••••		
	First five years. If the Form 990 organization, check this box and	stop here		.		<u>.</u>)
Sec	tion C. Computation of Pu	blic Support	Percentage		· · ·		
14	Public support percentage for 20	09 (line 6, column	i (f) divided by line	e 11, column (f)			<u>%</u>
	Public support percentage from 2						%
	a 33-1/3 support test — 2009. If the and stop here. The organization	qualifies as a pub	licly supported or	ganization			▶
I	5 33-1/3 support test — 2008 . If the and stop here. The organization	e organization did qualifies as a pub	not check a box o licly supported or	on line 13, or 16a, ganization	and line 15 is 33-	1/3% or more, che	eck this box
17:	a 10%-facts-and-circumstances te or more, and if the organization the organization meets the 'facts	meets the 'facts-a	nd-circumstances	' test, check this b	ox and stop here	. Explain in Part N	vhow
I	D 10%-facts-and-circumstances te or more, and if the organization organization meets the 'facts-and	meets the 'facts-a 1-circumstances'	nd-circumstances test. The organiz	test, check this b ation qualifies as a	eox and s top here a publicly support	. Explain in Part Ned organization	v how the
18		zation di <u>d not che</u> o	ck a box on line, 1	13, 16a, 16b, 17a,			
BAA	L Contraction of the second				Sc	nequie A (Form 9	90 or 990-EZ) 2009

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Page 3

Schedule A (Form 990 or 990 EZ) 2009 FRIENDS OF THE RIVER FOUNDATION Part III Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I.)

<u> </u>			<u>e 9 of Part 1.)</u>				
	tion A. Public Support	(-) 0005	(h) 2005	(a) 2007	(d) 2008	(e) 2009	(f) Total
	ndar year (or fiscal yr beginning in)►	(a) 2005	(b) 2006	(c) 2007		(8) 2003	
. I	Gifts, grants, contributions and membership fees received. (Do not include 'unusual grants.')	2,774,892.	<u>3,293,152.</u>	2,957,831.	2,084,950.	1,482,060.	12,592,885.
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in a activity						· .
	that is related to the organization's tax-exempt purpose	12,914.	<u>111,119.</u>	210,675.	200,765.	209,092.	744,565.
3	Gross receipts from activities that are not an unrelated trade or business under section 513						0.
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf.						0.
5	The value of services or facilities furnished by a governmental unit to the organization without charge			· .	:		0.
6	Total. Add lines 1 through 5	2,787,806.	3,404,271.	3,168,506.	2,285,715.	1,691,152.	13,337,450.
[.] 7a	Amounts included on lines 1, 2, 3 received from disqualified	0.	0.	0.	0.	0.	0.
ľ	persons Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of			· · ·			· · · · · · · · · · · · · · ·
	the amount on line 13 for the year	0.	. 0.	0.	0.	0.	0.
Ċ	Add lines 7a and 7b	0.	0.	0.	0.	0.	0.
8	Public support (Subtract line						
	7c from line 6.)						13,337,450.
	tion B. Total Support	<u>_</u>	···				
Cale	ndar year (or fiscal yr beginning in) 🛌	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
2 9	Amounts from line 6	(a) 2005 2,787,806.			(d) 2008 2,285,715.		(1) Total 13,337,450.
2 9		2,787,806.	3,404,271.	3,168,506.	2,285,715.	1,691,152.	13,337,450.
/ 9 10a	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources		3,404,271.	3,168,506.			
9 10a 1	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources	2,787,806. 23,478.	3,404,27 <u>1</u> . 36,992.	3,168,506. 46,764.	2,285,715.	1,691,152. 9,116.	13,337,450. 150,698. 0.
9 10a 1	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources	2,787,806.	3,404,271.	3,168,506.	2,285,715.	1,691,152.	13,337,450.
9 102 1	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources	2,787,806. 23,478.	3,404,27 <u>1</u> . 36,992.	3,168,506. 46,764.	2,285,715.	1,691,152. 9,116.	13,337,450. 150,698. 0. 150,698. 0. 16,686.
9 10a 11 11	Amounts from line 6 a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources	2,787,806. 23,478. 23,478.	3,404,27 <u>1</u> . 36,992. 36,992. -8,806.	3,168,506. 46,764. 46,764. 46,764.	2,285,715. 34,348. 34,348. 14,863.	1,691,152. 9,116. 9, <u>116.</u> 5,662.	13,337,450. 150,698. 0. 150,698. 0. 16,686. 13,504,834.
9 10a 11 11	Amounts from line 6 a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources	2,787,806. 23,478. 23,478.	3,404,27 <u>1</u> . 36,992. 36,992. -8,806.	3,168,506. 46,764. 46,764. 46,764.	2,285,715. 34,348. 34,348. 14,863.	1,691,152. 9,116. 9, <u>116.</u> 5,662.	13,337,450. 150,698. 0. 150,698. 0. 16,686. 13,504,834.
9 10 <i>2</i> 11 11 12 13 14	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources	2, 787, 806. 23, 478. 23, 478.	3, 404, 27 <u>1</u> . 36, 992. 36, 992. -8, 806. tion's first, secon	3,168,506. 46,764. 46,764. 46,764.	2,285,715. 34,348. 34,348. 14,863.	1,691,152. 9,116. 9, <u>116.</u> 5,662.	13,337,450. 150,698. 0. 150,698. 0. 16,686. 13,504,834.
9 102 11 11 12 13 14 <u>Sec</u>	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources	2, 787, 806. 23, 478. 23, 478. 23, 478. 23, 478. is for the organiza stop here.	3, 404, 271. 36, 992. 36, 992. 36, 992. -8, 806. tion's first, secon	3,168,506. 46,764. 46,764. 4,967. d, third, fourth, o	2,285,715. 34,348. 34,348. 14,863.	1, 691, 152. 9, 116. 9, 116. 5, 662. a section 501(c)(3	13,337,450. 150,698. 0. 150,698. 0. 16,686. 13,504,834.
9 10 10 11 11 12 13 14 <u>Sec</u> 15	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources	2, 787, 806. 23, 478. 23, 478. 23, 478. 23, 478. 23, 478. is for the organiza stop here	3, 404, 271. 36, 992. 36, 992. 36, 992. -8, 806. tion's first, secon Percentage (f) divided by lin	3, 168, 506. 46, 764. 46, 764. 46, 764. 4, 967. d, third, fourth, o e 13, column (f)).	2,285,715. 34,348. 34,348. 14,863. r fifth tax year as	1, 691, 152. 9, 116. 9, 116. 5, 662. a section 501(c)(3	13, 337, 450. 150, 698. 0. 150, 698. 0. 16, 686. 13, 504, 834.) 98.8%
9 102 11 11 12 13 14 <u>Sec</u> 15 16	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources	2, 787, 806. 23, 478. 23, 478. 23, 478. 23, 478. 23, 478. 23, 478. 23, 478. 20, 478.	3, 404, 271. 36, 992. 36, 992. 36, 992. 36, 992. 101 - 8, 806. -8, 806. -9, 9, 906. -9,	3, 168, 506. 46, 764. 46, 764. 46, 764. 4, 967. d, third, fourth, o e 13, column (f)).	2,285,715. 34,348. 34,348. 14,863. r fifth tax year as	1, 691, 152. 9, 116. 9, 116. 5, 662. a section 501(c)(3	13, 337, 450. 150, 698. 0. 150, 698. 0. 16, 686. 13, 504, 834.) ►
9 102 102 102 102 102 102 102 102 102 102	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources	2, 787, 806. 23, 478. 23, 478. 23, 478. 23, 478. 23, 478. 23, 478. 23, 478. 23, 478. 20, 478.	3, 404, 27 <u>1</u> . 36, 992. 36, 992. 36, 992. 36, 992. 4, 806. tion's first, secon Percentage (f) divided by lin Part III, line 15. me Percentage	3, 168, 506. 46, 764. 46, 764. 46, 764. 4, 967. d, third, fourth, o e 13, column (f)).	2,285,715. 34,348. 34,348. 14,863. r fifth tax year as	1, 691, 152. 9, 116. 9, 116. 5, 662. a section 501(c)(3 15 16	13, 337, 450. 150, 698. 0. 150, 698. 0. 16, 686. 13, 504, 834.) 98.8%
9 102 102 102 102 102 102 102 102 102 102	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources	23, 478. 23, 478. 23, 478. 23, 478. 23, 478. 23, 478. 23, 478. 23, 478. 23, 478. 23, 478. 20,	3, 404, 271. 36, 992. 36, 992. 36, 992. 36, 992. 10, 992. 10	3, 168, 506. 46, 764. 46, 764. 46, 764. 4, 967. d, third, fourth, o e 13, column (f)). je 1 by line 13, colum	2, 285, 715. 34, 348. 34, 348. 14, 863. r fifth tax year as	1, 691, 152. 9, 116. 9, 116. 5, 662. a section 501(c)(3 15 16 16 17	13, 337, 450. 150, 698. 0. 150, 698. 0. 150, 698. 0. 16, 686. 13, 504, 834.) ▶ 98.8% 98.5%
9 102 11 11 12 13 14 <u>Sec</u> 15 16 <u>Sec</u> 17 18	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources	23, 478. 23, 478. 20,	3, 404, 271. 36, 992. 36, 992. 36, 992. 36, 992. 36, 992. 10, 992. 10	3, 168, 506. 46, 764. 46, 764. 46, 764. 46, 764. 4, 967. d, third, fourth, o e 13, column (f)). je 1 by line 13, colum 17.	2, 285, 715. 34, 348. 34, 348. 14, 863. r fifth tax year as	1, 691, 152. 9, 116. 9, 116. 5, 662. a section 501(c)(3 15 16 17 18 19 19 19 19 10 17	13, 337, 450. 150, 698. 0. 150, 698. 0. 13, 504, 834. 0. 98.8% 98.5% 1.1% 1.2% line 17 is not
9 102 11 11 12 13 14 <u>Sec</u> 15 16 <u>Sec</u> 17 18 19	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources Durrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) SEE PARTIV Total support (add his 9, 10c, 11, and 12) First five years. If the Form 990 organization, check this box and Stion C. Computation of Pu Public support percentage for 20 Public support percentage for Stion D. Computation of In Investment income percentage f a 33-1/3 support tests - 2009. If the more than 33-1/3%, check this box	23, 478. 23, 478. 23, 478. 23, 478. 23, 478. 23, 478. 23, 478. 23, 478. 23, 478. 23, 478. 20,	3, 404, 271. 36, 992. 36, 992. 36, 992. 36, 992. 36, 992. 10, 992. 10	3, 168, 506. 46, 764. 46, 764. 46, 764. 46, 764. 4, 967. d, third, fourth, o e 13, column (f)). je 1 by line 13, colum 17. x on line 14, and qualifies as a pul on line 14 or 19a	2, 285, 715. 34, 348. 34, 348. 34, 348. 14, 863. r fifth tax year as	1, 691, 152. 9, 116. 9, 116. 5, 662. a section 501(c)(3 15 16 17 18 19 19 19 19 10 10 17 18 19 10 17 18 19 11 10 10 17 18 10 17 18 10 17 18 10 17 18 10 17 18 10 17 18 10 17 18 10 17 18 10 17 18 10 17 18 10 19 113 10 10 10 10 10 10 10 10 10 10 10 10 10	13, 337, 450. 150, 698. 0. 150, 698. 0. 13, 504, 834. 0. 98.8% 98.5% 1.1% 1.2% line 17 is not X and line 18
9 102 11 11 12 13 14 <u>Sec</u> 15 16 <u>Sec</u> 17 18 19	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources	23, 478. 23, 478. 23, 478. 23, 478. 23, 478. 23, 478. 23, 478. 23, 478. 20, 478. 23, 478. 23, 478. 20,	3, 404, 271. 36, 992. 36, 992. 36, 992. 36, 992. 36, 992. 36, 992. 10, 992. 10	3, 168, 506. 46, 764. 46, 764. 46, 764. 46, 764. 4, 967. 4, third, fourth, o e 13, column (f)). e 13, column (f)). je t by line 13, colum 17. x on line 14, and qualifies as a put on line 14 or 19a zation qualifies as	2, 285, 715. 34, 348. 34, 348. 34, 348. 14, 863. r fifth tax year as r fifth tax year as nn (f)) t line 15 is more the blicly supported or , and line 16 is more the blicly supported or a publicly support	1, 691, 152. 9, 116. 9, 116. 9, 116. 5, 662. a section 501(c)(3 15 16 17 18 nan 33-1/3%, and ganization re than 33-1/3%, ted organization	13, 337, 450. 150, 698. 0. 150, 698. 0. 150, 698. 0. 150, 698. 0. 150, 698. 0. 150, 698. 0. 150, 698. 0. 16, 686. 13, 504, 834. 0. 98.8 % 98.5 % 1.1 % 1.2 % line 17 is not X and line 18

Page 4

 Schedule A (Form 990 or 990-EZ) 2009
 FRIENDS OF THE RIVER FOUNDATION
 94-2400210
 Pag

 Part IV
 Supplemental Information. Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Provide any other additional information. See instructions.

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		FRIENDS O	FTH	E RIVER	FOUI	DAT	ION		94-2	40021
PART III, LINE 12 - OT	HER INCOM	ſΕ								
NATURE AND SOURCE		2009		2008		<u>200</u>	7	 2006	 2005	
MISCELLANEOUS	total <u>\$</u>	5,662. 5,662.	<u>\$</u>	14,863 14,863		4, 4,	<u>967.</u> 967.	\$ <u>~8,806.</u> -8,806.	\$	0.
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Schedule B (Form 990, 990-EZ, or 990-PF)

Schedule of Contributors Attach to Form 990, 990-EZ, or 990-PF

OMB No. 1545-0047

2009

Department of the Treasury Internal Revenue Service

Name of the org	anizati	оп			
FRIENDS	OF	THE	RIVER	FOUNDATION	

Employer identification	number
94-2400210	

Organization type (check one):	
Filers of: Form 990 or 990-EZ	Section: X 501(c)(3) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization
Form 990-PF	501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation

Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule -

X For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. (Complete Parts I and II.)

Special Rules -

For a section 501(c)(3) organization filing Form 990 or 990-EZ, that met the 33-1/3% support test of the regulations under sections 509(a)(1)/170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ, that received from any one contributor, during the year, aggregate contributions of more than \$1,000 for use *exclusively* for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.

For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ, that received from any one contributor, during the year, contributions for use *exclusively* for religious, charitable, etc, purposes, but these contributions did not aggregate to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc, purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received nonexclusively religious, charitable, etc, contributions of \$5,000 or more during the year.....

Caution: An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF) but it **must** answer 'No' on Part IV, line 2 of their Form 990, or check the box on line H of its Form 990-EZ, or on line 2 of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

BAA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990, 990EZ, or 990-PF.

Schedule B (Form 990, 990-EZ, or 990-PF) (2009)

Schedule B (Form 990, 990-EZ, or 990-PF) (2009)	Page 1 of 3 of Part I
Name of organization	Employer identification number
FRIENDS OF THE RIVER FOUNDATION	94-2400210

FRIENDS OF THE RIVER FOUNDATION

Part I	Contributors (see instructions.)		
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
<u>1</u>	KIMO CAMPBELL PO BOX 127 KENTFIELD, CA 94914	\$15,500.	Person X Payroll
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
2	DERRY & CHARLENE KABCENELL 4900 ALPINE ROAD PORTOLA VALLEY, CA 94028	\$5,000.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
3	MATT WINKLER 960 LIVE OAK CR AUSTIN, TX 78746	\$ <u>5,000</u> .	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
4	FRANK W COLVER 320 MORNING STAR LN NEWPORT BEACH, CA 92660	\$15,000.	Person X Payroli Noncash (Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
_5	KEKER & VAN NEST, LLP 710 SANSOME STREET SAN FRANCISCO, CA 94111	\$ <u>10,000.</u>	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
_6	GUY & JEANINE SAPERSTEIN 52 GLEN APLINE ROAD POEDMONT, CA 94611	\$10,000.	Person X Payroll

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Schedule	B	(Form	990,	990-EZ,	or 990-PF) (2009)

Name of organization

Page 2 of 3 of Part I Employer identification number

FRIENDS OF THE RIVER FOUNDATION

94-2400210

Part Contributors (see instructions.)

(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
7	JEFFREY CHANIN	\$ <u>5,000.</u>	Person X Payroll Noncash
	BELVEDERE TIBURON, CA 94920		(Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
8	YVON & MALINDA_CHOUINARD		Person X
	4218 FARIA_ROAD	\$11,000.	Payroll Noncash
	VENTURA, CA 93001		(Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
9	DANCING TIDES FOUNDATION	· · ·	Person X
	1187_COAST_VILLAGE_RD_#451	\$ <u>5,000.</u>	Payroll Noncash
	SANTA BARBARA, CA 93108		(Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
-			Type of contribution Person X
Number	Name, address, and ZIP + 4		Type of contribution
Number	Name, address, and ZIP + 4 MARGERY NICHOLSON	Aggregate contributions	Type of contribution Person X Payroll
Number	Name, address, and ZIP + 4 MARGERY NICHOLSON 1238 MONUMENT ST	Aggregate contributions	Type of contribution Person X Payroll
Number 	Name, address, and ZIP + 4 MARGERY NICHOLSON 1238 MONUMENT_ST PACIFIC PALISADES, CA 90272 (b)	Aggregate contributions \$10,000. (c)	Type of contribution Person X Payroll X Noncash X (Complete Part II if there is a noncash contribution.) (d) Type of contribution X Person X
10 (a) Number	Name, address, and ZIP + 4 MARGERY NICHOLSON 1238 MONUMENT ST PACIFIC PALISADES, CA 90272 (b) Name, address, and ZIP + 4	Aggregate contributions \$10,000. (c)	Type of contribution Person X Payroll X Noncash X (Complete Part II if there is a noncash contribution.) (d) Type of contribution X
10 (a) Number	Name, address, and ZIP + 4 MARGERY_NICHOLSON 1238_MONUMENT_ST PACIFIC_PALISADES, CA_90272 (b) Name, address, and ZIP + 4 PAUL_STANLEY	Aggregate contributions \$10,000. (c) Aggregate contributions	Type of contribution Person X Payroll Image: Complete Part II if there is a noncash contribution.) (Complete Part II if there is a noncash contribution.) (d) Type of contribution Person X Payroll Image: Contribution
10 (a) Number	Name, address, and ZIP + 4 MARGERY_NICHOLSON 1238_MONUMENT_ST	Aggregate contributions \$10,000. (c) Aggregate contributions	Type of contribution Person X Payroll Noncash Noncash (Complete Part II if there is a noncash contribution.) (d) Type of contribution Person X Payroll Noncash Noncash If there (Complete Part II if there If there
IO 10 (a) Number 11 (a)	Name, address, and ZIP + 4 MARGERY_NICHOLSON 1238_MONUMENT_ST PACIFIC_PALISADES, CA_90272 (b) Name, address, and ZIP + 4 PAUL_STANLEY 77777_GALLATIN_RD BOZEMAN, MT 59718 (b)	Aggregate contributions \$10,000. (c) Aggregate contributions \$5,000. (c) Aggregate	Type of contribution Person X Payroll Image: Complete Part II if there is a noncash contribution.) (Complete Part II if there is a noncash contribution Person X Payroll Image: Complete Part II if there is a noncash contribution.) (d) Type of contribution (Complete Part II if there is a noncash contribution.) (d) (Complete Part II if there is a noncash contribution.) (d) (d) Type of contribution Person X Person X
10 (a) Number 11 (a) Number 0 (a) Number	Name, address, and ZIP + 4 MARGERY_NICHOLSON 1238_MONUMENT_ST PACIFIC_PALISADES, CA_90272 (b) Name, address, and ZIP + 4 PAUL_STANLEY 77777_GALLATIN_RD BOZEMAN, MT_59718 (b) Name, address, and ZIP + 4	Aggregate contributions \$10,000. (c) Aggregate contributions \$5,000. (c) Aggregate	Type of contribution Person X Payroll

Schedule	B (Form 990, 990-EZ, or 990-PF) (2009)	Page 3	of 3 of Part I identification number
Name of orga	anization OS OF THE RIVER FOUNDATION		00210
	Contributors (see instructions.)		
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
<u>13</u>	TOMCHIN FAMILY CHARITABLE TRUST	\$10,000.	Person X Payroll Noncash
	MONTECITO, CA 93108	-	(Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroli Noncash (Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		_ _\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
· · · ·		_ _\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
- <u> </u>		\$	Person Payroll Noncash (Complete Part 11 if there is a noncash contribution.)

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Schedule B (Form 990, 990-EZ, or 990-PF) (2009)	Page	1	of 1	of Part II
Name of organization		Emplo	oyar identification	number
FRIENDS OF THE RIVER FOUNDATION		94-	2400210	
FRIENDS OF THE RIVER FOONDATION				

Part II Noncash Property (see instructions.)

(a) Io. from Part I	b) Description of ກoncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	N/A	·	
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No, from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
<u> </u>		\$\$!
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date receive
		\$	
(a) No, from Part 1	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date receive
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date receive
		s	

Schedule B (Form 990, 990-EZ, or 990-PF) (2009)

BAA

shadula B (Er	orm 990, 990-EZ, or 99 <u>0-PF) (2009)</u>		Page_1	of <u>1</u>	of Part III
ne of organizatio	an			Employer identificat	
RIENDS O	OF THE RIVER FOUNDATION		to costion 501/	94-2400210	<u>n </u>
	x <i>clusively</i> religious, charitable, etc rganizations aggregating more that	n \$1.000 for the year.(Comp	to section built liete cols (a) through	(e) and the followi	ng line entry
or –	ganizations aggregating more the	of exclusively religious, charital	ale, etc.		
Foi	r organizations completing Part III, enter tot ntributions of \$1,000 or less for the year. (Er	ter this information once - see in	nstructions.)	<u>►\$</u>	N/
(a)	(b)	(c)		(d) scription of how gif	t is held
o. from I Part I	Purpose of gift	Use of gift			
N/	/A				, ·
[· · · · · · · · · · · · · · · · · · ·	<u> </u>		
		(e)			
1	Transferee's name, address,	Transfer of gift and ZIP + 4	Relationship o	f transferor to tran	sferee
- H					
				· · · · · · · · · · · · · · · · · · ·	
(a)	(b)	(c)		(d)	
No. from	Purpose of gift	Use of gift	De	scription of how gi	It is held
Partl					
<u> </u>		·	·		
I		(0)	k		
	Transferee's name, address,	Transfer of gift	Relationship (of transferor to tran	steree
Ļ	Transferee s flame, autress,				
(a)	(b)	(c)	 .	(d)	
No. from	Purpose of gift	Use of gift	De	scription of how g	ift is held
Part 1					
[· · · · · · · · · · · · · · · · · · · ·	
–		(0)			
-	Transferee's name, address	Transfer of gift	Relationship of transferor to transferee		
Ļ	Iransferee's name, address				
-					
F			· · · · · · · · · · · · · · · · · · ·		
	(b)	(c)		(d)	
(a) No. from	Purpose of gift	Use of gift	Di	escription of how g	ift is held
Part1					
-					
—					
-		(e)	······································		
		Transfer of gift	Dalatianakin	of transferor to tra	nsteree
L	Transferee's name, address	s, and ZIP + 4	relationship		
 -		······			
				orm 000, 000 E7	or GOD DEV (2
BAA		TEE 407040 06/23/09	Schedule B (F	orm 990, 990-EZ, o	u 990-PF) (Zi

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	OMB No. 1545-0047				
SCHEDULE C (Form 990 or 990-EZ)		Political Campaign and Lobbying Activities			2009
	For	Organizations Exempt From Income Tax U	Inder section 501(c) ar	nd section 527	2005
		 Complete if the organization 			Open to Public
Department of the Treasury Internal Revenue Service		Attach to Form 990 or Form 990-EZ.	See separate instru	ctions.	inspection
If the organization ansy	wered 'Yes,'	to Form 990, Part IV, line 3, or Form 990-E	Z, Part VI, line 46 (Polit	ical Campaign Activitie	s), then
Section 501/c\(3) or	rganizations:	 complete Parts I-A and B. Do not complet 	te Part I-C.	•	
 Section 501(c) (other 	er than section	on 501(c)(3)) organizations: complete Parts	s I-A and C below. Do	not complete Part I-B.	
 Section 527 organiz 	zations: com	plete Part I-A only.	T Dent VII line 47 (Lobi	ndan Activiting) than	
If the organization answ	wered 'Yes,'	to Form 990, Part IV, line 4, or Form 990-E2 that have filed Form 5768 (election under	ection 501(b)): Comn	lete Part II-A. Do not co	mplete Part II-B.
 Section 501(c)(3) 0 	rganizations	that have filed Form 5766 (election under s	section of (iii): Comp	Semplete Dort II B. Do r	ot complete
Part II-A.		that have NOT filed Form 5768 (election un to Form 990, Part IV, line 5 (Proxy Tax), the			or complete
If the organization answer	Wered 185, (5) or (6) or	ganizations: Complete Part III.			
Name of organization	<u>()</u> , or <u>()</u> or <u>(</u>			Emptoyer identificat	
TRANK OF THE	RTVER I	FOUNDATION	· .	94-2400210)
Part A Complet	le if the or	rganization is exempt under secti	on 501(c) or is a	section 527 organi	zation.
1 Provide a descrip	tion of the o	rganization's direct and indirect political ca	mpaign activities in Pa	art IV. SEE PART	LV .
2 Political expendit	ures			►\$_	<u> </u>
3 Volunteer hours				<u></u>	<u> </u>
Part B Complet	le if the o	rnanization is exempt under secti	on 501(c)(3).		· · · · · · · · · · · · · · · · · · ·
1 Enter the amount	t of any exci	se tax incurred by the organization under s	ection 4955	🕨	0.
2 Enter the amount	t of any excis	se tax incurred by organization managers i	Inder section 4955		
3 If the organizatio	n incurred a	section 4955 tax, did it file Form 4720 for t	his year?		
4a Was a correction	made?	· · · · · · · · · · · · · · · · · · ·			Yes No
Fif Vec ! describe	in Part IV				_
Part I-C Comple	te if the or	rganization is exempt under sect	ion 501(c) , excep	<u>t section 501(c)(3)</u>	•
1 Enter the amoun	t directly exp	bended by the filing organization for section	527 exempt function	activities > \$	·
		gorganization's funds contributed to other o	vicanizations for section	n 527 exempt	
		enditures. Add lines 1 and 2, Enter here an	d on Form 1120-POL		
A Did the filing org	anization file	Form 1120-POL for this year?			Yes No
5 Enter the names made. For each	, addresses organization	and employer identification number (EIN) o listed, enter the amount paid from the filin ere promptly and directly delivered to a sej e (PAC). If additional space is needed, pro	of all section 527 polition g organization's funds parate political organiz	cal organizations to whi . Also enter the amount ation, such as a separa	ch payments were
		(b) Address	(c) EIN	(d) Amount paid from filing	(e) Amount of political
(a) Name				organization's funds. If none, enter 0.	contributions received and promptly and directly
					oromptly and directly delivered to a separate political organization. If none, enter .0.
				·	
	·		· · · · ·		· .
			-		
			-		
BAA For Privacy Act	and Paperw	ork Reduction Act Notice, see the Instructi	ons for Form 990.	Schedule C (Fo	rm 990 or 990-EZ) 2009

OF THE RIVER FOUNDATION _ TRAILO

chedule C (Form 990 or 990-EZ) 2009 1	FRIENDS OF	THE RIVER FOUNDAT	ION	94-2400	210 Page 2
Complete if th section 501(h)	e organizatio	on is exempt under se	ction 501(c)(3) and	l filed Form 5768 (e	election under
A Check ► if the filing	organization belo	ongs to an affiliated group.	•		
B Check 🕨 🗌 if the filing	organization che	cked box A and 'limited cont	rol' provisions apply.	· · ·	
(The term 'e	Limits on Lobbyi xpenditures' me	ing Expenditures — ans amounts paid or incurre	d.)	(a) Filing organization's totals	(b) Affiliated group totals
1 a Total lobbying expenditure	s to influence pu	blic opinion (grass roots lob	bying)		
b Total lobbying expenditure	s to influence a	legislative body (direct lobby	(ing)		
c Total lobbying expenditure	s (add lines 1a a	and 1b)			
d Other exempt purpose exp	enditures				•••
e Total exempt purpose exp	enditures (add lii	nes 1c and 1d)	,		
		nount from the following tabl			
both columns.					·
If the amount on line 1e, column	n (a) or (b) is:	The lobbying nontaxable an	nount is:		
Not over \$500,000		20% of the amount on line 1e.			
Over \$500,000 but not over \$1,00	0,000	\$100,000 plus 15% of the excess			
Over \$1,000,000 but not over \$1,5		\$175,000 plus 10% of the excess			
Over \$1,500,000 but not over \$17,	,000,000	\$225,000 plus 5% of the excess o	ver_\$1,500,000.		
Over \$17,000,000		\$1,000,000.			
g Grassroots nontaxable am	ount (enter 25%	of line 1f)	•••••	· · · · · · · · · · · · · · · · · · ·	
h Subtract line 1g from line	1a. If zero or les	is, enter -0			· · · ·
i Subtract line 1f from line	lc. If zero or less	s, enter -0			· .
j If there is an amount othe section 4911 tax for this v	r than zero on e ear?	ither line 1h or line 1i, did th	e organization file Form	4720 reporting	Yes No
		4-Year Averaging Period U hat made a section 501(h) el nns below. See the Instruction	Inder Section 501(b)		
		bbying Expenditures During			
Calendar year (or fiscal year beginning in)	(a) 20 06	(b) 2007	(c) 2008	(d) 2009	(e) Total
2a Lobbying non-taxable amount					· · · · ·
b Lobbying ceiling					
amount (150% of line 2a, column (e))					
c Total lobbying expenditures			·		
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures				Calcadada O (Tar	m 000 or 000 EZV 200
BAA				Schedule G (For	rm 990 or 990-EZ) 200

Schedule C (Form 990 or 990-EZ) 2009 FRIENDS OF THE RIVER FOUNDATION Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768

Part II-B (election under section 501(h)). (b) (a) Yes No Amount During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of: a Volunteers?..... b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?..... c Media advertisements?..... d Mailings to members, legislators, or the public?..... e Publications, or published or broadcast statements?..... f Grants to other organizations for lobbying purposes? g Direct contact with legislators, their staffs, government officials, or a legislative body?..... h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? i Other activities? If 'Yes,' describe in Part IV. | Total. Add lines 1c through 1i 2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?..... b If 'Yes,' enter the amount of any tax incurred under section 4912 c If 'Yes,' enter the amount of any tax incurred by organization managers under section 4912 d if the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?..... Part IIIA Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) Yes No

-	Were substantially all (90% or more) dues received nondeductible by members?	1		
1	Did the organization make only in-house lobbying expenditures of \$2,000 or less?	2		
2	Did the organization make only include lobbying expenditation of payments from the prior year?	. 3		
- 3	Did the organization agree to carryover tobbying and pointed experience of the man are price of the second	. ,	017.	100

Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) Part III-B if BOTH Part III-A, questions 1 and 2 are answered 'No' OR if Part III-A, line 3 is answered 'Yes.'

			_	 	 _
1	Dues, assessments and similar amounts from members	1			
2	Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).	2a			
i	a Current year.		-		
	b Carryover from last year	2c	_		
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3			
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4			
5	Taxable amount of lobbying and political expenditures (see instructions).	5			
168	Supplemental Information		•		

ess ouhhi N 100 100 100 100 Complete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; and Part II-B, line 1i. Also, complete this part for any additional information.

_PART 1-A, LINE 1 - DIRECT AND INDIRECT POLITICAL CAMPAIGN ACTIVITIES _

THE FOUNDATION_EXPENDED_\$14.358_DURING_2009_TOWARDS_LOBBYING_EFFORTS_TO_INFLUENCE

STATE AND FEDERAL LEGISLATION RELATING TO PRESERVATION OF RIVERS.

94-2400210

Page 3

Schedule C (Form 990 or 990-EZ) 2009 FRIENDS OF THE RIVER FOUNDATION Part V Supplemental Information (continued)

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	· · · · · · · · · · · · · · · · · · ·	
·		
and the second		
·		

(For	CHEDULE D Form 990) epartment of the Treasury ternal Revenue Service Ser					20		
Name	of the organization	· · · · · · · · · · · · · · · · · · ·		.,		Employer is	еринсаноп п	
FRIENDS OF THE RIVER FOUNDATION 94-240								
Peu	the organizat	tions Maintaining Dono	r Advised Funds or Other o Form 990, Part IV, line 6	Similar Funds	s or Acc	counts (Complete	e if
	(no organ		(a) Donor advised fund		(b) F	unds and	other acco	unts
1	Total number at	end of year						
2		butions to (during year)					-	
3		s from (during year)						
4		at end of year						·
5			or advisors in writing that the asse to the organization's exclusive lega	ets held in donor a al control?	advised		Ye s	No
6	Did the organiza used only for cha	tion inform all grantees, dono; aritable purposes and not for t na impermissible private bene	s, and donor advisors in writing the benefit of the donor or donor a fit??	nat grant funds ma dvisor or for any (ay be other		Yes	No
ea	t Conserva	tion Easements Compl	ete if the organization answ	wered 'Yes' to	Form 9	<u>90, Part</u>	<u>t IV, line</u>	<u>7. </u>
1	Purpose(s) of co	nservation easements held by	the organization (check all that a	pply).				
•	Preservation	of land for public use (e.g., r	ecreation or pleasure)	Preservation of an				rea
		f natural habitat		Preservation of ce	artified his	storic struc	cture	
	Preservation	of open space				. 14		
2	Complete lines 2	a through 2d if the organization	on held a qualified conservation co	ontribution in the f	orm of a	conservati	ion easem	ent on the
	last day of the ta	ax year.				Held at t	he End of	the Year
	Tatal as unboy of	concorration assements			2a			
í	a lotal number of		ments		2b			
,	n Total acteage re	ervation easements on a certit	ied historic structure included in (a)	2c			
	d Number of cons	ervation easements included i	n (c) acquired after 8/17/06		2d			·
3	Number of cons	ervation easements modified,	transferred, released, extinguishe	d, or terminated b	by the org	anization	during the	tax
	year ►							
4	Number of state		onservation easement is located F					·
5	and enforcemen	of the conservation easeme	garding the periodic monitoring, ir nt it holds? ng, inspecting, and enforcing cons			tions,	Yes	No No
	during the year		specting, and enforcing conserva		-			- .
7	during the year	▶.			\$_			
8	- 170/b)//I\/Q\(i) \$	$\mathbf{n}_{\mathbf{n}}$	n line 2(d) above satisfy the requi				Ye s	No
. 9	 include, if applic conservation ea 	cable, the text of the footnote	ports conservation easements in it to the organization's financial state					nting for
	Complet	te if the organization an	ections of Art, Historical T swered 'Yes' to Form 990,	Fattiv, line o	•		-	
	treasures, or ot the f	ootnote to its financial stateme	r SFAS 116, not to report in its re- lic exhibition, education, or reseau ents that describes these items.		or passes		,	,
	treasures, or of	her similar assets held for put a to these items:	r SFAS 116, to report in its revent lic exhibition, education, or resea		or public	20141061 6		lononing
	(i) Revenues i	ncluded in Form 990, Part VIII	, line 1			►\ ►	<u> </u>	
	(ii) Assets inclu	uded in Form 990, Part X	· • • • • • • • • • • • • • • • • • • •		 	►``		wina
	amounts reduir	ed to be reported under ShAS	art, historical treasures, or other s 116 relating to these items:					wing
	a Revenues inclu	ded in Form 990, Part VIII, lin	e 1			Pq • •	·	
	b Assets included	i in Form 990, Part X			• • • • • • • • •		۲	

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

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Schedule D (Form 990) 2009 FRIEM	DS OF THE	RIVER FOUNDAT	ION	94-2400	210 Page 2
Part III Organizations Mainta	ining Collect	ons of Art, Histo	rical Treasures, or	Other Similar Ass	ets (continued)
3 Using the organization's acquisition	n accession and	other records, check	any of the following that	are a significant use o	of its collection
items (check all that apply):	In necession and			-	
a 🗍 Public exhibition		d Loan or	exchange programs		
b Scholarly research		e 🔄 Other			
c Preservation for future gener	ations				
4 Provide a description of the organ	nization's collecti				
 5 During the year, did the organiza assets to be sold to raise funds r 	tion solicit or rece ather than to be	eive donations of art, l maintained as part of	historical treasures, or o the organization's collec	ther similar tion?	Yes No
Part IV Escrow and Custodia 9, or reported an amo	I Arrandeme	n ts Complete if o	rganization answere	ed 'Yes' to Form 9	90, Part IV, line
1 a is the organization an agent, trus included on Form 990, Part X?	too custodian n	r other intermediary fr	or contributions or other	assets not	Yes No
b If 'Yes,' explain the arrangement	in Part XIV and	complete the following	table:	· · · · · · · · · · · · · · · · · · ·	
					Amount
c Beginning balance				1c	
d Additions during the year				. 1d	- <u></u>
e Distributions during the year.				. 1e	
f Ending balance				1f	
2 a Did the organization include an a	mount on Form (90 Part X. line 21?			Yes No
		550, 1 art 34 into 2101			
b If 'Yes,' explain the arrangement Part Endowment Funds Co	molete if org	anization answer	ed 'Yes' to Form 99	0. Part IV, line 10	
Part V Endowment Funds Co	(a) Current yea	r (b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1 a Beginning of year balance					
b Contributions	_				
c Net Investment earnings, gains, and losses					
d Grants or scholarships					_
e Other expenditures for facilities and programs					
f Administrative expenses		=			
g End of year balance.					
2 Provide the estimated percentage	je of the year end	balance held as:		and the second	
a Board designated or quasi-endo			· .		
b Permanent endowment					
c Term endowment	%				·
За Are there endowment funds not organization by:					Yes No
(i) unrelated organizations					. 3a(i)
(ii) related organizations					. 3a(ii)
b If 'Yes' to 3a(ii), are the related	organizations list	ed as required on Sch	edule R?		. 3b
A Deceribe in Part XIV the intended	ed uses of the ord	anization's endowme	nt funds.		
Part VI Investments-Land,	Buildings. an	d Equipment. Se	e Form 990, Part X	, lin <u>e 10.</u>	· .
Description of investmer) Cost or other basis	(b) Cost or other	(c) Accumulated	(d) Book Value
Description of involution	<u> </u>	(investment)	basis (other)	Depreciation	······································
1 a Land					
b Buildings					· · · · · · · · · · · · · · · ·
c Leasehold improvements					
d Equipment		17,271.		8,664.	8,607
e Other				_	<u> </u>
Total. Add lines 1a through 1e (Colum	on (d) must equa	Form 990, Part X. co	lumn (B), line 10(c).)		8,607
	(a) main oqua		<u> </u>	Schei	dule D (Form 990) 200
BAA					· · ·

Schedule D (Form 990) 2009 FRIENDS OF THE R.	IVER FOUNDATION		94-2400210	Page 3
Part VII Investments-Other Securities See	Form 990, Part X, lii	ne 12. N/A		
(a) Description of security or category (including name of security)	(b) Book value	(c) Cost or e	Method of valuation nd-of-year market value	
Financial derivatives				<u>.</u>
Closely-held equity interests.	· · <u> </u>			
Other				
	_ <u>_</u>	<u> </u>		
			<u>.</u>	
		· · · · · · · · · · · · · · · · · · ·		
	·	·		
	-	· · ·		
		· · ·		
Total. (Column (b) must equal Form 990 Part X, col. (B) line 12.) ►				
Rant VIII Investments-Program Related (See	e Form 990, Part X,	line 13) N/A	· · ·	
(a) Description of investment type	(b) Book value	(c)	Method of valuation and-of-year market value	
	· · · · · · · · · · · · · · · · · · ·	0031011	and or your manner range	
		· · · · · · · · · · · · · · · ·		-
		<u> </u>		
	······································			
		·		
				.
	· · · · · · · · · · · · · · · · · · ·			
Total. (Column (b) must equal Form 990, Part X, Col. (B) line 13.)		1		<u> </u>
Part IX Other Assets (See Form 990, Part)	Description	.	(b) Bo	ok value
(a/	Description			
		······································		
		· · · · · · · · · · · · · · · · · · ·		
······				
				
	. <u> </u>	· · · · · · · · · · · · · · · · · · ·		<u> </u>
	Red 151			
Total. (Column (b) must equal Form 990; Part X, col.(B),	nne 15):	<u> </u>	<u></u>	
Part X Other Liabilities (See Form 990, Pa	(b) Amount		<u> </u>	<u> </u>
(a) Description of Liability	(b) Amount			
Federal Income Taxes ACCRUED VACATIONS PAYABLE	40,7	21.		
ACCRUED VACALIONS FATADIL				
	···			

 Total. (Column (b) must equal Form 990, Part X, col. (B) line 25)
 40, 721.

 2. FIN 48 Footnote. In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48.

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Schedule D (Form 990) 2009 FRIENDS OF THE RIVER FOUNDATION	94-2400210	Page 4
Part XI Reconciliation of Change in Net Assets from Form 990 to Financial Statement	S	
1 Total revenue (Form 990, Part VIII,column (A), line 12)		990,261.
2 Total expenses (Form 990, Part IX, column (A), line 25).		<u>2,141,900.</u>
3 Excess or (deficit) for the year. Subtract line 2 from line 1	1	1,151,639.
4 Net unrealized gains (losses) on investments		
5 Donated services and use of facilities		
6 Investment expenses		
7 Prior period adjustments.		
8 Other (Describe in Part XIV)		
9 Total adjustments (net). Add lines 4 through 8		
10 Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9		1,151,639.
Rart XII Reconciliation of Revenue per Audited Financial Statements With Revenue per	er Return	
1 Total revenue, gains, and other support per audited financial statements	1	990,261.
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a Net unrealized gains on investments		
b Donated services and use of facilities		
c Recoveries of prior year grants		
d Other (Describe in Part XIV) 2d		
e Add lines 2a through 2d	2e	- , , -
3 Subtract line 2e from line 1	3	990,261.
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a Investments expenses not included on Form 990, Part VIII, line 7b		
b Other (Describe in Part XIV)		
c Add lines 4a and 4b	4c	
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	<u>990,261.</u>
Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per I	Return	
1 Total expenses and losses per audited financial statements		2,141 <u>,900</u> .
2 Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a Donated services and use of facilities		
b Prior year adjustments	<u> </u>	
c Other losses		
d Other (Describe in Part XIV)		
e Add lines 2a through 2d	2e	
3 Subtract line 2e from line 1		2,141,900.
4 Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a Investments expenses not included on Form 990, Part VIII, line 7b	<u>·</u>	
b Other (Describe in Part XIV)		
c Add lines 4a and 4b.	<u>4c</u>	
5 Total expenses. Add lines 3 and 4c (This must equal Form 990, Part I, line 18.)		2,141,900.
Part XIV Supplemental Information		<u> </u>
Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part line 4: Part X, line 2: Part XI, line 8; Part XII, lines 2d and 4b; Also complete this	IV, lines 1b and 2 part to provide ar	b; Part V, v additional

line 4; Part X, line 2; Part XI, line 8; Par information.

Schedule D (Form 990) 2009 FRIENDS OF THE RIVER FOUNDATION Part XIV Supplemental Information (continued)

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SCHEDULE G (Form 990 or 990-EZ)	l or 19.`o	ete if the organ r if the organiza	lization an ation enter	swered'Ye red more t	nation Regardir ming Activities es' to Form 990, Part IV, han \$15,000 on Form 9 Z. ► See separate instr	, lines 17 90-EZ, lit	ne 6a.	OMB No. 1545-0 2009 Open to Pub inspector) Ilic
Internal Revenue Service							Employer identifica		
FRIENDS OF THE		IDATTON					94-240021		
Part Fundraising	Activities, Comple	te if the organi	ization ans te this part	swered 'Ye	es' to Form 990, Part IV	/, line 17			
X Mail solicitation X Internet and X Phone solicitation X In-person sol 2a Did the organizate employees listed	ons email solicitations ations icitations ion have written of in Form 990, Part	r oral agreemer VII) or entity ir	ot with any	/ individua on with pro	wing activities. Check a X Solicitation of non- Solicitation of gove X Special fundraising I (including officers, dir ofessional fundraising s	governm rnment (events ectors, ti ervices?	ent grants grants rustees or key		X No
b If 'Yes,' list the te compensated at l	en highest paid ind east \$5,000 by the	lividuals or entities or entities or an entities or an entities of the entits of the entities of the entits of	ties (fundr	aisers) pu	rsuant to agreements u	inder wh	ich the fundrais	er is to be	. •
(i) Name of ir or entity (fun	ndividual	(ii) Activity	have custod	fundraiser ly or control butions?	(iv) Gross receipts from activity	(or a	nount paid to retained by) aiser listed in col.(i)	(vi) Amount pa (or retained l organizatio	by)
· · · · ·			Yes	No					
• .									
· · ·		·							
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		<u> </u>				ļ			
						ļ			
· · · · · · · · · · · · · · · · · · ·		. <u></u>							
·	· · · · · · · · · · · · · · · · ·	<u> </u>							
	· · · · ·								
Total									0.
3 List all states in v or licensing.	which the organiza	tion is registere	eq or licen:		cit funds or has been n				
· · · · · · · · · · · · · · · · · · ·									-
							_		
									

Schedule G (Form 990 or 990-EZ) 2009 FRIENDS OF THE RIVER FOUNDATION

94-2400210 Page 2

Par	111	Fundraising Events. Complete if reported more than \$15,000 on F	the organization a orm 990-EZ, line (nswered 'Yes' to F 5a. List events with	orm 990, Part IV, gross receipts gre	line 18, or ater than \$5,000.
RE			(a) Event #1 CALIFORNIA RIV (event type)	(b) Event #2 OTHER FUNDRAIS (event type)	(c) Other Events 1 (total number)	(d) Total Events (Add col. (a) through col. (c))
REVENUE	1	Gross receipts	130,818.	23,742.	17,475.	172,035.
Ĕ	2	Less: Charitable contributions				
	3	Gross income (line 1 minus line 2)	130,818.	23,742.	17,475.	172,035.
	4	Cash prizes				
	5	Noncash prizes				
DIRECT	6	Rent/facility costs	1,741.	934.	· ·	2,675.
	7	Food and beverages				
EXPE	8	Entertainment.				
EXPENSES	9	Other direct expenses	29,049.	12,277.	5,756.	47,082.
S	10	Direct expense summary. Add lines 4- th				
	11	Net income summary. Combine lines 3, c	olumn (d) and line 10.		▶	122,278.
		Gaming. Complete if the organiz \$15,000 on Form 990-EZ, line 6a	ation answered 'Ye	es' to Form 990, Pa	art IV, line 19, or re	eported more than
REVENUE			(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (Add col. (a) through col. (c))
N U E	1	Gross revenue				
	1					
EXPENSE Dirense	2	Cash prizes.		· · · · ·		· · · · · · · · · · · · · · · · · · · ·
T Ë S	4	Rent/facility costs	· · ·			
	5	Other direct expenses				<u>.</u>
	6	Volunteer labor.	Yes%	Yes% No	L Yes% No	
	_				-	
	7	Direct expense summary. Add lines 2 thro				
	8	Net gaming income summary. Combine li	<u>nes 1, column (d) and l</u>	ine 7	<u></u>	YES NO
9		er the state(s) in which the organization op he organization licensed to operate gaming				
	b if 'N 	No,' explain:				
		re any of the organization's gaming license: (es,' explain:	s revoked, suspended o	or terminated during the	tax year?	<u>10a</u>
11 12		es the organization operate gaming activitie he organization a grantor, beneficiary or tru				11
BAA	adn	ninister charitable gaming?	TEEA3702L (12 rm 990 or 990-EZ) 2009

13	Indicate the percentage of g	garning activity operated in	n:		YES NO
a	The organization's facility				
b	An outside facility				<u>a</u>
14	Enter the name and addres	s of the person who prepa	ares the organization's gaming/s	special events books and records:	
	Name: ►				-
					-
15a	Does the organization have	a contact with a third par	rty from whom the organization i	receives gaming revenue?	15a
h	If 'Yes,' enter the amount of	of gaming revenue receive	d by the organization \$	and the amount	
	of gaming revenue retained				
	If 'Yes,' enter name and ad				
-					
	Name: ►				_
			— — — — — — — — — —		
	Address: F				-
16	Gaming manager informati	ол	· · · · ·		
	Name: •		· · ·		-
	· .	-		. :	
	Gaming manager compens	sation ► \$	<u> </u>		
		. takata 🖕			
	Description of services pro-	vided; =			-
	Director/officer	Employee	Independent o	contractor	
1 7	Mandatory distributions				
		d under state law to make	charitable distributions from the	aming proceeds to retain the	
	state gaming license?			* * * * * * * * * * * * * * * * * * * *	17 a
b	Enter the amount of distrib	outions required under stat	te law to be distributed to other (exempt organizations or spent in th	e 🛛
	organization's own exempt	activities during the tax y	/ear: ► \$	<u> </u>	
BAA			TEEA3703L 02/05/10	Schedule G (Form	990 or 990-EZ) 20

SCHEDULE O	Supplemental Information to Form 990		OMB No. 1545-0047
(Form 990)			2009
–	Complete to provide information for responses to specific questions o Form 990 or to provide any additional information. ► Attach to Form 990.	n	Open to Public
Department of the Treasury Internal Revenue Service		Employer identifica	Inspection
Name of the organization	RIVER FOUNDATION	94-240021	
	RT VI, LINE 3 - DESCRIPTION OF DELEGATED DUTIES TO MANAGEN		<u>ANY</u>
	INANCIAL ADMINISTRATORS HANDLE FINANCE DIRECTOR DUTI	<u>ES</u>	· ·
FORM 990, P/	ART VI, LINE 11 - FORM 990 REVIEW PROCESS	• 	·
THE FORM 99	0 IS REVIEWED AND SIGNED BY THE ORGANIZATION'S FINAN	ICE DIRECT	OR. COPIES
OF THE DRAF	T WILL BE PROVIDED TO THE FINANCE COMMITTEE.	·. 	 `
			
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Schedule O (Form 990) 2009	Page 2 Employer identification number
Name of the organization	94-2400210
FRIENDS OF THE RIVER FOUNDATION	94-2400210
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	Form	. 990			_	_			ļ	OV3 No. 154	5-0047
,	, i 0ili			Return of Organizati	-					200	8
` ~				Under section 501(c), 527, or (except black lung b	enefit trust or	private foundation	on)				
Inter	anment of Inst Rever	the Treasury we Service		The organization may have to use a contract of the organization	opy of this return t	o satisfy state report	ting requirem	ents.	Ope	n to Public	Inspection
~	For the	2008 calendar	year, o	er tax year beginning		2008, and endin	ıg	<b>b</b>		•	
в		applicable: Pl	6450 US0	FRIENDS OF THE RIVER	COUNDATE	- NI		• • •	2400	lication Numbs 21 A	r
	<b>F</b>		(S label or print	1418 20TH STREET, SU		JIN		E Teleph			<u> </u>
	}{	e change i el return i s	v type, Sce pecific	SACRAMENTO, CA 95811						5 X214	
	1	[]	nstruc- tions.				ľ				
	Ame	inded return						G Gross I	eceipts \$	2,63	7,383.
	Appl			ind address of principal officer:			H(a) is this a	* ·			'es X No
<u> </u>	·· <u>·</u> ···			AS C ABOVE	<u> </u>		H(b) Are all a If 'No,' a	annates inc attach a list.		ituctions)	'es No
<u> </u>		exempt status		(c) (3)  (insert no.) NDSOFTHERIVER, ORG	4947(a)(1)	or 527			. 10	,	
<u> </u>		site: ► WWW.	Corpora		 ha∤≯	L Year of Ferma	H(c) Group e			gal domicile:	
	irt I	Summary	<u> </u>		121	L. Pear OF Campa	1041.		5(are of 16	gai donesiio.	
65.000		4	••	anization's mission or most signifi	cant activities:	PROMOTE	PRESER	VATION	OF	RIVERS.	·····
8	- I						·				
Č					·	~ ~					
Activities & Governance	<b>2</b> c	heck his hor a		if the organization discontinued its	onerations or	disposed of mor		A of its a	 ecete		
Ŭ				bers of the governing body (Part V					3		15
90 90 60				t voting members of the governing					4		0
Ň				yees (Part V, line 2a)					5	·	29
Act				eers (estimate if necessary) usiness revenue from Part VIII, lin					0 7a	·· ··· ··· ·	<u>350</u> 0.
				taxable income from Form 990-T,					75		<u> </u>
								rior Year	•••••	Curren	t Year
đi				ls (Part VIII, line 1h)				,957,8	31.	2,10	8,970.
Revenue				ue (Part VIII, line 2g)							4,500.
Rev			•	rt VIII, column (A), lines 3, 4, and	,			$\frac{46,7}{152,5}$		10	8,354.
				II, column (A), lines 5, 6d, 8c, 9c, nes 8 through 11 (must equal Part				$\frac{152,5}{158,1}$			<u>8,933.</u>
				unts paid (Part IX, column (A), lin				/ + • • / +		~/~	
	•			nembers (Part IX, column (A), line	•		j			· ·	·· · · · · · · · · ·
Ð	15 S	alaries, other c	ompen	sation, employee benefits (Part IX	, column (A), l	nes 5-10)	. 1	,174,7	19.	1,17	2,228.
680	16a P	rofessional fun	draising	g fees (Part IX, column (A), line 1	ie)		-				
Ехрепаез	ЬΤ	otat fundraising	expen	ses (Part IX, column (D), line 25)	۶ <u></u>	127,788.					
ш	17 O	Iher expenses	(Part I)	X, column (A), lines 11a-11d, 11f-2				,603,1	.63.	1,41	2,150.
	18 T	otat expenses.	Add lin	ies 13-17 (must equal Part IX, colu	ımn (A), line 2	5 <b>)</b>	. 2	,777,8	· · · · ·		4,378.
	19 R	evenue less ex	penses	Subtract line 18 from line 12			<u>.</u>	380,2	39.	-27	5,445.
200								ning of Y		End of	
0 0 1 0 1 0 1 0 1 0 1 0 0 0 0 0 0 0 0 0				ie 16) line 26}				<u>,748,9</u> 125,1			4,715.
Net Assets or Fund Balances				•			· · · · ·	, 623, 8	· · · · · · · · ·		6,332.
	22 N rt II	Signature		nces. Subtract line 21 from line 20	<u>*************************************</u>		<u>.                                    </u>	,023,0	41.	1, 34	8,383.
8,992		M			hulina scoomnany	na schedules and sta	tenents and	to the best	of av.ko	wiedoe and ba	lief it is
		true, correct, and o	omplete.	I declare that I have examined this return, in Declaration of preparer (other than officer) i TAXPAYERS CO	s based on all infor V	mation of which prep	iarer has any l	knowledge.		onneago.c.na or	
Siç		▶			: * 						
He	re	Signature of o	fficer				Date	ê			
		P		Color-		······					
<u></u>		Type or print r	idine and	] (IEIO. 	#1::	1 Data				Dater's identifie	na number
Pa	hi					Date		eckil f: eleved Pr		parer's identifyi instructions)	ing monitors
Pre		Preparer's signature	ាលមរ	VL. GOODELL		***	em	played 🕨	Ц  N/	ά	
par	rer's	Firm's name (or			& BRIGHT	LLP				41	·······
Us		vours if self-		5 RIVER PARK DRIVE STR			 ElN	ı ⊳ N	/A		
On	чy	employed), address, and ZIP + 4		AMENTO, CA 95815			· · · · · · · · · · · · · · · · · · ·	one no. 🎽		) 929-0	264
May	the IR	λ	· · ·	ith the preparer shown above? (se	e instructions	· · · · · · · · · · · · · · · · · · ·			******	X Yes	No

BAA For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.

TEEA0112L 12/22/08 Form 990 (2008)

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	n 990 (2008) FRIENDS OF THE RIVER FOUNDATION	94-2400210	Page 2
E a	rt III Statement of Program Service Accomplishments (see instructions)		
<b>, 1</b>	5 5		
	PROMOTE PRESERVATION OF RIVERS.		
	~~ • • • • • • • • • • • • • • • • • •		
2	Did the organization undertake any significant program services during the year which were not listed on t		_
	Form 990 or 990-EZ?	Yes	X No
	If 'Yes,' describe these new services on Schedule O.	_	_
3	Did the organization cease conducting, or make significant changes in how it conducts, any program servi	ices?Yes	X No
	if 'Yes,' describe these changes on Schedule O.		
4	Describe the exempt purpose achievements for each of the organization's three largest program services	by expenses. Section 501(c	)(3)
	and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and expenses, and revenue, if any, for each program service reported.	allocations to others, the to	nai
•••••	***************************************	<u></u>	· · · · · · · · · · · · · · · · · · ·
4 8	a (Code:) (Expenses \$455,133., including grants of \$)		)
	CONSERVATION PROGRAMS: ADVOCATE FOR PRESERVATION AND PROTECTION	OF RIVER AND WA	TER
	RESOURCES; ALSO ADVOCATE FOR HYDROPOWER REFORM.		
	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	* - <i>-</i>	
			·· · ·
		······································	·····
	a (Code:) (Expenses \$ 100,398. including grants of \$) (Revenue 🖇	``
41	PUBLIC EDUCATION PROGRAMS: EDUCATE AND GRASSROOTS ORGANIZING OF		
	FOR THE PRESERVATION AND PROTECTION OF RIVERS.		
	TOK THE PRESERVATION AND PROTECTION OF RIVERS.		
	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~		
		~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~	
		<u></u>	
40	: (Code: (Expenses \$ 1,713,372, including grants of \$)	(Revenue \$	)
	FISCAL SPONSORED PROGRAM EXPENDITURES: ORGANIZATIONS RELATED TO	) FRIENDS OF THE	RIVER
	FOR WHOM FRIENDS OF THE RIVER ACTS AS FISCAL SPONSOR.		
		,,	
		· ··· ··· ··· ··· ··· ··· ··· ··· ···	
	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~		·
			·
		·	
		<u> </u>	<u> </u>
4 d	l Other program services, (Describe in Schedule O.)	r.	、
-		\$	/
4e	• Total program service expenses ► \$ 2,268,903. (Must equal Part IX, Line 25, column (<i>5).)</i>	

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Pa	rt IV Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A	1	х	
2		2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part 1	3		х
4	Section 501(c)(3) organizations. Did the organization engage in tobbying activities? If 'Yes,' complete Schedule C, Part II	4		Х
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and			
5	reporting requirement and proxy tax? If 'Yes,' complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, Part F,	6		X
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		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III.	8		X
9	Did the organization report an amount in Part X, line 21; 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		х
10		10		X
11	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If 'Yes,' complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable	11	x	
12	Did the organization receive an audited financial statement for the year for which it is completing this return that was prepared in accordance with GAAP? If 'Yes,' complete Schedule D, Parts XI, XII, and XIII.	12	x	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		X
14:	Did the organization maintain an office, employees, or agents outside of the U.S.?	14a		X
I	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the U.S.? If 'Yes,' complete Schedule F, Part L	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If 'Yes,' complete Schedule F, Part II.	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If 'Yes,' complete Schedule F, Part III	16		X
1 7	Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If 'Yes,' complete Schedule G, Part I	17]	X
18	Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II	18	X	
19	Did the organization report more than \$15,000 on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III.	.19		X
20	Did the organization operate one or more hospitals? If 'Yes,' complete Schedule H	20		X
21	Did the organization report more than \$5,000 on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II.	. 21		X
22	Did the organization report more than \$5,000 on Part IX, column (A), line 2? If 'Yes,' complete Schedule I, Parts I and III	22		X
23	Did the organization answer 'Yes' to Part VII, Section A, questions 3, 4, or 5? If 'Yes,' complete Schedule J.	23		x
24 <i>a</i>	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the tast day of the year, and that was issued after December 31, 2002? If 'Yes,' answer questions 24b-24d and complete Schedule K. If 'No,'go to question 25	24a		х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		<u> </u>
	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I	25a		x
b	Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a prior year? If 'Yes,' complete Schedule L, Part I.	25b		x
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If 'Yes,' complete Schedule L, Part II	26		x
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial contributor, or to a person related to such an individual? If 'Yes,' complete Schedule L, Part III	27		x
BAA		Form	990 (2	

94-2400210

Page 3

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******		1-2400210	P	'age 4
Pa	nt IV Checklist of Required Schedules (continued)			
28	During the tax year, did any person who is a current or former officer, director, trustee, or key employee:		Yes	No
:	a Have a direct business relationship with the organization (other than as an officer, director, trustee, or employ or an indirect business relationship through ownership of more than 35% in another entity (individually or colle with other person(s) listed in Part VII, Section A)? If 'Yes,' complete Schedule L, Part IV	ctively 🕬		X
I	b Have a family member who had a direct or indirect business relationship with the organization? If 'Yes,' comp Schedule L, Part IV	ete 28b		<u>X</u>
•	Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a pri corporation) doing business with the organization? If 'Yes,' complete Schedule L, Part IV	ofessional 28c		<u>X.</u>
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M			X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conse contributions? If 'Yes,' complete Schedule M	rvation		<u>X</u>
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Pa	rt I		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II.			X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations s 301.7701-2 and 301.7701-3? If 'Yes,' complete Schedule R, Part I	ections		<u>x</u>
34	Was the organization related to any tax-exempt or taxable entity? If Yes,' complete Schedule R, Parts II, III, I' line 1	V, and V,		x
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Sche Part V, line 2	edule R,		х
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2			х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization a treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI.	nd that is		x
BAA		Form	990 (2008)

A LOW OF A LOW OF

Infor b Ente c Did ti (gam	the number reported in Box 3 of form 1095, Annual Summary and Transmittal of U.S. nation Returns. Enter -0- if not applicable	32		Yes
Infor b Ente c Did ti (gam	nation Returns. Enter -0- if not applicable. 1a the number of Forms W-2G included in line 1a. Enter -0- if not applicable. 1b the organization comply with backup withholding rules for reportable payments to vendors and report	······································		
c Did ((gam	e organization comply with backup withholding rules for reportable payments to vendors and report	0		
(gam	e organization comply with backup withholding rules for reportable payments to vendors and report bling) winnings to prize winners?			
2 a Enter i	······································	abte gaming	1c	
calend	he number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the ar year ending with or within the year covered by this return	29		
2b if at i	east one is reported on line 2a, did the organization file all required federal employment tax returns	?	2b	X
Note.	If the sum of lines 1a and 2a is greater than 250, you be required to e-life this return, (see instructi	ons)		
3a Did ti this r	e organization have unrelated business gross income of \$1,000 or more during the year covered by eturn?	/	3a	
blif 'Ye	s' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule O		3b	
4a At an finan	y time during the calendar year, did the organization have an interest in, or a signature or other aut fal account in a foreign country (such as a bank account, securities account; or other financial acco	horily over, a unt)?	4 a	
	s,' enter the name of the foreign country: 🕨			
See (Finar	he instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank cial Accounts.	and		
5a Was	he organization a party to a prohibited tax shelter transaction at any time during the tax year? \ldots		5a	L
b Did a	ny laxable party notify the organization that it was or is a party to a prohibited lax sheller transaction	n?	5b	
c If 'Ye Prohi	s,' to question 5a or 5b, did the organization file Form 8886-T, Disctosure by Tax-Exempt Entity Reg	arding	5c	
6a Did ti	e organization solicit any contributions that were not tax deductible?		6a	
b if 'Ye	s,' did the organization include with every solicitation an express statement that such contributions of tible?	1	6b	
7 Orgai	izations that may receive deductible contributions under section 170(c).			
	e organization provide goods or services in exchange for any quid pro quo contribution of more that	n \$75?	7a	
b If 'Ye	; did the organization notify the donor of the value of the goods or services provided?		7.b	
c Did IF Form	e organization sell, exchange, or otherwise dispose of langible personal properly for which it was re 8282?	equired to file	7c	
	, indicate the number of Forms 8282 filed during the year			
e Did th benef	e organization, during the year, receive any funds, directly or indirectly, to pay premiums on a pers	onal	7e	
	e organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	F	71	<u> </u>
	contributions of qualified intellectual property, did the organization file Form 8899 as required?	r	7g	
	contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C		7h	
	n 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section 509(rting organizations. Did the supporting organization, or a fund maintained by a sponsoring organiza s business holdings at any time during the year?		8	
	n 501(c)(3) and other sponsoring organizations maintaining donor advised funds.			
	e organization make any taxable distributions under section 4966?		9a	233E)
	e organization make any taxable distributions under section 4900;		9a 9b	
	n 501(c)(7) organizations. Enter:			
	on fees and capital contributions included on Part VIII, line 12			
	Receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
	n 501(c)(12) organizations. Enter:			
	income from other meinbers or shareholders			
b Gross	income from other sources (Do not net amounts due or paid to other sources against Its due or received from them.)			
	n 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?.		12a	www.046666

Form 990 (2008)	FRIENDS	OF	THE	RIVER	FOUNDATION

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Form 990 (2008)

TOTA 556 (2008) FATENDO OF THE REVEN FOUNDATION	94~2400210	rage b
Part VI Governance, Management and Disclosure (Sections A, B, and C reques	st information about	policies not
required by the Internal Revenue Code.)		,
Section A. Governing Body and Management		

our of the second and the second of the seco			
For each 'Yes' response to lines 2-7b below, and for a 'No' response to lines 8 or 9b below, describe the circumstances, processes, or changes in Schedule O. See instructions.		Yes	No
1a Enter the number of voting members of the governing body			
b Enter the number of voting members that are independent			
2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee or key employee?	2		X
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		x
4 Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		X
5 Did the organization become aware during the year of a material diversion of the organization's assets?	-5		x
6 Does the organization have members or stockholders?	6		X
7a Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a		X
b Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		Х
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
a The governing body?	8a		Х
b Each committee with authority to act on behalf of the governing body?	8b		Х
9a Does the organization have local chapters, branches, or affiliates?	9a		X
b if 'Yes,' does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?	9b		
10 Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations must describe in Schedule O the process, if any, the organization uses to review the Form 990SEE.SCHEDULE.O	10		х
11 Is there any officer, director or 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.	11		х
Section B. Policies			
		Yes	No

12 a Does the organization have a written conflict of interest policy? If 'No,' go to line 13,						
b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		x			
c Does the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this is done	12c		X			
13 Does the organization have a written whistleblower policy?	13	Х				
14 Does the organization have a written document retention and destruction policy?	14	Х				
15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision:						
a The organization's CEO, Execulive Director, or top management official?	15a	Х				
b Other officers of key employees of the organization?	15b	Х				
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		X			
b If 'Yes,' has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?	16b					
Section C. Disclosures		å				

17 List the states with which a copy of this Form 990 is required to be filed * CA

18	Section 6104 requires an organization to m inspection. Indicate how you make these av	ake its Forms 1023 (c altable. Check all that	r 1024 if applicable), 9 It apply.	190, and 990-T	(501(c)(3)s only) available for public
	Own website Another's w	ebsite X	Upon request		

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

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

BILL DUARTE 1418 20TH STREET, SUITE 100 SACRAMENTO CA 95811 (916) 442-3155

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Page 7

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

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

1 a Complete this table for all persons required to be listed. Use Schedule J-2 if additional space is needed.

• List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and current key employees. Enter -0- in columns (D), (E), and (F) if no compensation was paid.

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) or more than \$100,000 from the organization and any
related organizations.

 List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

• List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$100,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

Check this box if the organization did not compensate any officer, director, trustee, or key employee.

(A)	(B)	(c)				(D)	(E)	(F)		
Name and Title	Average hours	Posi	Position (check all that apply)		Reportable compensation from	Reportable compensation from	Estimated			
	per week	or di d	12scl	Officer	Xey	S H	Former	the organization (W-2/1099-MISC)	compensation from related organizations (Y-2/1099-MISC)	annunt of other compensation
		Individual trustee or director	Institutional trusted	Cer .	Key employee	Highest compensatod employee	mer	(11-2/1039-51136)	(N-2/1039-3415C)	from the organization and related
		a ≂.			Noye	e corrig				organizations
		stec	rusti		ă	pens				
<u>.</u>			ä			atod				
PAUL TEBBEL]									·····
EXECUTIVE DIREC	40	X						41,247.	0.	0.
ANTHONY BOGAR										······································
DIRECTOR	40	X						30,976.	0.	0.
CRAIG THOMAS										······································
DIRECTOR	40	X						67,188.	0.	0.
STEVE_EVANS										· · · · · · · · · · · · · · · · · · ·
DIRECTOR	40	X						61,500.	0.	0.
BJORN_STROMSNESS										
DIRECTOR	40	X						51,000.	0,	0.
WILLIAM DUARTE										
DIRECTOR	40	X						35,860.	0.	0.
KEITH NAKATANI					ļ					
DIRECTOR	40	X						60,000.	0.	
DAVID_NESMITH		·								
DIRECTOR	40	X						39,440.	0.	0.
BARBARA BARRIGAN-PARILLA		[ĺ				
DIRECTOR	40	X						48,923.	0.	0.
SEE ATTACHED							İ			
BOARD OF DIREC.	1							0.	0.	0.
BJORN STROMSNESS									_	
CONTRACTOR	40					X	_	51,000.	Q.	0.
KEITH NAKATANI DIRECTOR	40							60 000		_
STEVE EVANS	40	· · · · ·		-	-+	X		60,000.	0.	0.
DIRECTOR	10							C1 500		<u>,</u>
CRAIG THOMAS	40	··· }		-		<u> </u>		61,500.		0.
DIRECTOR	40					v		67 100		0
BARBARA A. BARRIGAN-PARRIL	40					X		67,188.	0.	0.
DIRECTOR	40					~		40.000		<u>^</u>
	4V				-+	X		48,923.	0.	0,

			-+	-+		+	+		· · · · · · · · · · · · · · · · · · ·	
	,,			Ĺ	L	L			<u></u>	

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	990 (2008) FRIENDS OF THE RIVER FOUN									94-240021	
Pa	VII Section A. Officers, Directors, Trus	tees, I	Key	Er			ees	, ar	1		1
	(A)	(B)				c)			(D)	(E)	(F)
	Name and Title	Average hours per week		<u> </u>	Creci Officer		e Highest compensated	<u> </u>	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1039-MISC)	Estimated amount of other compensation from the organization and related organizations
·						 		·•		······································	· · · · ·
											······································
		· · · · · ·		<u> </u>							
										··· ·· · · ··· · ···	· · · · · · · · · · · · · · · · · · ·
<u> </u>											
							<u> </u>				
									,		
								····	·	······································	······································
~											
	Total		LI	I			L	*	724,745.		0.
· · · · · · · · · · · · · · · · · · ·	Total number of individuals (including those in 1a) wh	to recei	ved	nior	e th	an :	\$100	,00(
	organization 🕨 0						·····	~~~~	**************************************	·····	
4	3 Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? If 'Yes,' complete Schedule J for such individual. 3 X 4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If 'Yes' complete Schedule J for such 4 X										
	rendered to the organization? If 'Yes,' complete Sche on B. Independent Contractors	edule J	for s	uch	per	son			<u></u>	·····	<u>. 5 X</u>
	Complete this table for your five highest compensated compensation from the organization.	d indep	ende	ent o	onti	ract	ors l	hal	received more that	in \$100,000 of	· · · · · · · · · · · · · · · · · · ·
	(A) Name and business address								(8) Description o	f Services	(C) Compensation
DAVE	EDELSON - ATTORNEY 840 GRIZZLY PEAK BLVD	BERKE	CLEY	, с	A 9	470)8		LEGAL		104,000.
		· · · · ·									
										· · · · · · · ·	· · · · · · · · · · · · · · · · · · ·
											· · · · · · · · · · · · · · · · · · ·
	Total number of independent contractors (including th compensation from the organization $arphi=1$	iose in	1) w	ho r	aceì	ived	ino	re ti	≀an \$100,000 in		

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94-2400210

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				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from ta under sections 512, 513, or 514
2 w	1 a Federated campaigns	1a					1
	b Membership dues	jumment.					
Ne l	c Fundraising events		24,020.				
ER.	d Related organizations		1 202 400	1			
AND OTHER SIMILAR AMOUNTS	e Government grants (contributio		1,707,490.				
	 f All other contributions, gifts, g similar amounts not included a 	rants, and bove	377,460.				
0	g Noncash contribus included in	*					
	h Total. Add lines 1a-1f		····	2,108,970.			
PROGRAM SERVICE REVENUE			Business Code				
Å.	2a CONTRACT SERVIC			4,500.	······································		4,500
8	b						
ŝ	с	T T T T T T T T T T T T T T T T T T T				l	
S S	d				<u> </u>	·····	
	f All other program service		······································				
¥.	g Total. Add lines 2a-21	· · ·	• • • • •	4,500.			
	3 Investment income (inclu	ıdina dividends.	interest and				
	other similar amounts)		····· »	34,348.		·	34,348
	4 Income from investment	•	-				
	5 Royalties	(i) Real	(i) Personal				
	6a Gross Rents	10,363.	(i) i ciuciai				
	b Less: rental expenses						
	c Rental income or (loss)	10,363.					
	d Net rental income or (los	s)		10,363.			10,363
	7a Gross amount from sales of	() Securities	(ii) Olher				
	assets other than inventory .	302,456.					
	b Less: cost or other basis	220 450					
	and sales expenses		·····				
	d Net gain or (toss)		• • • • • • • • • • • • • • • • • • • •	-25,994.	-25,994.		
	Ba Gross income from fundr			23,334.	25,554.		
	(not including. \$						
	of contributions reported	on line 1c).					
5	See Part IV, line 18						
	b Less: direct expenses						
	c Net income or (loss) from	1 fundraising ev	ents 🕨	176,746.			176,746
	9a Gross income from gamin See Part IV, line 19	ng activities,					
	b Less: direct expenses						
	c Net income or (loss) from		harmon				
1	Da Gross sales of inventory,						
	and allowances	a					
	b Less: cost of goods sold						
	c Net income or (loss) from						
	Miscellaneous Revenue	······	Business Code				
ľ	1a b		· · · · ·				
	Ч с						
	d All other revenue					······································	· · · · · · · · · · · · · · · · · · ·
	e Total. Add lines 11a-11d.						. <u></u>
.	2 Total Revenue. Add lines		· •	¥			
			bu, 70, 62, 50, ►	2,308,933.	-25,994.	0.	225,957

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Part IX Statement of Functional Expenses

All other organizations must com	3) and 501(c)(4) organiza plete column (A) but are (A)			D). (D)
Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
 Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21 				
2 Grants and other assistance to individuals in the U.S. See Part IV, line 22				
3 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16	-			
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	436,134.	400,274.	35,860.	0
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.	0.	0.	0
7 Other salaries and wages,	615,072.	509,306.	41,400.	64,366
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
9 Other employee benefits	121,022.	103,398.	10,789.	6,835
10 Payroll taxes				
11 Fees for services (non-employees)				
a Management	·····			
b Legal				·
c Accounting	·····			
d Lobbying				····
e Prof fundraising svcs, See Part IV, In 17				
f investment management fees				·····
g Other 2 Advertising and promotion	492.	·····	400	
3 Office expenses.	492.	30,400.	<u>492.</u> 9,326.	1 250
4 Information technology	933.	458.	475.	1,359
5 Royalties				
6 Occupancy	55,662.	27,355.	22,105.	6,202
7 Travel	98,213.	86,512.	2,778.	8,923
8 Payments of travel or entertainment expenses for any federal, state, or local public officials.				
9 Conferences, conventions, and meetings	5,605.	5,445.	160.	
0 Interest	254.	29.	225.	, , , , , , , , , , , , , , , ,
1 Payments to affiliates			· · · · · · · · · · · · · · · · · · ·	
2 Depreciation, depletion, and amortization	5,540.	398.	3,255.	1,887
3 Insurance	10,793.	2,051.	4,053.	4,689
4 Other expenses, Itemize expenses not covered above, (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 tolew.)				
a CONTRACT SERVICES	770,193.	751,619.	13 603	1 001
b ADMINISTRATIVE FEES	161,991.	161,991.	13,593.	4,981
c OTHER	46,223.	45,608.	-535.	1,150
d TELEPHONE & INTERNET	41,460.	30,502.	8,755.	2,203
e PRINTING AND PUBLICATIONS	40,918.	36,054.	2,255.	2,203
f All other expenses	132,788.	77,503.	32,701.	22,584
5 Total functional expenses. Add lines 1 through 24f	2,584,378.	2,268,903.	187,687.	127,788
26 Joint Costs. Check here ► if following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational				221,700.
campaign and fundraising solicitation	<u> </u>		,,,,,,,	Form 990 (2008

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

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Form 990 (2008)

Part X Balance Sheet

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4		(A) Beginning of year		(B) End of year
1	Cash - non-interest-bearing	3,021,	1	429,066
2	Savings and temporary cash investments	990,752.	2	908,498
3	Pledges and grants receivable, net		3	
	Accounts receivable, net.		4	92,060
	Receivables from current and former officers, directors, trustees, key employees, or other related parties. Complete Part II of Schedule L		5	······································
	Receivables from other disqualified persons (as defined under section 4958(f)(1))			
	and persons described in section 4958(c)(3)(B), Complete Part II of Schedule L		6	
: 7	Notes and loans receivable, net	<u> </u>	7	
	Inventories for sale or use		8	
· .	Prepaid expenses and deferred charges	20,568.	9	21,73
	Land, buildings, and equipment: cost basis	20,300.		21,13
	Less: accumulated depreciation. Complete Part VI of			
	· · · · · ·	10.000		10 203
		18,583.	10c	10,20
	Investments publicly-traded securities	h	11	····
	Investments other securities. See Part IV, line 11	<u></u>	12	······································
	Investments program-related, See Part IV, line 11	<u> </u>	13	·····
	Inlangible assets	1 · · · · · · · · · · · · · · · · · · ·	14	······
	Other assets. See Part IV, line 11.		15	23,14
16	Total assets. Add lines 1 through 15 (must equal line 34).	1,748,940.	16	1,484,71
17	Accounts payable and accrued expenses	52,485.	17	70,50
18	Granis payable		18	
19	Deferred revenue		19	
20	Tax-exempt bond liabilities	······································	20	
21	Escrow account liability. Complete Part IV of Schedule D.	· · · · · · · · · · · · · · · · · · ·	21	
	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part If			
	of Schedule L		22	
23	Secured mortgages and notes payable to unrelated third parties		23	
24 1	Unsecured notes and loans payable		24	
25	Other liabilities. Complete Part X of Schedule D	72,628.	25	65,828
26	Total liabilities. Add lines 17 through 25	125,113.	26	136,332
	Organizations that follow SFAS 117, check here 🕨 🕺 and complete lines			
	27 through 29 and lines 33 and 34,			
27 1	Unrestricted net assets ,	125,335,	27	-55,332
*	Temporarily restricted net assets	1,498,492.	28	1,403,715
1	Permanently restricted net assets.	2, 190, 1921	29	2/100//11
1	Organizations that do not follow SFAS 117, check here 🕨 🗌 and complete			
1	lines 30 through 34.			
	Capital stock or trust principal, or current funds		30	
		· · · · · · · · · · · · · · · · · · ·		
1	Paid-in or capital surplus, or land, building, and equipment fund		31	
1	Retained earnings, endowment, accumulated income, or other funds	1 (33 007	32	1 340 300
1	Total net assets of fund balances.	1,623,827.	33	1,348,383
	Total liabilities and net assets/fund balances.	1,748,940.	34	1,484,715
l Acco 2a Were	e the organization's financial statements compiled or reviewed by an independent a			
	the organization's financial statements audited by an independent accountant?			2b X
revie	es' to 2a or 2b, does the organization have a committee that assumes responsibility w, or compilation of its financial statements and selection of an independent accou	лtant?	••••	2c X
	result of a federal award, was the organization required to undergo an audit or aud	lits as set forth in the Si	ngle	3a X
Audil	t Act and OMB Circular A-133? es,' did the organization undergo the required audit or audits?			

SCHEDULE A	
(Form 990 or 990-F7)	۱

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Total

Public Charity Status and Public Support

2008 To be completed by all section 501 (c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts. Open to Public Department of the Treasury Internal Revenue Service Inspection Attach to Form 990 or Form 990-EZ. > See separate instructions. Name of the organization Employer identification number FRIENDS OF THE RIVER FOUNDATION 94-2400210 Part I Reason for Public Charity Status (All organizations must complete this part.) (see instructions) The organization is not a private foundation because it is: (Please check only one organization.) A church, convention of churches or association of churches described in section 170(bX1XA)(). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) A hospital or cooperative hospital service organization described in section 170(b)(1)(A)(iii). (Atlach Schedule H.) A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(ii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(bX1)(A)(vi). (Complete Part II.) An organization that normally receives: (1) more than 33-1/3 % of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions — subject to certain exceptions, and (2) no more than 33-1/3 % of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after Х June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). (see instructions) An organization organized and operated exclusively for the benefit of, to perform the functions of, or carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h. Tvne 4 b i Type # al c | d | _] Type III - Functionally integrated Type III -- Other By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). If the organization received a written determination from the IRS that is a Type I, Type II or Type III supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? Yes No a person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization? (i) 11 g (i) a family member of a person described in (i) above?..... (ii) 11 g (ii) a 35% controlled entity of a person described in (i) or (ii) above?..... (iii) 11 g (iii) Provide the following information about the organizations the organization supports. (i) Name of Supported Organization (v) Did you notify the organization in col. (i) of (vi) Is the organization in col. (i) organized in the U.S.? (i) EIN (iii) Typa of organization (iv) is the (vii) Amount of Support (described on lines 1-9 above or IRC section (see instructions)) rganization in col. (i) listed in your your support? governing document? Yes Yes No No Yes No

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

Schedule A (Form 990 or 990-EZ) 2008

OVS No. 1545-0047

Schedule A (Form 990 or 990-EZ) 2008	FRIENDS OF THE I	RIVER FOUNDATION	94-2400210
Part II Support Schedule for Or	ganizations Describe	ed in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

Page 2

(Complete only if you checked the box on line 5, 7, or 8 of Part I.)

Se	ction A. Public Support	ed the box of the	5, 7, 01 6 01 F an	<u></u>		······································				
Cal	endar year (or fiscal year inning in) ►	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(I) Tolal			
1	Gifts, grants, contributions and membership fees received. (Do not include 'unusual grants.')									
	Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf									
3	The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge									
4	Total. Add lines 1-3									
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									
Sec	tion B. Total Support	·····		*****						
	ndar year (or fiscal year nning in) ≻	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(I) Total			
7	Amounts from line 4									
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources									
9	Net income form unrelated business activities, whether or not the business is regularly carried on						······			
10	Other income, Do not include gain or loss form the sale of capital assets (Explain in Part IV.)									
11	Total support, Add lines 7 through 10									
12	Gross receipts from related activi	ilies, etc. (see insl	tructions)							
	First five years. If the Form 990 is organization, check this box and	stop here		I, third, fourth, or	fifth tax year as a	1 section 501(c)(3)	► []			
	tion C. Computation of Pu	· · · · · · · · · · · · · · · · · · ·			• • • • • • • • • • •		~~ <u>~~</u>			
-	Public support percentage for 200			•			<u>%</u>			
15	Public support percentage for 200					t <u>a</u>	%			
	33-1/3 support test – 2008. If the and stop here. The organization of	qualifies as a publ	icly supported org	janization,	·····	•••••••••••••••••••••••••••••••••••••••	▶			
Ľ	b 33-1/3 support test – 2007. If the organization did not check a box on line 13, or 16a, and line 15 is 33-1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization									
1 7 a	17a 10%-facts-and-circumstances test — 2008. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and stop here. Explain in Part IV how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization									
b	10% facts-and-circumstances tes or more, and if the organization m organization meets the 'facts-and	neets the 'facts-ar -circumstances' t	id-circumstances' est. The organiza	test, check this b ation quatifies as a	ox and stop here. a publicly supporte	Explain in Part IV d organization	how the			
18	Private foundation. If the organiz	ation did not chec	k a box on line, 1	3, 16a, 16b, 17a,						
BAA					Sc	hedule A (Form 99	0 or 990-EZ) 2008			

Schedule A (Form 990 or 990-EZ) 2008

Schedule A (Form 990 or 990 EZ) 2008 FRIENDS OF THE RIVER FOUNDATION Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I.)

Section A. Public Support

2

Secti	on A. Public Support						
	dar year (or liscal yr beginning in)►	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1 C 1 1	Gifts, grants, contributions and nembership fees received. (Do not include 'unusual grants.')	2,464,952.	2,774,892.	3,293,152,	2,957,831.	2,084,950.	13,575,777
2 C a c fi ti	Gross receipts from admissions, merchandise sold or services performed, or acilities furnished in a activity hat is related to the organization's tax-exempt			<u> </u>			
թ 3 ն Ո	urpose ross receipts from activities that are et an unrelated trade or business	112.	12,914.	111,119.	210,675.	200,765.	535,585
4 T o e	nder section 513 ax revenues levied for the rganization's benefit and illner paid to or expended on s behalf						0
5 T #	he value of services or acitilies furnished by a overnmental unit to the rganization without charge						0
6 T	otal. Add lines 3-5	2,465,064.	2,787,806.	3,404,271.	3,168,506.	2,285,715.	14,111,362.
- 2	unounts included on lines 1, , 3 received from disqualified ersons.	0.	0.	0.	0.	0.	0.
bA ai di e: th	anounts included on lines 2 nd 3 received from other than isqualified persons that xceed the greater of 1% of he total of lines 9, 10c, 11,						
	nd 12 for the year or \$5,000	0.	0.	0.	0.	0.	0.
	dd lines 7a and 7b	0.	0.	0.	0.	0.	0.
	ublic support (Subtract line						
	c from line 6.)		<u> </u>				14,111,362
	on B. Total Support						
	ar year (or fiscal yr beginning in) 🕨	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Totat
10a G di or ro	mounts from line 6, ross income from interest, ividends, payments received n securities toans, rents, oyalties and income form milar sources	2,465,064.		3,404,271.		2,285,715.	14,111,362.
b U in ta	nrelated business taxable icome (less section 511 ixes) from businesses cquired after June 30, 1975	25,072.	23,478.	36,992.	46,764.	34,348.	<u>166,654</u> . 0.
	dd lines 10a and 10b	25,072.	23,478.	36,992.	46,764.	34,348.	166,654.
ac W	et income from unrelated business tivities not included inline 10b, hether or not the business is gularly carried on						0.
12 O ga ča Pa	ther income. Do not include ain or loss from the sale of apital assets (Explain in art IV.) . SEE . PART IV	32,508.		-8,806.	4,967.	14,863.	43,532.
	otal support. (653 km 9, 10c, 11, 655 12.)						14,321,548.
EO.	rst five years, If the Form 990 is ganization, check this box and s	stop nere		, lhird, fourth, or	fifth tax year as a	section 501(c)(3)	>
Sectio	on C. Computation of Pu	blic Support P	ercentade				
			· · · · · · · · · · · · · · · · · · ·				
15 Pi	ublic support percentage for 200	18 (line 8, column	(f) divided by line				98.5%
15 Pi 16 Pi	ublic support percentage for 200 ublic support percentage from 2	18 (line 8, column 007 Schedule A, F	(f) divided by line Part IV-A, line 27g				<u>98.5%</u> 98.8%
15 Pi 16 Pi Sectio	ublic support percentage for 200 ublic support percentage from 2 on D. Computation of Inv	08 (line 8, column 007 Schedule A, F estment inco r	(f) divided by tine Part IV-A, tine 27g ne Percentage	<u></u>	·····	16	98.8%
15 Pi <u>16 Pi</u> Sectio 17 In	ublic support percentage for 200 ublic support percentage from 2 on D. Computation of Inv veslment income percentage fo	18 (line 8, column 007 Schedule A, F estment inco r r 2008 (line 10c, c	(f) divided by line ² art IV-A, line 27g ne Percentage olumn (f) divided	e By line 13, column			98.8%
15 Pi <u>16 Pi</u> Sectio 17 In 18 In	ublic support percentage for 200 ublic support percentage from 2 on D. Computation of Inv veslment income percentage fo vestment income percentage fro	08 (line 8, column 007 Schedule A, F estment Incor r 2008 (line 10c, c om 2007 Schedule	(f) divided by line Part IV-A, line 27g ne Percentag (olumn (f) divided A, Part IV-A, line	∋ by line 13, columr ∋ 27h	ייייייייייייייייייייייייייייייייייייי		98.8% 1.2% 1.0%
15 Pi <u>16 Pi</u> Sectic 17 In 18 In 19a 33 m	ublic support percentage for 200 ublic support percentage from 2 on D. Computation of Inv vestment income percentage for vestment income percentage fro 3-1/3 support tests – 2008. If the ore than 33-1/3%, check this bo	8 (line 8, column 007 Schedule A, F estment Incor r 2008 (line 10c, c om 2007 Schedute e organization did x and stop here.	(f) divided by line Part IV-A, line 27g ne Percentage olumn (f) divided A, Part IV-A, line not check the box The organization c	by line 13, column 27h 3 on line 14, and 1 Jualifies as a publ	in (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)). 1 (1)	16 	98.8% 1.2% 1.0% ne 17 is not
15 Po 16 Po Sectic 17 In 18 In 19 a 33 m b 33 is	ublic support percentage for 200 ublic support percentage from 2 on D. Computation of Inv vestment income percentage for vestment income percentage fro 3-1/3 support tests – 2008, if the ore than 33-1/3%, check this bo 3-1/3 support tests – 2007. If the not more than 33-1/3%, check f	8 (line 8, column 007 Schedule A, F estment incor r 2008 (line 10c, c om 2007 Schedute e organization did x and stop here. 1 e organization did his box and stop	(f) divided by line Part IV-A, line 27g ne Percentage olumn (f) divided A, Part IV-A, line not check the box fhe organization c not check a box o here. The organiza	by line 13, column 27h 3 on line 14, and i qualifies as a publ on line 14 or 19a, a ation qualifies as	ine 15 is more the icly supported org and line 16 is mor a publicly support		98.8% 1.2% 1.0% ne 17 is not
15 Po 16 Po Sectic 17 In 18 In 19 a 33 m b 33 is	ublic support percentage for 200 ublic support percentage from 2 on D. Computation of Inv veslment income percentage for vestment income percentage fro 3-1/3 support tests – 2008, if the ore than 33-1/3%, check this bo 3-1/3 support tests – 2007. If the	8 (line 8, column 007 Schedule A, F estment incor r 2008 (line 10c, c om 2007 Schedute e organization did x and stop here. 1 e organization did his box and stop	(f) divided by line Part IV-A, line 27g ne Percentage olumn (f) divided A, Part IV-A, line not check the box fhe organization c not check a box o here. The organiza	by line 13, column 27h 3 on line 14, and i qualifies as a publ on line 14 or 19a, a ation qualifies as	ine 15 is more the icly supported org and line 16 is mor a publicly support		98.8% 1.2% 1.0% ne 17 is not

Schedule A (Form 990 or 990-EZ) 2008

94-2400210

Part IV	A (Form 990 or 990 E Supplemental II Part II, line 17a	nformation. C or 17b; or Pa	omplete this rt III, line 12	part to prov . Provide an	/ide the explay y other addit	anation requi ional information	red by Part II, ition. (see inst	Pag line 10; ructions)
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SCHEDULE A, PART IV - SUPPLEMENTAL INFORMATION PAGE 5 2008 FRIENDS OF THE RIVER FOUNDATION 94-2400210 PART III, LINE 12 - OTHER INCOME NATURE AND SOURCE 2008 2007 2006 2005 2004 TOTAL <u>\$ 14,863.</u> <u>\$ 14,863.</u> <u>\$</u> 4,967. -8,806. 4,967. <u>\$ -8,806.</u> <u>\$</u> MISCELLANEOUS <u>32,508.</u> 32,508. 0.\$

Schedule of Contributors

Attach to Form 990, 990-EZ and 990-PF

See separate instructions.

2008

Department of the Treasury Internal Revenue Service Name of the organization

FRIENDS OF THE RIVER FOUNDATION

Number of the second				
mployer	106300	cation	ถน	mper

94-2400210

Organization type (check one):	
Filers of:	Section:
Form 990 or 990-EZ	X 501(c)(<u>3</u>) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization
Form 990-PF	501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation

Check if your organization is covered by the General Rule or a Special Rule. (Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.)

General Rule --

For organizations filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. (Complete Parts I and II.)

Special Rules --

For a section 501(c)(3) organization filing Form 990, or Form 990-EZ, that met the 33-1/3% support test of the regulations under sections 509(a)(1)/170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on Form 990, Part VIII, line 1h or 2% of the amount on Form 990-EZ, line 1. Complete Parts 1 and II.

For a section 501(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributor, during the year, aggregate contributions or bequests of more than \$1,000 for use *exclusively* for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.

For a section 501(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributor, during the year, some contributions for use *exclusively* for religious, charitable, etc. purposes, but these contributions did not aggregate to more than \$1,000. (If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc. purpose. Do not complete any of the Parts unless the General Rule applies to this organization because it received nonexclusively

Caution: Organizations that are not covered by the General Rule and/or the Special Rules do not file Schedule B (Form 990, 990-EZ, or 990-PF) but they must answer 'No' on Part IV, tine 2 of their Form 990, or check the box in the heading of their Form 990-EZ, or on line 2 of their Form 990-PF, to certify that they do not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

BAA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. These instructions will be issued separately.

Schedule B (Form 990, 990-EZ, or 990-PF) (2008)

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Schedule B (Form 990, 990-EZ, or 990-PF) (2008)	Page 1	of 2	of Part I
, Hane of organization	Employer ide	ntification number	er
FRIENDS OF THE RIVER FOUNDATION	94-2400)210	

Part I Contributors (see instructions.)

(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	KIMO CAMPBELL PO_BOX_127		Person X Payroll Noncash
	KENTFIELD, CA 94914	~	(Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
2	CHOUINARD FAMILY TRUST 4218 FARIA ROAD VENTURA, CA 93001	\$ <u>11,000.</u>	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
3	DERRY & CHARLENE KABCENELL 4900 ALPINE ROAD PORTOLA VALLEY, CA 94028	\$5,000.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
4	DAVE SHORE 80 E. SIR FRANCIS DRAKE STE 1A LARKSPUR, CA 94939	\$ <u>9,950.</u>	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
	MATT WINKLER 960 LIVE OAK CR AUSTIN, TX 78746	\$5,000.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
	FRANK W COLVER 320 MORNING STAR LN NEWPORT BEACH, CA 92660	\$20,000.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)

Schedule B (Form 990, 990-EZ, or 990-PF) (2008)	Page 2	of 2	of Part I
, Name of organization		entification number	ſ
FRIENDS OF THE RIVER FOUNDATION	94-240		

Part I Contributors (see instructions.)

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(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
7	DR_ALAN_HARPER_& DR_CAROL_BAIRD 5170_PARKRIDGE_DRIVE OAKLAND, CA_94619	\$ <u>5,000.</u>	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
8	KEKER & VAN NEST, LLP 710 SANSOME STREET SAN FRANCISCO, CA 94111	\$5,000.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
9	GUY & JEANINE SAPERSTEIN 52 GLEN APLINE ROAD POEDMONT, CA 94611	\$10,000.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
	CAROL_STONE	\$7,500.	Person X Payroll Noncash
	PALM BEACH_, FL 33480		(Complete Part II if there is a noncash contribution.)
(a) Number	PALM_BEACH_,_FL_33480(b) (b) Name, address, and ZIP + 4	(c) Aggregate contributions	
(a)	(b)	Aggregate	is a noncash contribution.) (d)
(a)	(b)	Aggregate	(d) Type of contribution.) Person Payroll Noncash (Complete Part II if there
(a) Number	(b) Name, address, and ZIP + 4	Aggregate contributions \$ \$ (c)	(d) Type of contribution Person Payroll Noncash (Complete Part II if there is a noncash contribution.) (d)

Schedule B (Form 990, 990-EZ, or 990-PF) (2008)	Page	1	of 1	of Part II
< Name of organization		Emple	oyer identification	number
FRIENDS OF THE RIVER FOUNDATION		94-	2400210	

Part II Noncash Property (see instructions.)

(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
N/A	····	
	s	
	······	
(b) Description of noncash property given	(c). FMV (or estimate) (see instructions)	(d) Date received
	<u> </u>	· · · · · · · · · · · · · · · · · · ·
(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date receiver
		· · · · · · · · · · · · · · · · · · ·
(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
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(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
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(b) Description of noncash property giveл	(c) FMV (or estimate) (see instructions)	(d) Date received
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	N/A Description of noncash property given (b) Description of noncash property given (c) Description of noncash property given (c) Description of noncash property given (c) Description of noncash property given	(see instructions) N/A \$ Description of noncash property given \$ Description of noncash property given

tame of organ	lization	······································	Employer identification number
	OF THE RIVER FOUNDATION		94-2400210
<u>Part III</u>	Exclusively religious, charitable, organizations aggregating more For organizations completing Part III, enter contributions of \$1,000 or less for the year.	than \$1,000 for the year.(Con	nplete cols (a) through (e) and the following line e
(a)	(b)	(c)	(d)
No. from Part I	Purpose of gift	Use of gift	Description of how gift is held
	N/A		······································
	Transferee's пате, addre	(e) Transfer of gift ss, and ZIP + 4	Relationship of transferor to transferee
(a)	(b)	(c)	(d)
No. from Part I	Purpose of gift	Use of gift	Description of how gift is held
	Transferea's name, addre:	(e) Transfer of gift ss, and ZIP + 4	Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, addres	(e) Transfer of gift Ss, and ZIP + 4	Relationship of transferor to transferee
(a) No. from	(b)	(c)	(d)
Part 1	Purpose of gift	Use of gift	Description of how gift is held
	Transferee's name, addres	(e) Transfer of gift s, and ZIP + 4	Relationship of transferor to transferee
	Transferee's name, addres	Transfer of gift	Relationship of transferor to transfere

	CHEDULE D orm 990)		plemental Financi			_	1545-0047 008
Dep Inter	artment of the Trezsury mal Revenue Service	Attach t answered	o Form 990. To be completer 'Yes,' to Form 990, Part IV, II	by organizations that les 6, 7, 8, 9, 10, 11, or 12,			to Public
	le of the organization				Employer I	denlification	
		RIVER FOUNDATION			94-240		
P.	the organizat	lons Maintaining Donc zation answered 'Yes'	or Advised Funds or O to Form 990, Part IV, I	ther Similar Funds or ine 6.	Accounts	Complet	te if
		• • • • • • • • • • • • • • • • • • •	(a) Donor advise		(b) Funds and	olber acc	ounts
1	Total number at e	nd of year		······································	(-)		
2	Aggregate contrib	utions to (during year)					
3	Aggregate grants	from (during year)		······································			
4	Aggregate value a	at end of year,		······································			········
5	Did the organization	on inform all donors and don anization's property, subject	or advisors in writing that the	assels held in donor advis	ed F	Yes	 ∏ No
6	Did the organization used only for characterization	on inform all grantees, donor Stable purceses and not for t	rs, and donor advisors in writ	ing that grant funds may be		_]	
8-1983	imparalissible priv	rate cenesit? ?				Yes	No
	mil Conservat	ion Easements Compl	ete if the organization	answered 'Yes' to For	<u>m 990, Part</u>	IV, line	. 7.
1		servation easements held by		hat apply),			
		of land for public use (e.g., re	ecreation or pleasure)	Preservation of an hist	orically importa	ant land a	rea
	Protection of r			Preservation of certifie	d historic struc	ture	
_	Preservation of						
2	Complete lines 2a of the tax year.	•2d if the organization held a	qualified conservation contr	bulion in the form of a cons	ervation easer	nent on th	ie last day
					Held at th	te End of	the Year
		onservation easements					,
		ricted by conservation easer			····		
		vation easements on a certifi					·····
		valion easements included in					
3		valion easements modified, t	ransferred, released, exlingu	ished, or terminated by the	organization d	uring the	taxable
	year >						
4	Number of states v	where property subject to co	nservation easement is location	ed »			
5	enforcement of the	tion have a written policy reg e conservation easement it h	olds?		d 	Yes	□ No
6		hours devoted to monitoring,					_
7	Amount of expense	es incurred in monitoring, ins	specting, and enforcing ease	nents during the year 🛌 💲			
8	Does each conserv 170(h)(4)(B)(i) and	vation easement reported on 170(h)(4)(B)(ii)?	line 2(d) above satisfy the re	quirements of section		Yes	□ No
9	In Parl XIV, descri	be how the organization repo le, the text of the footnote to	orts conservation easemonts	in its revenue and expanse	claiomont on	d balance 's accoun	sheet, and ling for
Pa		ons Maintaining Colle	ctions of Art, Historica wered 'Yes' to Form 99	I Treasures, or Other 0, Part IV, line 8.	Similar As	sets	
	a If the organization treasures, or other	elected, as permitted under similar assets held for publi note to its financial statemen	SFAS 116, not to report in its c exhibition, education, or re-	revenue statement and ba	ance cheet we	ale of ort	, historical art XIV,
Ł	amounts relating to	elected, as permitted under similar assets held for public these items:	c exhibilion, education, or re-	search in furtherance of pub	lic service, pro	vide the f	ollowing
	(i) Revenues inclu	ided in Form 990, Part VIII, I	ine 1				
	(ii) Assets included	d in Form 990, Part X		****	►\$		
	If the organization amounts required t	received or held works of art o be reported under SFAS 1	, historical treasures, or othe 16 relating to these items:	r similar assets for financial	gain, provide	the follow	ing
а	Revenues included	in Form 990, Part VIII, line	- -				
b	Assets included in-	Form 990, Part X	·····	•••••••••••••••••••••••••••••••••••••••		•••••••	
		d Paperwork Reduction Act					m 990) 2008

Schedule D (Form 990) 2008 FRIE Part III Organizations Maint		RIVER FOUNDAT		or Other Similar	Assets	(conti	Pag Inue
 Using the organization's accessi that apply); 			· · · · · · · · · · · · · · · · · · ·				
a Public exhibition		d 🗌 Loan d	or exchange programs				
b Scholarly research		e Olher					
c Preservation for future gener	rations			·····			· · ·
4 Provide a description of the orga		ions and explain how	they further the groan	ization's exempt purr	nose in		
Part XIV.			and an and angula	action 5 oxompt purp	7050 m		
5 During the year, did the organiza	ation solicit or rec	eive donations of art,	historical treasures, o	or other similar			
assels to be sold to raise funds to						West Colored Colored Clark	
Part IV Trust, Escrow and Cl IV, line 9, or reported	t an amount o	ngements Compl on Form 990 Parl	ete ir organizatioi · X lline 21	n answered Tes	to Form	1 990,	Par
		·····	· · · · · · · · · · · · · · · · · · ·	<u></u>			.
1 a ls the organization an agent, true included on Form 990, Part X?	stee, custodian, i	or other intermediary l	or contributions or oth	ier assels not	🗍 Yes	-	ÍПи
b If Yes,' explain the arrangement					·· [_] 16:	2	<u> </u>
B * 105, explain the difutigement		complete the following	g tuble.	[·····]······	Amou	 nł	
c Beginning balance				1c	711104		
d Additions during the year				1			
e Distributions during the year							
f Ending balance							
2a Did the organization include an a					Yes	3	M
b If 'Yes,' explain the arrangement					л Ц т	-	۰. است
Part V Endowment Funds Co		anization answer	ed 'Yes' to Form	990. Part IV. line	10.		
	(a) Current yea		(c) Two years bad			Four yea	irs bac
1 a Beginning of year balance							Maria
b Contributions	1						
c investment earnings or losses.	··········				l l		
d Grants or scholarships.	<u></u>					****	
e Other expenditures for facilities and programs							
f Administrative expenses					·····		
g End of year balance					••••••	***	******
2 Provide the estimated percentage		balance held as:					
a Board designated or quasi-endov	vment 🕨	8					
b Permanent endowment 💌	\$						
c Term endowment	¥						
3a Are there endowment funds not i organization by:	n the possession	of the organization th	al are held and admir	nistered for the		Yes	N
					3a(i)		1
(i) unrelated organizations							1
(i) unrelated organizations					mining		<u> </u>
(i) unrelated organizations(ii) related organizations			edule R?		للمشتمك الم		1.
 (i) unrelated organizations (ii) related organizations b If 'Yes' to 3a(ii), are the related or 	organizations liste	ed as required on Schu					
 (i) unrelated organizations (ii) related organizations b If 'Yes' to 3a(ii), are the related of 4 Describe in Part XIV the intended 	organizations liste d uses of the orga	ed as required on Sch anization's endowmen	t funds.				
 (i) unrelated organizations (ii) related organizations b If 'Yes' to 3a(ii), are the related of 4 Describe in Part XIV the intended 	organizations liste d uses of the org Suildings, anc	ed as required on Sch anization's endowmen	t funds.		(d)	Book V	alue
 (i) unrelated organizations (ii). related organizations b If 'Yes' to 3a(ii), are the related or 4 Describe in Part XIV the intended Part VI Investments—Land, E 	organizations liste d uses of the orga Buildings, and t (a)	ed as required on Sch anization's endowmen I Equipment. Sec Cost or other basis	t funds. Form 990, Part . (b) Cost or other	X, line 10.	(d)	Book V	alue
 (i) unrelated organizations (ii) related organizations b If 'Yes' to 3a(ii), are the related of 4 Describe in Part XIV the intended Part VI Investments—Land, B Description of investment 	organizations liste d uses of the org Buildings, and (a)	ed as required on Sch anization's endowmen I Equipment. Sec Cost or other basis	t funds. Form 990, Part . (b) Cost or other	X, line 10.	(d)	Book V	alue
 (i) unrelated organizations (ii). related organizations b If 'Yes' to 3a(ii), are the related of 4 Describe in Part XIV the intended Part VI Investments—Land, E Description of investment 1 a Land. 	organizations liste d uses of the orgi Buildings, and (a)	ed as required on Sch anization's endowmen I Equipment. Sec Cost or other basis	t funds. Form 990, Part . (b) Cost or other	X, line 10.	(d)	Book V	alue
 (i) unrelated organizations (ii) related organizations b If 'Yes' to 3a(ii), are the related of 4 Describe in Part XIV the intended Part VI Investments—Land, E Description of investment 1 a Land. b Buildings. 	organizations liste d uses of the orga Buildings, and t (a)	ed as required on Sch anization's endowmen I Equipment. Sec Cost or other basis	t funds. Form 990, Part . (b) Cost or other	X, line 10.		Book V	'alue

 Total. Add lines 1a-1e (Column (d) should equal Form 990, Part X, column (B), line 10(c).)
 10, 201.

 BAA
 Schedule D (Form 990) 2008

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Schedule D (Form 990) 2008	FRIENDS	OF	THE	RIVER	FOUNDATION

94-2400210

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Part VII Investments-Other Securities See F	orm 990, Part X, li	ne 12. N/A	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~
(a) Description of security or category (including name of security)	(b).Book value	(c) Method of value Cost or end-of-year ma	ation
Financial derivatives and other financial products,	<u> </u>	Cost or end-or-year ma	rket value
Closely-held equily interests.			
Other	· · · · · · · · · · · · · · · · · · ·	<u> </u>	······································
	····	· · · · · · · · · · · · · · · · · · ·	·····
			· · · · · · · · · · · · · · · · · · ·
	· · · · · · · · · · · · · · · · · · ·		·····
~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~			
Tatal (Column (b) about a court Factor 000 Part V and (C) (av 10)			
Total. (Column (b) should equal Form 990 Part X, col. (B) line 12.)       ►         Part VIII Investments—Program Related (See	Form 000 Part Y	line 13) N/A	
(a) Description of investment type	(b) Book value	(c) Method of value	tion
and a resultion of investment type		Cost or end-of-year mai	ket value
· · · · · · · · · · · · · · · · · · ·			
		······································	····
			· ······
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		<b> </b>	<del></del>
			·····
Total. Column (b)(should equal Form 990, Part X, Col. (B) line 13.) 🕨	<del> </del>		
Part IX Other Assets (See Form 990, Part X,	line 15) N/A		
(a) De	scription	·····	(b) Book value
· · · · · · · · · · · · · · · · · · ·	<u> </u>		·····
			· · · · · · · · · · · · · · · · · · ·
· · · · · · · · · · · · · · · · · · ·			·······
	~ <del>~~~</del> ~~~~		······
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· · · · · · · · · · · · · · · · · · ·	<u>, , , , , , , , , , , , , , , , , , , </u>		······································
Total. Column (b) Total (should equal Form 990, Part X, col.	(B), line 15)	·····	·····
Part X Other Liabilities (See Form 990, Part			
(a) Description of Liability	(b) Amount		
Federal Income Taxes			
ACCRUED VACATIONS PAYABLE	65,82	28.	
	·····		
	····		
·····	·		
Ven-T-WW-C-7000-07000000000000000000000000000			
Total. Column (b) Total (should equal Form 990, Part X, col. (B) line 25)	65,82	8.	
In Part XIV, provide the text of the footnote to the organization			/ for uncertain tax

positions under FIN 48.

Schedule D (Form 990) 2008 FRIENDS OF THE RIVER FOUNDATION 9 Part XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements	4-2400210	Page 4
1 Total revenue (Form 990, Part VIII, column (A), line 12)		,308,933.
2 Total expenses (Form 990, Part IX, column (A), line 25).		,584,378.
3 Excess or (deficit) for the year. Subtract line 2 from line 1	· · · · · ·	-275,445.
4 Net unrealized gains (losses) on investments	· · · · · · · · · · · · · · · · · · ·	
5 Donated services and use of facilities		
6 Investment expenses.		······
7 Prior period adjustments.		<u> </u>
8 Other (Describe in Part XIV)		
9 Total adjustments (net). Add lines 4-8		
10 Excess or (deficit) for the year per financial statements, Combine lines 3 and 9.	<u></u>	-275,445.
Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per		
1 Total revenue, gains, and other support per audited financial statements	. 1 2	<u>,308,933.</u>
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a Net unrealized gains on investments		
b Donated services and use of facilities		
c Recoveries of prior year grants 2c		
d Other (Describe in Part XIV)		
e Add lines 2a through 2d	. 2e	
3 Subtract line 2e from line 1.	. 3 2	,308,933.
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:		····
a Investments expenses not included on Form 990, Part Vill, line 76 4a		
b Other (Describe in Part XIV) 4b		
c Add lines 4a and 4b.	4c	
5 Total revenue. Add lines 3 and 4c. (This should equal Form 990, Part I, line 12.)	1 · · · · · · · · · · · · · · · · · · ·	, 308, 933.
Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Re	turn	/ 000 / 10001
1 Total expenses and losses per audited financial statements		,584,378.
2 Amounts included on line 1 but not on Form 990, Part IX, line 25:		,
a Donated services and use of facilities		
b Prior year adjustments	-1	
c Losses reported on Form 990, Part IX, line 25	-	
d Other (Describe in Part XIV)	-1	
e Add lines 2a through 2d	-	
3 Subtract line 2e from line 1.	. 2e 3 2	,584,378.
4 Amounts included on Form 990, Part IX, line 25, but not on line 1:	. 3 4.	, 304, 370.
a Investments expenses not included on Form 990, Part VIII, line 7b	-	
b Other (Describe in Part XIV)		
	. <u>4c</u>	504 370
5 Total expenses. Add lines 3 and 4c (This should equal Form 990, Part I, line 18.)	. 5 2,	,584,378.
Complete this part to provide the descriptions required for Part II, tines 3, 5, and 9; Part III, lines 1a and 4; Part IV, line 4; Part X; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b.		; Part V,
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Schedule D (Form 990) 2008 Part XIV Supplemental Information (continued)	Page 5
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, SCHEDULE G		Supple	mental	l Inforn	nation Regardir	าต	OWB No. 1545-0047
(Form 990 or 990-EZ)		Fund	raising	, or Ga	ming Activities	'9	2008
Department of the Treasury Internal Revenue Service	► Mustbec or 19, an	ompleted by or id by organizati	ganization ions that e	ns that ans enter more	wer 'Yes' to Form 990, than \$15,000 on Form	Part IV, lines 17, 18, 990₊EZ, line 6a.	Open to Public Inspection
Name of the organization						Employer identific	
FRIENDS OF THE			45.			94-240021	
Part I Fundraisi							/, line 17.
Mail soficitati		aised influs the	ougo any	or the lotic	wing activities. Check a		
Email solicita					Solicitation of gove		
Phone solicita					Special fundraising	•	
2a Did the organizati employees listed	on have written o In Form 990, Parl	r oral agreeme VII) or entity ir	nt with an n connecti	y individua on with pro	I (including officers, dir ofessional fundraising s	ectors, trustees or key ervices?	Yes X No
b If 'Yes,' list the te compensated at h	n highest paid ind east \$5,000 by th	lividuals or enti e oroanization.	ties (funde Form 990	raisers) pu EZ filers a	rsuant to agreements u re not required to comp	inder which the fundrais itete this table.	er is to be
	· · · · · ·		T			(v) Amount paid to	
(i) Name of in or entity (lund		(ii) Activity	have custor	fundraiser dy or control ibutions?	(iv) Gross receipts from activity	(or retained by) fundraiser listed in col.(i)	(vi) Amount paid to (or retained by) organization
			Yes	No		<u> </u>	
<u> </u>							· · · · · · · · · · · · · · · · · · ·
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·							
Total	· · · · · · · · · · · · · · · · · · ·	<u></u>	<u></u>				
<ol> <li>List all states in w or licensing.</li> </ol>	hich the organiza	tion is registere	d or licen	sed to solic	cit funds or has been no	otified it is exempt from	registration
						•	····
		·			~~~~		
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	·				~		
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1	Fundraising Events. Complete if reported more than \$15,000 on F	orm 990-EZ, line (	5a. List events with	orm 990, Part IV, gross receipts gre	ater than \$5,000
R		(a) Event #1 CALIFORNIA RIV (event type)	(b) Event #2 OTHER FUNDRAIS (event type)	(c) Other Events 1 (total number)	(d) Total Evenis (Add coł. (a) throug col. (c))
R E V E N U E	1 Gross receipts	140,913.	22,307.	13,526.	176,746
E	2 Less: Charilable contributions				
	3 Gross revenue (line 1 minus line 2)	140,913.	22,307.	13,526.	176,746
	4 Cash prizes,		· ··· · · · · · · · · · · · · · · · ·		
	5 Non-cash prizes	, , , , , , , , , , , , , , , , ,			
- 1	6 Rent/facility costs				
	7 Olher direct expenses	· · ·			
	8 Direct expense summary. Add lines 4- th				
art	<ul> <li>9 Net income summary. Combine lines 3 an</li> <li>Gaming. Complete if the organiza \$15,000 on Form 990-EZ, line 6a</li> </ul>	ation answered 'Ye	es' to Form 990, Pa	rt IV, line 19, or re	176,746 ported more tha
		(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	<b>(c)</b> Other gaming	(d) Total gaming (Add col. (a) throug col. (c))
	1 Gross revenue	··· · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·		······
**	2 Cash prizes				
EXPEN	3 Non-cash prizes				
S E S	4 Rent/facility costs				
$\downarrow$	5 Other direct expenses				·····
	6 Volumieer labor	_Yes% No	Yes∜ No	_Yes% No	
	7 Direct expense summary. Add lines 2 thro	uoh 5 in column (d)		*	
		-			~ ~ ~
	9 Not coming income cummon. Combine He	and Tim and the second	۱	50-	
	8 Net gaming income summary. Combine fir			<b>A</b>	YES N
	Enter the state(s) in which the organization ope	rates garning activities:			
a k	Enter the state(s) in which the organization ope s the organization licensed to operate gaming f 'No,' Explain:	rates gaming activities; activities in each of the		· · · · · · · · · · · · · · · · · · ·	9a
a k b    	Enter the state(s) in which the organization ope s the organization licensed to operate gaming f 'No,' Explain: Vere any of the organization's gaming licenses	rates gaming activities: activities in each of the	se states?		9a
a k b li  10a V	Enter the state(s) in which the organization ope s the organization licensed to operate gaming f 'No,' Explain: Vere any of the organization's gaming licenses f 'Yes,' Explain:	rates gaming activities; activities in each of the revoked, suspended of	se states?	ax year?	9a
a k b li 0 a V b li 	Enter the state(s) in which the organization ope s the organization licensed to operate gaming f 'No,' Explain: Vere any of the organization's gaming licenses f 'Yes,' Explain:	rates gaming activities: activities in each of the revoked, suspended of with nonmembers?	se states?	ax year?.	9a

Schedule G (Form 990 or 990-EZ) 2008 FRIENDS OF THE RIVER FOUNDATION	94-24002	2.0	YES	Pag
13 Indicate the percentage of gaming activity operated in:				
a The organization's facility	13a 8			
b An outside facility				
14 Provide the name and address of the person who prepares the organization's gaming/spec				
Name: ▶	~			
Address; >				
15a Does the organization have a contact with a third party from whom the organization receiv.	es gaming (evenue?	15 ε		攊
b If 'Yes,' enter the amount of gaming revenue received by the organization \$				Þ
of gaming revenue retained by the third party $\$$				1
c # 'Yes,' enter name and address:				
			1	ł
Name: *				
				ł
Address; 🛌				Į
				打
16 Garning manager information				Į.
Gaming manager compensation 🕨 \$				
			1	
Description of services provided: 💌				
Director/officer Employee Independent contrac	stor			
19 kinadalaan digistaalaan				
17 Mandatory distributions				
a is the organization required under state law to make charitable distributions from the gamin state gaming license?	ng proceeds to retain the	17a		
b Enter the amount of distributions required under state taw distributed to other exempt orga				
organization's own exempt activities during the tax year: <a>\$</a>				
IAA TEEA3703. 07/18/08	Schedute G (Form 9	90 or 9	90.57	<del>ست</del> ۲۲

SCHEDULE O (Form 990)	Supplemental Information to Form 990	OMB No. 1545-0047
Department of the Treasury Internal Revenue Service	Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.	e Open to Public Inspection
Name of the aganization FRIENDS OF THE	RIVER FOUNDATION	Employer identification number 94-2400210
		194 2400210
FORM_990, PA	RT VI, LINE 10 - FORM 990 REVIEW PROCESS	
THE_FORM_99	D IS REVIEWED AND SIGNED BY THE ORGANIZATION'S FINA	NCE_DIRECTOR
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		•
	- * * * * * * * * * * * *	
BAA For Privacy Act and par	nerwork Reduction Act Notice, see the instructions for Form 998. TEEA4901L 12/19/	03 Schedule O (Form 990) 2008

Form 990				
Form <b>350</b>				-
A 11 1 1 1 1 1	Return of Organi	zation Evenant Essa		OMB No. 1545-0047
	Under section 501/c)	zation Exempt From	n Income Tax	2007
epartment of the Trosework	(except black I	527, or 4947(a)(1) of the Interna Ung benefit trust or private fou	ndation)	
epartment of the Treasury liernal Revenue Sarvice(77)	The organization may have to use	a copy of this return to satisfy	state reporting requiremen	Open to Public Inspection
	ar year, or tax year beginning	, 2007, and		- H
Gheck if applicable:			D Employ	er Idantification Number
Address change.	IRSIASO FRIENDS OF THE RI	VER FOUNDATION		2400210
Name:change Initial:retarri	She SACRAMENTO, CA 95	814	E. Telepho	
Termination	apeonic Institut- lions:			<u>-3155 X214</u>
Amended return	nona,		F Account	e se
Application pending	Section 501(c)(3) organizations an	A 2027/01/11		er (specify) 🔭
	<ul> <li>Saction 501(c)(3) organizations an charitable trusts must attach a cor (Example)</li> </ul>	npleted Schedule A	H and are not applicable to section $H$ (a) is this a group return for a	
Websteite WWW F	(Form 990 or 990-EZ). RIENDSOFTHERIVER.ORG		H (b) If Yes, enter number of all	latos:, 🏊
	ICTURES OF DITENT VENTORIE	·····	H (c) Are all affiliates included?	
Organization type (check only one).	> 🔀 501(c) 3 🛪 (insert	no.) 4947(a)(1) or 527	(If 'No,' altach a list. Sae i	
Check here 🎽 🦷 îf Ib	e organization is not a 509(a)(3) supr	Inting oxabiles to sind the	H (d) is this a separate return fill organization covered by a	
gross receipts are no	rmally not more than \$25,000. A retuine to file a com	In is not required, but if the	Group Exemption Nu	AN AN AN AN AN AN AN AN AN AN AN AN AN
			M Check 🕨 if the ord	anization is not required
Gross receipts: Add i	mes 6b, 8b, 9b, and 10b to line 12 🕨	3, 275, 396.	to attach Schedule B (Forr	1 990 990 F7 or 900 pm
1 Contribution	Expenses, and Changes in N	et Assets or Fund Bala	nces (See the instruc	tions.)
a Contributions g	lifts, grants, and similar amounts reco donot advised funds	Fived:		
b Direct nuble cu	pport (not included on line 1a),	en en el construir e entre el 🕺 🐴		
c Indirect public <	upport (not included on line 1a).	tet enseller were der an die der aus die 11 📕		
I d Government cor	Iributions (grants) (not included on li	eren er en er er er er er er er er er er er er er	<u> </u>	
C Total (add lines la through (d) (cash	8 2, 957, 831 noncash	3 3		e 2,957,831
2 Program service	Tevenue including government fore-	100 <u>11 11 11 11 11 11 11 11 11 11 11 11 11</u>		
	<ul> <li>A second and a fixed to the test (562)</li> </ul>	and contracts (from Part VII, li	no 93)	
J Membership due	s and assessments.	and contracts (from Part VII, Ji	na 93)	
4 Interestion savir	as and assessments.	t. All the head of the complete and end of a second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second s	na 93)	
4 Interest on savir 5 Dividends and ir	es and assessments ogs and temporary cash investments iterest from securities	1983 Andrew B. Mar Barrense, kan menjara menangan seban perang And Andrews Barrense Angele ang kanangan perang perang Andrews Angele Barrense Angele Barrense ang kanangan ang	na 93)	
Membership due     Membership due     Membership due     Membership due     Membership due     Membership due     Membership due     Membership due     Membership due     Membership due     Membership due     Membership due     Membership due     Membership due     Membership due     Membership due     Membership due     Membership due     Membership due     Membership due     Membership due     Membership due     Membership due     Membership due     Membership due     Membership due     Membership due     Membership due     Membership due     Membership due     Membership due     Membership due     Membership due     Membership due     Membership due     Membership due     Membership due     Membership due     Membership due     Membership due     Membership due     Membership due     Membership due     Membership due     Membership due     Membership due     Membership due     Membership due     Membership due     Membership due     Membership due     Membership due     Membership due     Membership due     Membership due     Membership due     Membership due     Membership due     Membership due     Membership due     Membership due     Membership due     Membership due     Membership due     Membership due     Membership due     Membership due     Membership due     Membership due     Membership due     Membership due     Membership due     Membership due     Membership due     Membership due     Membership due     Membership due     Membership due     Membership due     Membership due     Membership due     Membership due     Membership due     Membership due     Membership due     Membership due     Membership due     Membership due     Membership due     Membership due     Membership due     Membership due     Membership due     Membership due     Membership due     Membership due     Membership due     Membership due     Membership due     Membership due     Membership due     Membership due     Membership due     Membership due     Membership due     Membership due     Membership due     Membersh	as and assessments. Igs and temporary cash investments: Iterest from securities.	183 este en en en en en en en en en en en en en	na 93)	
<ul> <li>Membership due</li> <li>Interest on savir</li> <li>Dividends and ir</li> <li>Dividends rents</li> <li>b Less: rental expl</li> </ul>	as and assessments ogs and temporary cash investments iterest from securities enses	189 (1994) - 199 (1994) - 199 (1994) - 199 (1994) - 199 (1994) - 199 (1994) - 199 (1994) - 199 (1994) - 199 (1994) - 199 (1994) - 199 (1994) - 199 (1994) - 199 (1994) - 199 (1994) - 199 (1994) - 199 (1994) - 199 (1994) - 199 (1994) - 199 (1994) - 199 (1994) - 199 (1994) - 199 (1994) - 199 (1994) - 199 (1994) - 199 (1994) - 199 (1994) - 199 (1994) - 199 (1994) - 199 (1994) - 199 (1994) - 199 (1994) - 199 (1994) - 199 (1994) - 199 (1994) - 199 (1994) - 199 (1994) - 199 (1994) - 199 (1994) - 199 (1994) - 199 (1994) - 199 (1994) - 199 (1994) - 199 (1994) - 199 (1994) - 199 (1994) - 199 (1994) - 199 (1994) - 199 (1994) - 199 (1994) - 199 (1994) - 199 (1994) - 199 (1994) - 199 (1994) - 199 (1994) - 199 (1994) - 199 (1994) - 199 (1994) - 199 (1994) - 199 (1994) - 199 (1994) - 199 (1994) - 199 (1994) - 199 (1994) - 199 (1994) - 199 (1994) - 199 (1994) - 199 (1994) - 199 (1994) - 199 (1994) - 199 (1994) - 199 (1994) - 199 (1994) - 199 (1994) - 199 (1994) - 199 (1994) - 199 (1994) - 199 (1994) - 199 (1994) - 199 (1994) - 199 (1994) - 199 (1994) - 199 (1994) - 199 (1994) - 199 (1994) - 199 (1994) - 199 (1994) - 199 (1994) - 199 (1994) - 199 (1994) - 199 (1994) - 199 (1994) - 199 (1994) - 199 (1994) - 199 (1994) - 199 (1994) - 199 (1994) - 199 (1994) - 199 (1994) - 199 (1994) - 199 (1994) - 199 (1994) - 199 (1994) - 199 (1994) - 199 (1994) - 199 (1994) - 199 (1994) - 199 (1994) - 199 (1994) - 199 (1994) - 199 (1994) - 199 (1994) - 199 (1994) - 199 (1994) - 199 (1994) - 199 (1994) - 199 (1994) - 199 (1994) - 199 (1994) - 199 (1994) - 199 (1994) - 199 (1994) - 199 (1994) - 199 (1994) - 199 (1994) - 199 (1994) - 199 (1994) - 199 (1994) - 199 (	na 93)	
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<ul> <li>Membership due</li> <li>Inferestion savir</li> <li>Dividends and ir</li> <li>Dividends and ir</li> <li>Cal Gross rents</li> <li>Di Less: rental exp</li> <li>C Net rental incom</li> <li>Cline: investmen</li> <li>Bal Gross amount fr</li> </ul>	as and assessments. Igs and temporary cash investments: Iterest from securities. enses e or (loss). Subtract line 6b from line t income (describe:	60 (A) Securities	na 93) 2 3 4 4, 957.	<u>46,764.</u> c. <u>4,967.</u>
<ul> <li>Membership due</li> <li>Interest on savir</li> <li>Dividends and ir</li> <li>Ca Gross rents.</li> <li>b Less: rental exp</li> <li>c Net rental incom</li> <li>Qiffer investmen</li> <li>8a Gross amount fruitmen inventory.</li> </ul>	as and assessments as and temporary cash investments terest from securities enses e or (loss). Subtract line 6b from line t income (describe:	(A) Securities 55, 160, 8a	na 93)	<u>46,764.</u> c. <u>4,967.</u>
<ul> <li>Membership due</li> <li>Interest on saving</li> <li>Dividends and in</li> <li>Casse rents</li></ul>	as and assessments ags and temporary cash investments iterest from securities enses e or (loss). Subtract line 6b from line t income (describe. om sales of assets other er basis and sales expenses schedule). STATEMENT 1	(A) Securities 55, 160, 8a 54, 215, 8b	na 93) 2 3 4 4 5 4 957. 6 7 (B) Other	<u>46,764.</u> c. <u>4,967.</u>
<ul> <li>Membership due</li> <li>Interest on savir</li> <li>Dividends and ir</li> <li>Cross rents</li> <li>b Less: rental expl</li> <li>c Net rental incom</li> <li>Cline: investment</li> <li>Gline: investment</li> <li>Ba Gross amount fritten inventory</li> <li>b Less: cost or oth</li> <li>c Gain or (loss) (attack</li> <li>d Net gain or (loss)</li> </ul>	as and assessments ags and temporary cash investments iterest from securities e or (lose). Subtract line 6b from line t income (describe: om sales of assets other er basis and sales expenses schedule)	6a 5b 63 (A) Securities 55, 160, 8a 54, 215, 8h 945, 8c	na 93) 2 3 4 4, 957. 6 	<u>46,764.</u> <u>46,764.</u> <u>4,967.</u>
<ul> <li>Membership due</li> <li>Interest on savir</li> <li>Dividends and ir</li> <li>Cross rents</li> <li>b Less: rental explete</li> <li>c Net rental incom</li> <li>Cliner investment</li> <li>Gliner investment</li> <li>Ba Gross amount frithen inventory</li> <li>b Less: cost or oth</li> <li>c Gain or (loss) (attach</li> <li>d Net gain or (loss)</li> <li>B Special events a</li> </ul>	as and assessments ags and temporary cash investments iterest from securities e of (loss). Subtract line 6b from line t income (describe: om sales of assets other er basis and sales expenses schedule)	(A) Securilies 53 55, 160, 8a 54, 215, 8h 945, 8c (B) amount is from gaming, check	na 93) 2 3 4 4, 957. 6 	<u>46,764.</u> <u>46,764.</u> <u>4,967.</u>
<ul> <li>Membership due</li> <li>Interest on savir</li> <li>Dividends and ir</li> <li>Cross rents</li> <li>b Less: rental expletion</li> <li>Cliher investment</li> <li>Cliher investment</li> <li>Gross amount frithen inventory</li> <li>b Less: cost or othic Gain or (loss) (attached Net gain or (loss)</li> <li>B Special events a a Gross revenue (revenue for the saving for the saving for the saving for the saving for the saving for the saving for the saving for the saving for the saving for the saving for the saving for the saving for the saving for the saving for the saving for the saving for the saving for the saving for the saving for the saving for the saving for the saving for the saving for the saving for the saving for the saving for the saving for the saving for the saving for the saving for the saving for the saving for the saving for the saving for the saving for the saving for the saving for the saving for the saving for the saving for the saving for the saving for the saving for the saving for the saving for the saving for the saving for the saving for the saving for the saving for the saving for the saving for the saving for the saving for the saving for the saving for the saving for the saving for the saving for the saving for the saving for the saving for the saving for the saving for the saving for the saving for the saving for the saving for the saving for the saving for the saving for the saving for the saving for the saving for the saving for the saving for the saving for the saving for the saving for the saving for the saving for the saving for the saving for the saving for the saving for the saving for the saving for the saving for the saving for the saving for the saving for the saving for the saving for the saving for the saving for the saving for the saving for the saving for the saving for the saving for the saving for the saving for the saving for the saving for the saving for the saving for the saving for the saving for the saving for the saving for the saving for the saving for th</li></ul>	as and assessments ags and temporary cash investments interest from securities e of (loss). Subtract line 6b from line t income (describe: om sales of assets other er basis and sales expenses schedule)	6a         5a           5b         5b           6a         5b           55, 160, 8a         54, 215, 8b           945, 8c         945, 8c           (B)         of contributions	na 93)	<u>46,764.</u> <u>46,764.</u> <u>4,967.</u>
<ul> <li>Membership due</li> <li>Interest on savir</li> <li>Dividends and ir</li> <li>Cross rents</li> <li>b Less: rental expire</li> <li>c Nat rental incom</li> <li>Cliher investment</li> <li>Gross amount frithen inventory</li> <li>b Less: cost or oth</li> <li>c Gair or (loss) (attach</li> <li>d Net gain or (loss)</li> <li>B Special events a</li> <li>a Gross revenue (reported on line</li> </ul>	as and assessments. Ings and temporary cash investments interest from securities. e or (lose). Subtract line 6b from line t income (describe: om sales of assets other er basis and sales expenses schedule). STATEMENT, 1. ). Combine line 8c, columns: (A) and ind activities (attach schedule). If any of including \$ (b).	6a           5b           6a           5b           6a           5b           55, 160, 8a           54, 215, 8b           945, 8c           (B)           of contributions	na 93)	<u>46,764.</u> <u>46,764.</u> <u>4,967.</u>
<ul> <li>Membership due</li> <li>Interest on savir</li> <li>Dividends and ir</li> <li>Conservation</li> <li>Co</li></ul>	as and assessments ags and temporary cash investments interest from securities e of (loss). Subfract line 6b from line t income (describe	6a           5b           6a           5b           55, 160           8a           54, 215           945           8b           945           6a           945           6a           945           945           945           945           945           95	na 93)	<u>46,764.</u> <u>4,967.</u> <u>945.</u>
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<ul> <li>Membership due</li> <li>Interest on savir</li> <li>Dividends and in</li> <li>Carces rents</li> <li>b Less: rental expl</li> <li>Net rental incom</li> <li>Other investmen</li> <li>Ba Gross amount fr than inventory</li> <li>b Less: cost or other cain or (loss) (attacher d Net gain or (loss)</li> <li>B Special events a a Gross revenue (r reported on line)</li> <li>b Less: direct expe</li> <li>c Net income or (los</li> </ul>	as and assessments ags and temporary cash investments interest from securities e of (loss). Subtract line 6b from line t income (describe. om sales of assets other er basis and sales expenses schedule)	(A) Securities 55, 160, 8a 55, 160, 8a 54, 215, 8b 945, 8c (B) amount is from gaining, check of contributions 5, 9b from line 9a.	na 93)	<u>46,764.</u> <u>4,967.</u> <u>945.</u>
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<ul> <li>Membership due</li> <li>Interest on savin</li> <li>Dividends and in</li> <li>Caross rents</li> <li>b Less: rental explicit of the same sector of the same sector of the same sector of the same sector of the same sector of the same sector of the same sector of the same sector of the same sector of the same sector of the same sector of the same sector of the same sector of the same sector of the same sector of the same sector of the same sector of the same sector of the same sector of the same sector of the same sector of the same sector of the same sector of the same sector of the same sector of the same sector of the same sector of the same sector of the same sector of the same sector of the same sector of the same sector of the same sector of the same sector of the same sector of the same sector of the same sector of the same sector of the same sector of the same sector of the same sector of the same sector of the same sector of the same sector of the same sector of the same sector of the same sector of the same sector of the same sector of the same sector of the same sector of the same sector of the same sector of the same sector of the same sector of the same sector of the same sector of the same sector of the same sector of the same sector of the same sector of the same sector of the same sector of the same sector of the same sector of the same sector of the same sector of the same sector of the same sector of the same sector of the same sector of the same sector of the same sector of the same sector of the same sector of the same sector of the same sector of the same sector of the same sector of the same sector of the same sector of the same sector of the same sector of the same sector of the same sector of the same sector of the same sector of the same sector of the same sector of the same sector of the same sector of the same sector of the same sector of the same sector of the same sector of the same sector of the same sector of the same sector of the same sector of the same sector of the same</li></ul>	as and assessments ags and temporary cash investments interest from securities. e or (lose). Subtract line 6b from line t income (describe. om sales of assets other. er basis and sales expenses schedule)	6a         6a         6a         6b         6a         6b         6a         6b         6a         6b         6c         55, 160, 8a         945, 8c         945, 8c         (B)         annount is from gaining, check         of contributions         9a         9b         9b         10a         10a         10b         10b	na 93)	46,764. c 4,967. g45. 147,614.
<ul> <li>Membership due</li> <li>Interest on savir</li> <li>Dividends and ir</li> <li>Coss rents</li> <li>b Less: rental expire</li> <li>Net rental incom</li> <li>Other investment</li> <li>Collection</li> <li>Collection</li> <li>Collection</li> <li>Coss amount frithen inventory</li> <li>b Less: cost or other internations (loss) (attached Net gain or (loss)</li> <li>Coss revenue (reported on line)</li> <li>b Less: cost of goo or Gross sales of in b Less: cost of goo or Gross profit or (loss)</li> <li>Cober revenue (frither revenue (frither revenue (frither revenue)</li> </ul>	as and assessments ags and temporary cash investments interest from securities. e or (lose). Subtract line 6b from line t income (describe. orn sales of assets other er basis and sales expenses schedule)	6a         5a         5b         55, 160, 8a         55, 160, 8a         54, 215, 8b         945, 8c         (B)         antount is from gaming, check         of contributions         9a         9b         9b         10a         10a         10b         10b         10c         10c <td>na 93)</td> <td><u>46,764.</u> <u>4,967.</u> <u>945.</u> <u>147,614.</u></td>	na 93)	<u>46,764.</u> <u>4,967.</u> <u>945.</u> <u>147,614.</u>
<ul> <li>Membership due</li> <li>Interest on savir</li> <li>Dividends and ir</li> <li>Coss rents</li> <li>b Less: rental expire</li> <li>Net rental incom</li> <li>Other investment</li> <li>Gross amount frithen inventory</li> <li>b Less: cost or other diamonder of the gain or (loss) (attached Net gain or (loss)</li> <li>B Special events a a Gross revenue (reported on line)</li> <li>b Less: clinic experies of the cost of goo cost sales of in</li> <li>b Less: cost of goo cost of goo cost sales of in</li> <li>b Less: cost of goo cost of goo cost sales of in</li> <li>c Gross profit or (loss)</li> <li>Other revenue (frint in the revenue (frint in the revenue (frint in the revenue (frint in the revenue (frint in the revenue (frint in the revenue (frint in the revenue (frint in the revenue (frint in the revenue (frint in the revenue (frint in the revenue (frint in the revenue (frint in the revenue (frint in the revenue (frint in the revenue (frint in the revenue (frint in the revenue (frint in the revenue (frint in the revenue (frint in the revenue (frint in the revenue (frint in the revenue (frint in the revenue (frint in the revenue (frint in the revenue (frint in the revenue (frint in the revenue (frint in the revenue (frint in the revenue (frint in the revenue (frint in the revenue (frint in the revenue (frint in the revenue (frint in the revenue (frint in the revenue (frint in the revenue (frint in the revenue (frint in the revenue (frint in the revenue (frint in the revenue (frint in the revenue (frint in the revenue (frint in the revenue (frint in the revenue (frint in the revenue (frint in the revenue (frint in the revenue (frint in the revenue (frint in the revenue (frint in the revenue (frint in the revenue (frint in the revenue (frint in the revenue (frint in the revenue (frint in the revenue (frint in the revenue (frint in the revenue (frint in the revenue (frint in the revenue (frint in the revenue (frint in the revenue (frint in the revenue (frint in the revenue (frint in the revenue (frint in the r</li></ul>	as and assessments ags and temporary cash investments interest from securities. e or (lose). Subtract line 6b from line t income (describe: om sales of assets other er basis and sales expenses schedule)	6a           5b           6a           5b           55, 1.60, 8a           54, 215, 8b           945, 8c           945, 8c           99           amount is from gaming, check of contributions           9a           9b           9b           9b           10a           10b           10b           10b           10b           10b           10c           10b	na 93)	<u>46,764.</u> <u>4,967.</u> <u>945.</u> <u>147,614.</u> <u>3,158,121.</u>
<ul> <li>Membership due</li> <li>Interest on savir</li> <li>Dividends and ir</li> <li>Caross rents</li> <li>b Less: rental expletion</li> <li>Other investment</li> <li>Other investment</li> <li>Gain or (loss) (attached on line)</li> <li>b Less: cost or other exported on line)</li> <li>b Less: direct expective or (loss)</li> <li>Caross sales of in b Less: cost of goo or Gross profit or (loss)</li> <li>Caross profit or (loss)</li> <li>Other revenue (from b Less: cost of goo or Gross profit or (loss)</li> <li>Caross profit or (loss)</li> <li>Cotal revenue, Action of the same services</li> <li>Management and</li> </ul>	as and assessments ags and temporary cash investments interest from securities e of (loss). Subfract line 6b from line t income (describe	6a         5b           50         55           55         160         8a           54,215         8b           945         8c           945         8c           945         8c           945         8c           945         8c           9b         9b           amount is from gaming, check         9a           9b         9b           10a         10a           10b         10b           10b         10a           10b         10a	na 93)	46,764. 46,764. 4,967. 945. 147,614. 3,158,121. 2,591,069.
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<ul> <li>Membership due</li> <li>Interest on savir</li> <li>Dividends and ir</li> <li>Caross rents</li> <li>b Less: rental explete</li> <li>Net rental incom</li> <li>Gliber investment</li> <li>Gliber revenue (fr</li> <li>12 Total revenue, Act</li> <li>Total revenues, Act</li> <li>Fundraising (from</li> <li>Favorents to alfili</li> <li>Total expenses, A</li> <li>Excess or (deficit)</li> <li>Net assels or fund</li> </ul>	as and assessments ings and temporary cash investments interest from securities e of (loss). Subtract line 6b from line t income (describe: om sales of assets other er basis and sales expenses schedule)	6a         5a         5b         55, 160, 8a         54, 215, 8b         945, 8c         (B)         amount is from gaming, check         of contributions         9a         9b         9b         10a         10b         10a         10b         10c         10b         10c         10c         10b         10c         10c <t< td=""><td>na 93)</td><td>46,764. 46,764. 4,967. 4,967. 945. 147,614. 3,158,121. 2,591,069. 117,697. 69,116. 2,777,882. 380,239.</td></t<>	na 93)	46,764. 46,764. 4,967. 4,967. 945. 147,614. 3,158,121. 2,591,069. 117,697. 69,116. 2,777,882. 380,239.
<ul> <li>Membership due</li> <li>Interest on savir</li> <li>Dividends and ir</li> <li>Caross rents</li> <li>b Less: rental explete</li> <li>Net rental incom</li> <li>Gliber investmen</li> <li>Ba Gross amount frithen inventory</li> <li>b Less: cost or othine Gain or (loss) (attached Net gain pri (loss)</li> <li>B Special events ai a Gross revenue (frither teported on line)</li> <li>b Less: cost of goo coross profit or (loss)</li> <li>Cher revenue (frither revenue)</li> <li>Cher revenue (frither revenue)</li> <li>Fundraising (from 15 Fundraising (from 16 Payments to affili</li> <li>Total expenses. Ai Excess or (deficit)</li> <li>Net assels or fund</li> <li>Net assels or fund</li> <li>Other changes in</li> </ul>	as and assessments ags and temporary cash investments interest from securities e of (loss). Subtract line 6b from line t income (describe. orn sales of assets other er basis and sales expenses schedule)	6a           5b           6a           5b           6a           5b           6a           5b           55, 160, 8a           54, 215, 8b           945, 8c           945, 8c           9a           9b           9c           9b           9c           9b           9c           9b           9c           9c <td>na 93)</td> <td>46,764. 4,967. 4,967. 4,967. 945. 147,614. 3,158,121. 2,591,069. 117,697. 69,116. 2,777,882. 380,239. 1,245,165.</td>	na 93)	46,764. 4,967. 4,967. 4,967. 945. 147,614. 3,158,121. 2,591,069. 117,697. 69,116. 2,777,882. 380,239. 1,245,165.
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	6b, 8b, 9b, 10b, or 16 of Part I.		(A) Total	(B) Program services	(C) Management and general	(D) Fundraisin
Za (	Granls paid from donor advised lunds (atlach sch)					
	(cash \$					
	non-cash \$		· ·			
	If this amount includes					
1	foreign grants, check here 🚬 🏲 🛛	22a	·			
	Other grants and allocations (att sch)					
	(cash P)					49. L.
	if this emount includes					
	oreign grants, check here 🟲 🔲	226			99 (S. 1997)	
ંદ	Specific assistance to Individuals	E L				
-3	(attach schedule).	23			4 4 C	
Ē	Benefils paid to or for members attach schedule)	24				9 N N
ä C	Compensation of currant officers.		· · · · · · · · · · · · · · · · · · ·			
- 8	lirectors, key amployees, etc. listed n Part V A	25a	496,544.	496, 544.		
6 C	Ompensation of former officers			4,20, 344,	0.	
−d	lifectors, key employees, etc. listed	<u></u>				
5 C	n Part V-B	25b	0.	0	<u> </u>	
İ	icluded above, to disqualified persons (as efined under section 1958(()(1)) and persons					
- 11	escribed in section.					
	958(c)(3)(B),	25c	0.	0*	<u> </u>	
- S Ir	alaries and wages of employees not icluded on lines 25a, b, and c	26	544,852.	421,915.	10 E (EQ 2	in ma
		_ <u>4</u> 0	J44,0JZ.	421,910.	65,533.	57,40
г ÌŢ	ension plan contributions not reluded on lines 25a, b, and c	27	12,348.	12,348.		
E	mployee benefils not included on					
- III P	nes 25a - 27	28	120,975.	107,606.	7,923.	5,4/
P	ayroll laxes	29 30	· · · · · · · · · · · · · · · · · · ·		<b></b>	·
A	ccounting fees	31	·····	·····		· · · ·
Ŀ	epai tees	82	····	······································		
	üpplies .	33		<u> </u>	initiani <u></u>	
Ţ	elephone.	34	32,179	25,448,	4,569.	2,10
P	öslaga and shipping.	35	44,216.	43,895.	-386.	7(
	cupancy	36	63,369.	36,261.	18,679.	8,42
	GUPMEnt rental and maintenance	37	<u> </u>	4,085.	5,481.	1,82
	Initing and publications	38	79,759.	79,013.	229.	51
11 76	avél.,	39	67,691.	62,491.	460.	4,74
	inferences, conventions, and meetings	40	2,392.	2,206.	186.	······································
nu. De	preclation, depletion, etc (attach schedule)	41 42	<u> </u>	<u> </u>	532.	
0Ű	her expenses not covered above (itemize)	-196	17402.	Z,193	3,080,	2,20
SI	EE STATEMENT 4	43 a	1,293,677.	1,296,591.	11,411	-14,32
		43 Б				
÷,	البير ابن أن المراجع عن معرفة فترجمنا العربي والعربي والمراجع	43 c	<u> </u>			
	الم المالي الم المالية المالية المالية المراجع المراجع المراجع المراجع المراجع المراجع المراجع المراجع	43 d				
د بناً	ار این پیریز بیریز <u>بن مربع مرب کرمنا معامی محمد معا</u> مد	43 e	·····			
	المحمد المربعة بمدرجة ويوردهم ومراجع محتر متراجع المر	43 f				
in f		49 g				
Tol thr	tal functional expanses. Add lines 22a ough 43g. (Organizations completing columns - (D), carry these totals to lines 13 - 15).					
<u>(B)</u>	((0), carry these totals to thes 13 - 15)	44	2,777,882.	2,591,069.	117,697.	69,11

「日本」を見る「「「「」」を見ていた。

Form 990 (2007) FRIENDS OF THE RIVER FOUNDATION Part III Statement of Program Service Accomplishments (See the instructions.)	94-24	00210	Page 3
Form 990 is available for public inspection and, for some people, serves as the primary or sole source of info organization. How the public perceives an organization in such cases may be determined by the information p please make sure the return is complete and accurate and fully describes, in Part III, the organization's progr	rmation abou presented on ams and acc	t a parlicular its return. The omplishments.	refore,
what is the organization's primary exempt purpose? PREMOTE PRESERVATION OF RIVERS. All organizations must describe their exempt purpose achievements in a clear and concise manner. State the clients served, publications issued, etc. Discuss achievements that are not measurable. (Section 501(C)(3) and izations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of prants and allocations to a	number of d (4) organ-	Program Service (Required for 501 (4) organizatio 4947(a)(1) min optional for o	Ernensee
a CONSERVATION PROGRAMS: ADVOCATE FOR PRESERVATION AND PROTECTION RIVER AND WATER RESOURCES: ALSO ADVOCATE FOR HYDROPOWER REFORM.	OF	<u></u>	<u></u>
(Grants and allocations \$ ) If this amount includes foreign grants, check it		400	- 544
<ul> <li>PUBLIC EDUCATION PROGRAMS: EDUCATE AND GRASSROOTS ORGANIZING OF GENERAL PUBLIC FOR THE PRESERVATION AND PROTECTION OF RIVERS.</li> </ul>	THE	498	,734.
(Grants and allocations \$ )) If this amount includes foreign grants, check h C FISCAL SPONSORED PROGRAM EXPENDITURES: ORGANIZATIONS RELATED TO FRIENDS OF THE RIVER FOR WHOM FRIENDS OF THE RIVER ACTS AS FISCA SPONSOR.		131	,360.
(Grants and allocations \$ ) If this amount includes foreign grants, check h	ere 💌	1,960	<u>, 975.</u>
····································	······································		
(Grants and allocations \$ ) If this amount includes foreign grants, check he e Other program services			
(Grants and allocations \$	are 🏲 🗌 📗		
1 Total of Program Service Expenses (should equal line 44, column (B); Program services).	64.64 ( 164 a 🏲	2, 591,	069.

Form 990 (2007)

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# Form 990 (2007) ERIENDS OF THE RIVER FOUNDATION

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94-2400210	

Page 4

Note:	Where required, atlached schedules and amounts within the description column should be for end of year amounts only.	(A) Beginning of year		(B) End of year
4	5 Cash - non-interest Bearing second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second	130,231.	45	3,021
- [ 4	6 Savings and temporary cash investments.	571,047.	46	990,752
	The Andreas and Andreas and Andreas and Andreas and Andreas and Andreas and Andreas and Andreas and Andreas and Andreas and Andreas and Andreas and Andreas and Andreas and Andreas and Andreas and Andreas and Andreas and Andreas and Andreas and Andreas and Andreas and Andreas and Andreas and Andreas and Andreas and Andreas and Andreas and Andreas and Andreas and Andreas and Andreas and Andreas and Andreas and Andreas and Andreas and Andreas and Andreas and Andreas and Andreas and Andreas and Andreas and Andreas and Andreas and Andreas and Andreas and Andreas and Andreas and Andreas and Andreas and Andreas and Andreas and Andreas and Andreas and Andreas and Andreas and Andreas and Andreas and Andreas and A			
<b> </b> "	7a Accounts receivable     47a     105, 421 r       b Less: allowance for doubtful accounts     47b	<b>79</b> 202		فتطرف المحاطر م
		73,636.	47 c	105,421
4	Ba Pledges receivable			
	b Less; allowance for doubtful accounts		48c	
4		- <u>-</u>	40C	
5	a Receivables from correct and former officers, directors, trustees, and key employees (attach schedule)		50a	<del></del>
	<ul> <li>b Receivables from other disgualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) (attach schedule).</li> </ul>			
5	and persons described in section 4958(o)(3)(B) (attach schedule)		50b	<u></u>
13	(allach schedule).			
:	b Less: allowance for doubt(u) accounts		51 c	
5	Inventories for sale or use and an and a construction of the second states of the second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second s	····	52	
53	F Prepaid expenses and deferred charges and reaction of the second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second s	14,897.	53	20,568
54	la investments publicly-traded securities		54a	
	b Investments - other securities (attach sch) 🐑 🗌 Cost 🔲 FMV [		54b	
55	a investments - land, buildings, & equipment: basis 59a 56, 648 .			<u></u>
	b Less: accumulated depreciation (attach schedule) 38,065.	31,758.	55 c	18,583
56	Investments - other (attach schedule)	547,941.	56	581,483
57	a Land, buildings, and equipment: basis,	(1,1,1,1) (1,1,1)		301,403
	b Less: accumulated degraciation			
	(allach schedule)		57 c	· · · ·
58	Other assets, including program-related investments			
 	(describa ► SEE STATEMENT 7),		58	29,112
59			59	1,748,940
60	and the second second second second second second second second second second second second second second second	84,223.	60	52,485
<b>B1</b>	31 mm in the first of the first and the information of the provide statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the stat		61	
62			62	
63	Loans from officers, directors, trustees, and key employees (altach schedule)			
61	employees (allach schedule)	and the second second second second second second second second second second second second second second second	63	
0%	a Tax-exempt bond llabilities (attach schedule),		64a	
65	b Morloages and other notes payable (attach schedule). Other flabilities (describe <b>* <u>SEE STATEMENT</u> 8</b> ).		64b	
66			65	72,628
<u> </u>	anizations that follow SFAS 117, check here * X and complete lines 67	155,406.	66	125,113
0.5	anizations that follow SFAS 117, check here 🗶 and complete lines 67 Ihrough 69 and lines 73 and 74.			
67		201 205		
68	Unrestricted		67	125,335
69	Permanantiki razivated		68	1,498,492
	Permanently restricted		69	
1.015	70 through 74.			
70	Gapitel stock, trust principal, or current funds		sto.	
71	Belden or daptal surplus or fand, building, and equipment fund		70	
72	Retained earnings, endowment, accumulated income, or other tund		71	<del>.</del>
			72	teriti ta inc
73	Total net assets or fund balances. Add lines 67 through 69 or lines 70 through 72. (Column (A) must equal line 19 and column (B) must equal line 21)	1,245,165.	73	1,629,827.
74	Total Nabilities and net assets/fund balances. Add lines 66 and 73	distant of the second second second second second second second second second second second second second second	74	1,748,940.
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Form 990 (2007)

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Form 950 (2007) FRIENDS OF TR Part W-A Reconciliation of Re instructions,)	venue per Audited Finan	icial Statements wi	th Revenue per Re	<u>400210 Fa</u> turn <i>(See th</i> e
	······································	ui <u></u> u	······································	
<ul> <li>Total revenue, gains, and other sup</li> <li>Amounts included on line a but not</li> </ul>	on Part I, ine 12;			a 3,158,12
1Net unrealized gains on investment	ls,	· · · · · · · · · · · · · · · · · · ·		
ZDonated services and use of facil()	85	62	······	
anecoveries of prior year grants.		1.6		
40mer (specify);				
Add lines 61 through 64	an an an an an an an an an an an an an a	<u>b4</u>		Ь
<ul> <li>Addition to the first of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the st</li></ul>	Press and the second strain and a second strain and the		······································	
d Amounts included on Part I, line 12	, but not on line a:		1 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	c 3,158,12
Investment expenses not included o	n Part 1. line 6b	Í an l		
2Olher (specify):	und 1975 in the second state of the second	······		
		الشرب ا		
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Add lines d1 and d2,	na na haran na haran na haran na haran na haran. Berker karana da	на на конструктира и разладита до с	and the special states of the special special states of the special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special special sp	<u></u>
art N-B Reconciliation of Eve		<u>ia na na mangana ang s</u> alang s	<u> 2683 he sa consecuto de 📕 (</u>	3,158,12
Total revenue (Part I, line 12). Add Part IV-B Reconciliation of Exp	ienses per Audred Finan	icial Statements wi	th Expenses per R	eturn
Total expenses and losses per audit				
Amounts included on line a but not o	20 Part I. Ilrie 17:	化氯丁基 机结合 化化合合 化化合合合 化分子	3.0 • • • • • • • • • • • • • • • • • • •	2,777,88
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2Prior year adjustments reported on r	Pari I line 20 - a	- Contraction and the part of the second second second second second second second second second second second s		
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Add lines bi through b4	CONTRACTOR AND A CONTRACT AND A CONTRACT OF A CONTRACT OF A CONTRACT OF A CONTRACT OF A CONTRACT OF A CONTRACT OF A CONTRACT OF A CONTRACT OF A CONTRACT OF A CONTRACT OF A CONTRACT OF A CONTRACT OF A CONTRACT OF A CONTRACT OF A CONTRACT OF A CONTRACT OF A CONTRACT OF A CONTRACT OF A CONTRACT OF A CONTRACT OF A CONTRACT OF A CONTRACT OF A CONTRACT OF A CONTRACT OF A CONTRACT OF A CONTRACT OF A CONTRACT OF A CONTRACT OF A CONTRACT OF A CONTRACT OF A CONTRACT OF A CONTRACT OF A CONTRACT OF A CONTRACT OF A CONTRACT OF A CONTRACT OF A CONTRACT OF A CONTRACT OF A CONTRACT OF A CONTRACT OF A CONTRACT OF A CONTRACT OF A CONTRACT OF A CONTRACT OF A CONTRACT OF A CONTRACT OF A CONTRACT OF A CONTRACT OF A CONTRACT OF A CONTRACT OF A CONTRACT OF A CONTRACT OF A CONTRACT OF A CONTRACT OF A CONTRACT OF A CONTRACT OF A CONTRACT OF A CONTRACT OF A CONTRACT OF A CONTRACT OF A CONTRACT OF A CONTRACT OF A CONTRACT OF A CONTRACT OF A CONTRACT OF A CONTRACT OF A CONTRACT OF A CONTRACT OF A CONTRACT OF A CONTRACT OF A CONTRACT OF A CONTRACT OF A CONTRACT OF A CONTRACT OF A CONTRACT OF A CONTRACT OF A CONTRACT OF A CONTRACT OF A CONTRACT OF A CONTRACT OF A CONTRACT OF A CONTRACT OF A CONTRACT OF A CONTRACT OF A CONTRACT OF A CONTRACT OF A CONTRACT OF A CONTRACT OF A CONTRACT OF A CONTRACT OF A CONTRACT OF A CONTRACT OF A CONTRACT OF A CONTRACT OF A CONTRACT OF A CONTRACT OF A CONTRACT OF A CONTRACT OF A CONTRACT OF A CONTRACT OF A CONTRACT OF A CONTRACT OF A CONTRACT OF A CONTRACT OF A CONTRACT OF A CONTRACT OF A CONTRACT OF A CONTRACT OF A CONTRACT OF A CONTRACT OF A CONTRACT OF A CONTRACT OF A CONTRACT OF A CONTRACT OF A CONTRACT OF A CONTRACT OF A CONTRACT OF A CONTRACT OF A CONTRACT OF A CONTRACT OF A CONTRACT OF A CONTRACT OF A CONTRACT OF A CONTRACT OF A CONTRACT OF A CONTRACT OF A CONTRACT OF A CONTRACT OF A CONTRACT OF A CONTRACT OF A CONTRACT OF A CONTRACT OF A CONTRACT OF A CONTRACT. CONTRACT OF A CONTRACT OF A CONTRACT OF A CONTRACT OF A CONTRACT OF A CONTRACT OF A CONTRACT OF A CONTRACT OF A CONTRACT OF A CONTRACT OF A CO			
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Forot 990 (2007)

Form 990 (2007) FRIENDS OF THE RIVER	FOUNDATION		94-240	ກອາສ 📖 🐭
Part V.A. Current Officers, Directors, Tr	ustees, and Key F	mplovees (continu	ad)	VZIU Page 6 Yes No
<b>XON CHUEF THE TOTAL NUMBER OF OFFICERS, directors, and trustens r</b>	permitted to valation provided	from Briefsmann of Landat and Date	N 10	CONTRACT CONTRACTOR
A rearry oncers, directors, trustees, or key en listed in Schedule A, Part I, or highest compe A, Part II-A or II-B, related to each other throu identifies the individuals and explains the relation	nployees listed in Form nsated professional an ugh family or business	l 990, Part V-A, or highe d other independent con relationships? If 'Yes,' a	st compensated employ tractors listed in Schedu liach a statement that	ees ule
A, Part II-A or II-B, teceive compension from to the organization? See the instructions for the frequency of the statement that includes the in-	ployees listed in form ! Insaled professional and It any other broanizatio Ite definition of 'rélated formation described in	990, Part V-A, or highest d other independent con ns, whether tax exempt organization the instructions	l compensated employe tractors listed in Schedu or taxable, that are rela	CARDAGES PROSESSO PARAMANA
d Does the organization have a written conflict o	fipterest policy2	·		
Part V:B Former Officers, Directors, Tru Benefits (if any former officer, direct during the year, list that person below a the instructions.)	19166C 3NA KAV CI	Malena Article Doub	92. Bard of E. 2000 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	S2119
(A) Name and address	(B) Loans and Advances	(C) Compensation (if not paid, enter -0-)	(D) Contributions to employee benefit plans and deferred compensation plans	(E) Expense account and other allowances
NONE		· · · · · · · · · · · · · · · · · · ·	eenibensonnn bigus	
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Part VII Other Information (See the instr	State Part of the			
		• ··· ··· ··· ··· ··· ··· ··· ··· ··· ·		Yes No
78 Did the organization make a change in its activit It 'Yes,' allech a detailed statement of each char	ies or methods of conc	ucting activities?		
and there are unerges made in the organizing or go	vemine documents hui	not reported to the IRS	**************************************	
If 'Yes,' attach a conformed copy of the changes 78a Did the organization have unrelated business gro b if 'Yes,' has it filed a tax return on Form 990-T to	i. Seé liteama af 61 000 -	a na ann a Martin a Martin Anna a' Saidh	and the second second second	
79 Was there a liquidation, dissolution, termination, year? If Yes, attach a statement.	<ul> <li>Construction Systems of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the const</li></ul>	e 21 % %		
membarship, governing bodies, trustees, officers	lion with a statewide o	r nationwide organizatio	n a la carta a cara a cara a 1) Ibrough common: 12allon?	80a X
	<u>ertends de the</u>	RIVER ACTION		
81a Enter direct and indirect political expenditures. (S	ee line 91 the water-	The whether it is $[X]$ examples $X$	mplornonexemp	
b Did the organization file Form 1120-POL for this y BAA	···· worst µ⊚#µbuon5 /ear?	Names de la company angle 🗋	11a 8,86	9.
ВАА	<u> </u>	an mananan kanan kanan kanan kata kanan kanan kanan	<u>- 1999 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 199</u>	. 816 X Form 990 (2007)

Form 990 (2007) FRIENDS OF THE RIVER FOUNDATION	94-2400210	Page 7
Part VI Other Information (continued)		Yes No
82 a Did the organization receive donated services or the use of materials, equipment, or facilities at substantially less than fair rental value?	no charge or at 82a	x
b If 'Yes,' you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an expense in Part II. (See instructions in Part II.)	25 N/A	
osa bid the organization comply with the public inspection requirements for returns, and evenation as	collections?	X
D U/U the organization comply with the disclosure requirements relating to address and post-tents.		
of a bid the organization solidit any contributions or gifts that were not tax deduction?		
b If Yes," did the organization include with every solicitation an express statement that such contri- not tax deductible?	butions or gifts were	N/A
we ov ((v)(v), v), (v), v) (v), viere substantially all dues nondeductible hy members?	D.C.	N/A
o bid ute organization make only in-house lobbying expenditures of \$2,000 or less?	856	
in res, was answered to either an a cost of the prior year.	ganization received a	
c Dues, assessments, and similar amounts from members	ic N/A	
d Section 162(e) lobbying and political expenditures	M NI/A	
e Aggregate nondeductible amount of section 6033(e) (1)(A) dues notices.	M / 7	
f Taxable amount of idobying and political expenditures (line 85d less 85e).	N/A	
g Does the organization elect to pay the section 6033(e) tax on the amount on line 85t?		N/A
b if section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable dues allocable to nondeductible lobbying and political expenditures for the following lax year?		
ou solid (contributions, Enter; a initiation rees and capital contributions included on	3888 BA	<u>_N/A</u>
line 12.	a N/A	
D Gross receipts, included on line 12, for public use of club fecilities	b N/A	
87 501 (c) (12) organizations. Enler: a Gross income from members or shareholders	a N/A	
b Gross income from other spurces. (Do not net amounts due or paid to other sources against amounts due or received from them).	b N/A	
.88 a At any time during the year, did the organization own a 50% or greater interest in a taxable corport or an entity disregarded as separate from the organization under Regulations sections 301.7701.2 If 'Yes,' complete Part IX.	ration or partnership,	
b At any time during the year, did the organization, directly of indirectly, own a controlled entity with section 512(b)(13)? If Yes, complete Part XI. 898 501/01/31 organization, Epilor, Amount of the tensor of the tensor of the tensor.	In the meaning of	
were on the organization during the vear under	2000	<u>X</u>
	• <u>0</u> ,	
b 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 495B excess ben during the year or did it become aware of an excess benefit transaction from a prior year? If 'Yes, explaining each transaction.	nefit transaction 'attach a statement 89b	X
c Enler: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958.		
e Envent Chiloghin on Iga Unitile Back augusta Maintibul Seg by the occanization	• (A) ESSERCE	
9 All alganizations. At any lime during the tax year, was the ornalization a party to a prohibited law.	obelles terres attained	
I All organizations. Did the organization acquire a direct or indirect interest in any applicable losuran	ice contract?	
	Survey Control and Control and Control and Control and Control and Control and Control and Control and Control and Control and Control and Control and Control and Control and Control and Control and Control and Control and Control and Control and Control and Control and Control and Control and Control and Control and Control and Control and Control and Control and Control and Control and Control and Control and Control and Control and Control and Control and Control and Control and Control and Control and Control and Control and Control and Control and Control and Control and Control and Control and Control and Control and Control and Control and Control and Control and Control and Control and Control and Control and Control and Control and Control and Control and Control and Control and Control and Control and Control and Control and Control and Control and Control and Control and Control and Control and Control and Control and Control and Control and Control and Control and Control and Control and Control and Control and Control and Control and Control and Control and Control and Control and Control and Control and Control and Control and Control and Control and Control and Control and Control and Control and Control and Control and Control and Control and Control and Control and Control and Control and Control and Control and Control and Control and Control and Control and Control and Control and Control and Control and Control and Control and Control and Control and Control and Control and Control and Control and Control and Control and Control and Control and Control and Control and Control and Control and Control and Control and Control and Control and Control and Control and Control and Control and Control and Control and Control and Control and Control and Control and Cont	
9 For supporting organizations and sponsoring organizations maintaining donor advised funds. Did the organization, or a fund maintained by a sponsoring organization, have excess business holdings at the year?		
90 a List the states with which a copy of this return is filed *A	••••••••••••••••••••••••••••••••••••••	<u> </u>
b.Number of employees employed in the pay period that includes March 12, 2007 (See instructions.)		23
Localed at = 915 20TH STREET SACRAMENTO CA	<ul> <li>(916) 442-3155</li> <li>ZIP + 4 &gt; 95814</li> </ul>	<u> </u>
financial account in a foreign country (such as a bank account, securities account, or other financial	r authority over a Y	es No X
If Yes, I enter the name of the foreign country		
See the instructions for exceptions and illing requirements for E The net of a local sector of the	Bank and	
Financial Accounts.		
milder	Form 9	90 (2007)

No. 1. 1. AND ALLON'S

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c Alliany time during the calendar year, d	nued)	DATION	·····	94-240	N
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If Yes, ' onler the name of the foreign :	sountry 🟲		بور بید است <u>می شدن می مدر می است و</u>		· · · · · · · · · · · · · · · · · · ·
<ul> <li>92 Section 4947(a)(1) nonexempt charitab</li> <li>94 and other the amount of the foreign t</li> </ul>	le trusts filing (	Form 990 in lieu o	Form 1041 - Check	here.	N/A ►
and enter the amount of tax-exempt int Part VII Analysis of Income Product	erest received	or accrued during	the tax year	<u></u>	<u> </u>
and the second states and second s		d business incom			······································
Note: Enter gross amounts unless otherwise indicated		1		ection 512, 513, or 514	 (E)
otherwise indicated,	(A) Business code	(B) Amount	(C) Exclusion code	(D) Amount	(E) Related or exempt function income
93 Program service revenue:				a d'unégat	
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с	· · · · · ·	·	······································	· · · · ·	
e'		] 			
Medicare/Medicaid payments.		·····	<u> </u>		
g Fees & contracts from government agencies	·	·····	·····		· · · · · · · · · · · · · · · · · · ·
94 Membership dues and assessments.	·			· · · · · · · · · · · · · · · · · · ·	
95 Interest on savings & temporary cosh invents		<u> </u>			· · · · · · · · · · · · · · · · · · ·
96 Dividends & interest from securities			14	46,764.	<u></u>
97 Net rental income or (loss) from real estate:					
a debt-financed property.	·		<u> </u>		4,957
b not debt-financed property. 98 Net rental income or (loss) from pers prop	·	· · · · · · · · · · · · · · · · · · ·		·····	······
99 Other investment income		<u>.                                    </u>			
100 Gain of floss) from sales of accele			i.	<u></u>	·····
other than inventory		·		·	945
101         Net income or (loss) from special events           102         Gross profit or (loss) from seles of inventory.	·	·····	3	147,614.	
103 Ollier revenue: a					a la companya and a companya and a companya and a companya and a companya and a companya and a companya and a c
ана а технология. Т <u>а технология</u> на а <b>р</b>					<u> </u>
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104 Sublatal faed columns (R), (D), and (C)	Sec. 32	i		194,378.	5,912.
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105 Total (add line 104, columns (B), (D), a	апd (E))	en normal de la parte des	FFF harden and the second second	nonde el proposition en la companya de la companya de la companya de la companya de la companya de la companya	
105   Total (add line 104, columns (B), (D), a otel Line 105 plus line 1e. Part I, should enue	and (E))	nning 19 Clark (		Y + 1 -	200,290.
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105 Total (add line 104, columns (B), (D), a ote: Line 105 plus line 1e, Part I, should equa art VIII Relationship of Activities t	and (E)) al the amount t o <b>the Acco</b> i	<u>on line 12, Part I.</u> mplishment of	Exempt Purpos	es (See the Instruc	200,290
105 Total (add line 104, columns (B), (D), a oter Line 105 plus line 1e, Part I, should equa art VIII Relationship of Activities t Jne No. Explain how each activity for which of the organization's exempt purpo	and (E)) al the amount t o <b>the Acco</b> i	<u>on line 12, Part I.</u> mplishment of	Exempt Purpos	es (See the Instruc	200,290.
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105 Total (add line 104, columns (B), (D), a ote: <i>Line 105 plus line 1e, Parl I, should equa</i> art VIII Relationship of Activities t ine No. Explain how each activity for which * of the organization's exempt purpo /A	and (E)) al the amount o the Acco the Acco	on line 12, Part I. mplishment of forted in column (E n by providing fund	Exempt Purpos ) of Part VII contribu is for such purposes)	es <i>(See the Instruc</i> ted importantly to the a	200,290. Stions.) ccomplishment
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105	Diganization is a controlling organiz Did the reporting organization make any transfers	in nandralladi sili su kata s		ode? If
	Yes, complete the schedule below for each control (A) Name, address, of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	(D) Amount of transi
B.				
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	Totals			
)7 	Did the reporting organization receive any transfers "Yes," complete the schedule below for each control	from a controlled enlity as define led enlity	d in section 512(b)(13) of th	Yes M Re Code? If
	(A) Name, address, of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	(D) Amount of transfe
L:	میں جن ہے۔ میں جہ سی سرحی ہیں جے ہیں کے حریقی ہیں ہے۔ ایک میں ایک میں میں ایک میں میں ایک ایک میں میں ایک میں ک میں جن ہے ہیں جہ سی میں جب سی میں میں میں جے میں ہیں ہے ہیں ہے ہیں ایک ہوران میں ایک ایک میں ایک ایک میں ایک می میں ایک ہوتی ہے ایک ہوتی ہے ایک میں میں میں میں میں میں ہے ہیں ہے ہیں ہیں ہیں ہیں ایک ہوران میں ایک میں ایک میں		ti tanan ing sa sa sa sa sa sa sa sa sa sa sa sa sa	· .
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	Totals			
8	Did the organization have a binding written contract i	n effect on August 17, 2006, cove	ring the interact ranks sour	Yes N
as	Did the organization have a binding written contract i annuities described in question 107 above?	Alten Pelesen and Anna Anna Anna Anna Anna Anna Anna	d statements, and to the best of my preparer has any knowledge.	Kriowledge and bellet it is
n e		Date		Preparer's SSN of PTIN (See General Instruction X)
in re d :-	Preparei's:         JOHN L. GOODELL           S         Firm's name (or yours if self.         GOODELL PORTER FREDEN	RICKS, ILP	employed 💌	<u>N/A</u>

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TEEA01101. 08/03/07

SCHEDULE A (Form 990 or 990-EZ)	(Except Pd) 501(r Suppleme	Prganization Exempt Section 501(c)(3 Vate Foundation) and Section 5 I), or 4947(a)(1) Nonexempt Ch Intery Information — (See sepa	01(e), 501(l), 501(k), aritable Trust arate instructions.)	•	048 No. 1545-0047
Department of the Treasury Internal Revenue Service	<ul> <li>MUST be completed by t</li> </ul>	he above organizations and at	tached to their Form 9		
17	RIVER FOUNDATION			Employer Identificat 94-240021 (	
Part I Comp	ensation of the Five Hi	ghest Paid Employees C	ther Than Office	s, Directors,	and Trustees
loca	Instructions. List each oil Id address of each	<ul> <li>if there are none, end</li> <li>(b) Title and average</li> </ul>	ter None.)		
employ tha	ee paid more n \$50,000	hours per week devoted to position	(c) Compensation	(d) Contribution to employee benef plans and deferre compensation	(e) Expense account and othe allowances
NONE	بى بىرى بىرى بىرى بىرى بىرى بىرى تىرى بىرى ب	······································		· · · · · · · · · · · · · · · · · · ·	
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otal number of other er ver \$50,000	npiqyees paid.		0		
Part II - A Comp	ensation of the Five Hig	hest Paid Independent	Contractore for D	rofessional S	ervices
(\$\$\$\$\$\$,11	iau dociona: ciar cachi on	e (whether individuals of	firms). If there a	re none, ente	r 'None.')
	ss of each indépendent contra	ctor paid more than \$50,000	(b) Туре о	f service	(c) Compensation
ELLY BJORKLUND 133 ADDISON AVE USAN BRITTING	PALO ALTO, CA 9430		POLICY/SCI.	ADVISOR	71,067.
O BOX 377 COLO			POLICY/SCI.	ADVISOR	71,201.
AVID EDELSON,	ATTORNEY K BLVD. BERKELEY, C	04700	_		
		A 34708	LEGAL	·····	111,177.
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يەرىپ بىرىمە جىرىپ يەرىغارغۇ ئۇ. 	<u>نے ہے 'میں میں 'میں' میں شریعہ بید میں میں میں میں اور میں</u>	ايىر سېر مىچ پىدىسى بىد يېتىر سا سېرىنىڭ مېچىك مىڭ . ب	-		
otal number of others re	celving over	····		<u> </u>	- <b>I</b>
0,000 for professional e Part II — B Compe	nsation of the Five Hint	iest Paid Independent C	) ontractors for Ot	hou Courter	
(List ea firms, li	ch contractor who perfo there are none, enter 'l	rmed services other than None.' See instructions.)	i professional serv	lices, whethe	r Individuals or
(a) Name and addres	s of each independent contrac	tor paid more than \$50,000	(b) Type of	service	(c) Compensation
ONE	and and a second second second second second second second second second second second second second second se		· · · · · · · · · · · · · · · · · · ·	<u></u>	
<u> </u>	<u> </u>		<u> </u>		, <u>, , , , , , , , , , , , , , , , </u>
دی ہیں اسے بیشن پیشن سے بیچر اسے پیشن کی ہے۔ <u>ان اس</u> ان	، <u>مىڭ يالى بىرىنى بىلەر مىلەر مىلەر بەيمەر بەيمەر بىرى بەر مىلەر بەيمەر بەيمەر بەيمەر بەيمەر بەيمەر بەيمەر بە</u>	ـــــــــــــــــــــــــــــــــــــ	-		
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Scher	UNE A (Form 990 or 990 EZ) 2007 FRIENDS OF THE RIVER FOUNDATION	94-2400210		Page 2
	III Statements About Activities (See instructions.)		Yes	No
:	During the year, has the organization attempted to influence national, state, or local legislation, including a to influence public opinion on a legislative matter or referendum? If 'Yes,' enter the total expenses paid or incurred in connection with the lobbying activities \$\$8,869. Must equal amounts on line 38, Part VI-A, or line t of Part VI-B.)		x	
	Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Of organizations checking 'Yes' must complete Part VI-B AND attach a statement giving a detailed description obbying activities.	hér 3 of the		
1	During the year, has the organization, either directly or indirectly, engaged in any of the following aots with ubstantial contributors, trustees, directors, officers, creators, key employees, or members of their families axable organization with which any such person is affiliated as an officer, director, trustee, majority owner peneticlary? (If the answer to any question is 'Yes,' attach a detailed statement explaining the transactions	or Bride Bal 1992/98		
a	Sale, exchange, or leasing of property?		· .	<u>x</u>
b.l	ending of money or older extension of credit?	· · · · · · · · · · · · · · · · · · ·		<u>x</u>
ic f	Umishing of goods, services, of facilities? SEE FORM 990, PART	V 2c		X
d I	ayment of compensation (or payment or reimbursement of expenses if more than \$1,000)?		X	<u> </u>
	ransfer of any part of its income or assets?	<u>2e</u>		X
30 [ 6	lid the organization make grants for scholarships, fellowships, student loans, etc? (If 'Yes,' atlach an xplanation of how the organization determines that recipients quality to receive payments.)			X
b C	id the organization have a section 403(b) annulty plan for its employees?	·····		X
	id the organization receive or hold an easement for conservation purposes, including easements. ) preserve open space, the environment, historic land areas or historic structures? [] /es,' attach a detailed statement.	122030-19-04-000		<u>X</u>
	id the organization provide credit counseling, debt management, credit repair; or debt negotiation service			<u>x</u>
4a D 4	id the organization maintain any donor advised funds? If Yes, complete lines 4b through 4g, IF No; complete lines 4b through 4g, IF No; complete lines 4b through 4g, IF No; complete lines 4b through 4g, IF No; complete lines 4b through 4g, IF No; complete lines 4b through 4g, IF No; complete lines 4b through 4g, IF No; complete lines 4b through 4g, IF No; complete lines 4b through 4g, IF No; complete lines 4b through 4g, IF No; complete lines 4b through 4g, IF No; complete lines 4b through 4g, IF No; complete lines 4b through 4g, IF No; complete lines 4b through 4g, IF No; complete lines 4b through 4g, IF No; complete lines 4b through 4g, IF No; complete lines 4b through 4g, IF No; complete lines 4b through 4g, IF No; complete lines 4b through 4g, IF No; complete lines 4b through 4g, IF No; complete lines 4b through 4g, IF No; complete lines 4b through 4g, IF No; complete lines 4b through 4g, IF No; complete lines 4b through 4g, IF No; complete lines 4b through 4g, IF No; complete lines 4b through 4g, IF No; complete lines 4b through 4g, IF No; complete lines 4b through 4g, IF No; complete lines 4b through 4g, IF No; complete lines 4b through 4g, IF No; complete lines 4b through 4g, IF No; complete lines 4b through 4g, IF No; complete lines 4b through 4g, IF No; complete lines 4b through 4g, IF No; complete lines 4b through 4g, IF No; complete lines 4b through 4g, IF No; complete lines 4b through 4g, IF No; complete lines 4b through 4g, IF No; complete lines 4b through 4g, IF No; complete lines 4b through 4g, IF No; complete lines 4b through 4g, IF No; complete lines 4b through 4g, IF No; complete lines 4b through 4g, IF No; complete lines 4b through 4g, IF No; complete lines 4b through 4g, IF No; complete lines 4b through 4g, IF No; complete lines 4b through 4g, IF No; complete lines 4b through 4g, IF No; complete lines 4b through 4g, IF No; complete lines 4b through 4g, IF No; complete lines 4b through 4g, IF No; complete lines 4b through 4g, IF No; complete lines 4b through 4g, IF No; complete lines 4b throu	biele ines <b>4a</b>		<u>X</u>
b D	id the organization make any taxable distributions under section 4966?	13 ST 2002 C 46	N	Ă
Ĉ	id the diganization make a distribution to a denor; donor advisor, or related person?	<u>Äc</u>	N/	A
,d E	nter the total number of donor advised funds owned at the and of the tax year.	er oan 🦌		N/A
θE	nter the aggregate value of assets held in all donor advised funds owned at the end of the fax year, ( ) )	Quincip 🛌	jj	<u>N/A</u>
1L	nier the total number of separate funds or accounts owned at the end of the tax year (excluding donor adv nds included on line 4d) where donors have the right to provide advice on the distribution or investment of nounts in such funds of accounts.	K	<u></u>	<u>0</u>
	nler the aggregate value of assets field in all funds or accounts included on tine 4f at the end of the tax ye	80		<u>Q.</u>
AA	TERANJO 1020707 CONDUMA	Form 000 or Form 00	0.572	2007

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1. Water Course

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	vate Foundation Status					
erlify Inat the organization is not a pr	ivate foundation because it is:	(Please check only ONE ap	plicable bo	K.)		
5 A church, convention of church	hes, or association of churche	s. Section 170(b)(1)(A)().				
5 A school, Section 170(6)(1)(A)	(II). (Also complete Part V.)					
A hospital or a cooperative ho	spilal service organization. Se	ction:170(b)(1)(A)(iii);				
A federal, state, or local gover	nment or governmental unit. S	jection 170(b)(1)(A)(v).				
Armédical research organizatio		a hospital. Section 170(b)	(1)(A)(III), E	iter the hospita	ll's name, ci	ily,
An organization operated for the (Also complete the Support Sc	a benefit of a college or unive hedule in Part IV-A.)	rsity owned or operated by	a governm	ental unit. Secti	on 170(b)(1	)(A)(iv),
a An organization that normally o Section 170(b)(1)(A)(vi). (Also	eceives a substantial part of it complete the Support Schedul	s support from a governme e in Part IV-A.).	rital unit or ;	from the genera	al public.	
b 🗌 A community trust. Section 170	(b)(1)(A)(vi). (Also complete ti	ie Support Schedule in Par	t IV-A.)			
X An organization that normally re	eceives: (1) more than 33-1/3%	of its support from contribu	uilions, men	iberèblic foraci -	und arose re	
from activities related to its cha from gross investment income organization after June 30, 197	ritable, etc, functions — subjec and unrelated business taxable 5. See section 509(a)(2), (Also	t to certain exceptions, and Income (less section 511 f complete the Support Sch	d (2) no mp lax) from bu edule in Pa	re than 39-1/3% Isinesses acqui rt IV-A.)	of its supp red by the	ort
X An organization that normally re- from activities related to its cha from gross-investment income i organization after June 30, 1979 An organization that is not conti requirements of section 309(a)(						ori
An organization that is not contined in a contined of section 509(a)(	rolled by any disqualified persi 3). Check the box that describe	ons (other than foundation ) es the type of supporting or mally integrated	managers) ; ganization;	ind otherwise n		aceipts ori
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Sc	hedule A (Form 990 or 990-EZ) 200	7 FRIENDS OF	THE RIVER FOI	INDATION	94-24002	10 Page 4
	In IV-A Support Schedule	(Complete only if you	cherked a box on tim	10 11 oc 12 ) War	and wanted and the state of the second	<u></u>
13.0	wes now may use the worksneet in t	he instructions for con	verting from the accru	ual to the cash methol	d of accounting.	· · · -
Ca be	lendar year (ör fiscal year ginning in).	(a) 2006	(b) 2005	(c) 2004	(d) 2003	. <b>(e)</b> Tolal
1	Gifts: grants, and contributions received. (Do not include unusual grants. See line 28.)	2 262 162	0 7774 000		<u> </u>	₩ <u></u>
16	Membership fees received	<u>3,293,152.</u>	2,774,892.	2,464,952.	2,579,035. 23,102.	<u>11,112,031.</u> 23,102.
<u>1</u> 7	Gloss receipts from admissions, merchandlise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc. purpose	1.44			237102.	25,102.
18	Gross incrime from interest dividends	111,119.	12,914.	112.	122,137.	246,282.
	ants rec'd from payments on securities loans (sec. 5)2(a)(5)), rents, royaities licome from similar sources, and unrelated business taxable income (less sec. 511 taxes) from businesses acquired by the organization after June 30, 1975	36, 992.	23,478.	25,072.	27,136.	112,678.
19		· · · · · · · · · · · · · · · · · · ·				112,070
20	activities not included in line 18	· · · · · · · · · · · · · · · · · · ·				0.
<u>д</u> и	organization's benefit and either paid to it or expended on its behalt					
21	The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge					<u>0.</u>
22	Other Income. Attach a schedule. Do not include gain or (loss) from sale of capital assets. SEE . STMT. 10-	-8,806.	***			0
23	Total of lines 15 through 22	3,432,457.	0 011 004	32,508.	3,599.	27,301.
	Line 23 minus line 17.	3,321,338.	2,811,284.	2,522,644.	2,755,009.	11, 521, 394.
25	Enler 1% of line 23	34,325.	2,798,370.	2,522,532.	2,632,872.	11,275,112.
26	Organizations described on lines	lftor 11 a Fola	100 of mineral and	25,226.	27,550.	
ĥ	Prepare a list for your records to show the n supported organization) whose total gifts for return. Enter the lotal of all these excess an	ame of and amount contribu - 2003 Uircugh 2006 exceede nounts	ited by each person (other t d the amount shown in line	umn (0), line 24. han a governmental unit or 26a, Do not file this list w	publicly ith your	
, v	Total support for section 509(a)(7) Add: Amounts from column (e) for	(USI) EDIELTINE 24, CO	итл (е)дод одба сал.	ya wa wa jinda ku wa kuta kwa kwa		
		22		19 26 b.		
ė	Public support (line 26c minus line	26d total).	n an the second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second s		26d ► 26e	
S	<ul> <li>mmin ambhour baileaurada tille Sp</li> </ul>	e (numerator) divided	by line 26c (denomin	ator));	• • • • • • • • • • • • • • • • • • •	<u> </u>
	For amounts included in lines 15, 1 name of, and total amounts receive such amounts for each year.	g 6, and 17 that were re ed in each year from,	eceived from a disour each 'disqualified per	alified person, prepar son. Do not file this li	e a list for your record st with your return. E	ls to show the hter the sum of
180	(2006)0_ (	2005)	0 (2004)	0	(2003)	0.
ĵ	ror any amount included in line 17 to show the name of, and amount in \$5,000. (Include in the list organiza After contrast (the Aurors amount) of After contrast (the Aurors amount) of	that was received from deeived for each year tions described in line year the amount receive	n each person (other , (hat was more than \$ \$ Urrough 11b, as w ved and the larger an	than 'disgualified pers the larger of (1) the a vell as individuals.) Do rount described in (1)	cons'), prepare a list f mount on line 25 for t not file this list with or (2), enter line sum	or your records he year or (2) your return, of these
C	(2006)0, (2006)0, (2006)0, (2006)0, (2006)0, (2006)0, (2006)0, (2006)0, (2006)0, (2006)0, (2006)0, (2006)0, (2006)0, (2006)0, (2006)0, (2006)0, (2006)0, (2006)0, (2006)0, (2006)0, (2006)0, (2006)0, (2006)0, (2006)0, (2006)0, (2006)0, (2006)0, (2006)0, (2006)0, (2006)0, (2006)0, (2006)0, (2006)0, (2006)0, (2006)0, (2006)0, (2006)0, (2006)0, (2006)0, (2006)0, (2006)0, (2006)0, (2006)0, (2006)0, (2006)0, (2006)0, (2006)0, (2006)0, (2006)0, (2006)0, (2006)0, (2006)0, (2006)0, (2006)0, (2006)0, (2006)0, (2006)0, (2006)0, (2006)0, (2006)0, (2006)0, (2006)0, (2006)0, (2006)0, (2006)0, (2006)0, (2006)0, (2006)0, (2006)0, (2006)0, (2006)0, (2006)0, (2006)0, (2006)0, (2006)0, (2006)0, (2006)0, (2006)0, (2006)0, (2006)0, (2006)0, (2006)0, (2006)0, (2006)0, (2006)0, (2006)0, (2006)0, (2006)0, (2006)0, (2006)0, (2006)0, (2006)0, (2006)0, (2006)0, (2006)0, (2006)0, (2006)0, (2006)0, (2006)0, (2006)0, (2006)0, (2006)0, (2006)0, (2006)0, (2006)0, (2006)0, (2006)0, (2006)0, (2006)0, (2006)0, (2006)0, (2006)0, (2006)0, (2006)0, (2006)0, (2006)0, (2006)0, (2006)0, (2006)0, (2006)0, (2006)0, (2006)0, (2006)0, (2006)0, (2006)0, (2006)0, (2006)0, (2006)0, (2006)0, (2006)0, (2006)0, (2006)0, (2006)0, (2006)0, (2006)0, (2006)0, (2006)0, (2006)0, (2006)0, (2006)0, (2006)0, (2006)0, (2006)0, (2006)0, (2006)0, (2006)0, (2006)0, (2006)0, (2006)0, (2006)0, (2006)0, (2006)0, (2006)0, (2006)0, (2006)0, (2006)0, (2006)0,	2005) ines: 15 1	<u>0</u> (2004) 1,112,031	0. 16 23 1	(2003) N 2	<u> </u>
. <b>#</b> 1	17 <u>2</u>	46,282, 20		21	27c	<u>11, 381, 415 .</u>
р/ а	1999) III.79:27a (01a)(	<u> </u>	line 276 lotal	5 * 1 *	<u>0.</u> 27d	0.
f f	Public support (ine 27c lotal minus Total support for section 509(a)(2) (	line 2/d total). Surviva Sati matan Suranya wa	E E State of the second of the second second second second second second second second second second second sec A second second second second second second second second second second second second second second second secon	na san san sa san sa san sa sa sa sa sa sa sa sa sa sa sa sa sa	<u>- 27e</u> ► 27e	11,381,415.
:ol	Public support percentage (line 27e	can Enter amount from	n line 23, column (e)	<u>~ 271 1.1,</u>	521,394.	
. hl	nvestment Income percentage (line	B. column (a) (and	vy/IIII8 2/1 (denominal Pator) dioidead in th	(0)))): : : : : : : : : : : : : : : : : :		<u>98.79 </u> #
28	Unusual Grants: For an omanizatio	n described to line 10	11 or 17 feet man	<u>4/1 (denominator))</u>	▶ 27h	0.98 %
j. 1	Inustial Grants: For an organizatio ist for your records to show, for each alure of the grant. Do not file this	h year, the name of t	he contributor, the da	te and amount of the	grant, and a brief des	2006, prepare a cription of the
ВАА	and the second of the second difference of the second second second second second second second second second s	estara your return. I	TEEA0403L 12/27/07	rants in line 15,	Schedule A. (Form 99	

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Par	A Com 990 or 990 EZ 2007 FRIENDS OF THE RIVER FOUNDATION 94-24	00210	Page
	Revealed Control And Antion Antion (See Instructions.)     (To be completed ONLY by schools that checked the box on line 6 in Part IV)	N/1	A.
			Yes No
29	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?	29	
30	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?	,	
31	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?	31	
	If Yes, please describe; if No, please explain. (if you need more space, attach a separate statement.)		
	でなりりょう しょうりょう しょうしょう しょうしょう ション・ション・ション・ション・ション・ション・ション・ション・ション・ション・		
32	Does the organization maintain the following:		
a	Records indicating the racial composition of the student body, faculty, and administrative staff?		
, b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?		
C	Copies of all catalogues, brochutes, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	20.4	
d	Copies of all material used by the organization or on its behalf to solicit contributions?	32d	2
	If you ariswered 'No' to any of the above, please explain. (If you need more space, attach a separate statement.)		
-	= - + + + + + + + + + + + + + + + + + +		
<b>3</b> 3 (	Does the organization discriminate by race in any way with respect to:		
ait		<u>33a</u>	
6,	Admissions policies?	<u>.33b</u>	· · · · · · · · · · · · · · · · · · ·
Ċ E	Employment of faculty or administrative staff?	<u>33c</u>	
d S	Scholarshipstor other financial assistance?		
еE	duçalional policiás?	33e	·
f U	lse.of facilities?		
дA	ibleito programs?	330	·····
h C	نه 	<u>33h</u>	
ĺf	you answered 'Yes' to any of the above, please explain. (If you need more space, attach a separate statement.)		
Ť.	$\omega_{1}=\psi_{1}=\omega_{1}+\omega_{2}+\omega_{2}+\omega_{3}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4}+\omega_{4$		
ι ·—··	ೆ. ಸ್ವಾಲ್ ಪ್ರದೇಶದಲ್ಲಿ ಸ್ವಾಲ್ ಸ್ವಾಲ್ ಸ್ವಾಲ್ ಸ್ವಾಲ್ ಸ್ವಾಲ್ ಸ್ವಾಲ್ ಸ್ವಾಲ್ ಸ್ವಾಲ್ ಸ್ವಾಲ್ ಸ್ವಾಲ್ ಸ್ವಾಲ್ ಸ್ವಾಲ್ ಸ್ವಾ ಸ್ವಾಲ್ ಸ್ವಾಲ್		
	oes the organization receive any financial aid or assistance from a governmental agency?		
<u>H</u>	as the organization's right to such ald ever been revoked of suspended?		
5 Da se	pes the organization certify that it has complied with the applicable requirements of intrough 4.05 of Rev Proc 75-80, 1976-2 C.B. 587, covering racial and a second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second secon		
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Sc D	hedule A (Form 990 or 9	90:EZ) 2007 FRIEN	DS OF THE RIVER	FOUNDATION	94-2400	)210 Page 6
	H VI-A Lobbying (To be compl	Expenditures by El eted ONLY by an aligible	ecting Public Char organization that filed F	ities (See instructio orm 5768)	ns)	······································
Ch	eck 🕨 a 🔄 if the orga	nization belongs to an at	filiated group. Check		icked 'a' and 'limited contr	ol' provisions apply.
		Lintits on Lobbying m'expenditures' means			(a) Affiliated group totais	(b) To be completed for all electing
30	Total lobbying expend	itures to influence public	opinion (grassroots lobb	ving)		organizations 8,869.
37	<ul> <li>Total lobbying expend</li> </ul>	itures to influence a legis	lative body (direct lobby	ino) 🥳		0,009,
38	Total lobbying expendi	itures (add lines 36 and ;	370			8,869.
39	Other exempt purpose	expenditures				
40	1 lotal exempt purpose:	expenditures (add lines	38 and 39)		0.	8,869.
41	Lobbying nonlaxable a	mount. Enter the amoun	from the following table	- 🖉		
	If the amount on line 4		lobbying nontaxable arr	iountis		
	Not over \$500,000	20%	of the amount on line 4	o 🦳 🚺		
	Over \$500,000 but not over \$	1,000,000	000 plus 15% of the excess ov	er \$500,000 🛛 🐘		
	Uver \$1,000,000 but not over	\$1,500,000	000 plus 10% of the excess ov	er \$1,000,000 🛏 🛛 👍		1,774.
	Over \$1,500,000 but not over	\$17,000,000, \$225,	000 plus 5% of the excess over	\$1,500,000		
A initial and a state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the	Over \$17,000,000	···· (*********************************	00,000,	and the second second second second second second second second second second second second second second second		
42	Grassroots nontaxable	amount (enter 25% of (ir	18.41)	42		444.
.43 44	Subiraci ine 42 trom in	ne 36. Enter -0- If line 42	is more than line 35		- in a second second second second second second second second second second second second second second second	8,425.
44	Subtract line 41 from li	05 38, Enler (0- if line 4)	Is more than line 38	44 <b>44</b>	0.,	7,095.
	Gasuon: Ir there is an	amount on either line 43	Contraction and the second second			<u></u>
;	egre smoz)	inizations mat made a se	Averaging Period U Inclian 501 (h) election do e the instructions for line	not have to complet	11(h) e all of the five columns b	elow.
<u></u>			Lobbying Expendi	tures During 4 - Year	Averaging Period	
	Calendar year (or fiscal year beginning in) ≻	(a) 2007	<b>(b)</b> 2006	(c) 2005	(d) 2004	(e) Total
45	Lobbying nontaxable amount	1,774.	311,754.	278,461	280,136.	872, 125,
46	Lobbying ceiling amount (150% of line 45(e))					1,308,188.
47	Total lobbying expenditures	8,869.	11,671.	4,101,	12,702.	37,343.

 
 Total lobbying expenditures
 8,869
 11,671
 4,101
 12,702

 Grassroots nontaxable amount
 444
 77,584
 69,615
 70,034

 Grassroots celling amount (150% of line 48(e))
 444
 77,584
 69,615
 70,034

48

49

 

 50
 Grassroots Idbbying expenditures
 8,869
 11,671
 4,101
 2,041
 26,682

 Part VI-B
 Lobbying Activity by Nonelecting Public Charities (For reporting only by organizations that did not complete Part VI-A) (See instructions.)
 20,041
 26,682

 During the year, did the organization attempt to influence patients, table or local legitical influence patients.
 26,682

attempt to influence public opinion on a legislative matter or referendum, through the use of:	Yes	Nø	Amount
a Volunteers	·	X	<u></u>
and shart of management (include compensation in expenses tenoried on lines a through bit		X	
		X	*******
equalitings to members, registators, prime public:	'I I	x	· · · · · · · · · · · · · · · · · · ·
ser ublications, of published or broadcast statements.		N N	<u> </u>
f Grants to other organizations for lobbying purposes		X	
g Direct contact with legislators, their statfs, government officials, or a legislative body.	<b> </b>	Y	<u> </u>
n Kalles, demonstrations, seminars, conventions, speeches, lectures, or any other means		Ŷ	
I Total Jobbying expenditures (add lines & through h).		47 000000	ň
If 'Yes' to any of the above, also attach a statement giving a detailed description of the lobbying activitie	E.	88033	
BAA			

Schedule A (Form 990 or 990-EZ) 2007

217,677.

326,516.

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and agreed to

Schedule A Rart VIII	(Form 990 or 990 EZ) : Information Rega	rdina Tra	IENDS OF THE	RIVER FOUN	DATION and Relations	94-2	400210	F	lage 7
	Exempt Organizat	julis (de	<u>e msnuonons)</u>						
of the	e reporting organization Code (other than sectio	airectiy or 501(c)(3)	organizations) or in s	ny of the followi action 527, rela	ng with any other ling to political of	r organization desc Iganizations?	ribed in section	n 501()	c)"
a nais (i)Ci	ash	rganizatior	i to a noncharitable ex	kempt organizati	αn of:			Yes	No X
(1) O	ner assets,	2 1 4 5 K 4 4 4 4 5		1986))) 1997) 1986))) 1997) 1997)		ana kana ang kana ang ang ang ang si	<u>a(ii)</u>	<u> </u>	X
D. OUTEL	transactions; ales or exchanges of as:								
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140055	inviniance or services o	r memoers	nin or minoraicino coli	citationa.			گردهه نهرد ام		X
c Snarin d If the a	g of facilities, equipmen Inswer, to any of the abc	i, mailing li ve is 'Yes,	sts, other assets, or p complete the following	aid employees.	o constructions. Iomin //bi-should s	i sanài na 200 marta. Shuana chanaitha iai	C	X	
ine go any tra	g of facilities; equipmen inswer to any of the ab- ods, offher assets, or se insection or sharing an- (6)	rvices giver ingement,	) by the reporting area show in column (d) th	anization. If the a value of the go	organization rece bods, other asset	lived less than fair s, pr services recei	market value i ved:	j Or	
(a) Line no,	(b) Amount invölved	Name o	(c) I noncharitable exemj	organization	}	(d) I transfers, fransactions,			
51C		· · · · · · · · · · · · · · · · · · ·	S OF THE RIVE			F FACILITIES			
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52a is lhe d describe	rganization directly or in ad in section 501 (c) of it	directly affi te Code (of	lialed with, or related her than section 5010	la, one or more c)(3)) or in section	lax-exempt orga	mizations	► X Yac		
	countrele ine ionomind	schedule:	<b></b>					· لـــا	
	(a) Name of organization		(b) Type of orga	nization		(c) Description of relat	ionship		
FRIENDS	OF THE RIVER AC	TI	527		COMMON MEM	BERS.		<u>.</u> .	
·····	<u> </u>		· · · · ·			<u></u>	<u> </u>	<u>.</u>	<del></del>
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ааа	<u></u>	i	······			Schedule A (Fo	rm 990 or 990-	EZ) 20	J07

TEEA0406L 12/27/07

Schedule B (Form 990, 990 EZ, or 990 PF) Department of the Treasury	Schedule of Contribu Supplementary Information	<b>a 2007</b>
Internal Revenue Service Name of organization	line 1 of Form 990, 999-EZ and 990-PF (se	Employer Identification number
FRIENDS OF THE R	VER FOUNDATION	94-2400210
Organization type (check o	De):	
Filers of:	Section:	
FD/m 990 of 990,62	X 501 (c)( <u>3</u> ) (enter number) or 4947(a)(1) nonexempt charitable t 527 political organization	rganization Inust not treated as a private foundation
Form 990-PF	501(6)(3) exempt private foundatio 4947(a)(1) nonexempt charitable to 501(c)(3) texable private foundatio	trust treated as a private foundation

Check if your organization is obvered by the General Rule or a Special Rule. (Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule — see instructions.)

#### General Rule --

For organizations filing Form 990, 990 EZ; or 990 PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. (Complete Parts I and II.)

### Special Rules -

For a section 501(c)(3) organization filling Form 990, or Form 990 EZ, that met the 33-1/3% support test of the regulations under sections 509(a)(1)/170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of \$5,000 or 2% of the amount on line 1 of these forms. (Complete Parts I and II.)

For a section 501(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributor, during the year, aggregate contributions or bequests of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of crueity to children or animals. (Complete Parts 1, 11, and 111.)

For a section 501(c)(7), (8), or (10) organization tiling Form 990, or Form 990-EZ, that received from any one contributor, during the year, some contributions for use exclusively for religious, charitable, etc. purposes, but these contributions for an exclusively religious, charitable, etc. purposes, but these contributions for an exclusively religious, charitable, etc. purposes, but these contributions for an exclusively religious, charitable, etc. purposes, but these contributions for an exclusively religious, charitable, etc. purposes, but these contributions for an exclusively religious, charitable, etc. purpose. Do not complete any of the Parts unless the General Rule applies to this organization because it received nonexclusively in the etc.

Caution: Organizations that are not covered by the General Rule and/or the Special Rules do not file Schedule B (Form 990, 990-EZ, or 990-PF) but they must check the box in the heading of their Form 990, Form 990-EZ, or on line 2 of their Form 990-PF, to certify that they do not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990, Form 990-EZ, and Form 990-PF.

Schedule B (Form 990, 990-EZ, or 990-PF) (2007)

Schedu Name of	RE B (Form 990, 990, EZ, or 990, PF) (2007)	Page	
10	NDS OF THE RIVER FOUNDATION		yer identification number 2400210
Part	Contributors (See Specific Instructions.)		
(a) Numbe	(b) Pr Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
<u> </u>	ALPER FAMILY FOUNDATION		Person X
	5849 RIDGEBROOK DRIVE	\$5,000	Payroll Noncash
· <u> </u>	AGOURA HILLS, CA 91301	~	(Complete Part II if there is a noncash contribution.)
(a) Numbe	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
2	KIMO CAMPBELL		Person X
	PO_BOX_127		Payrôll Noncash
	KENTFIELD, CA 94914		Сотріете Part II II there Is a noncash contribution.)
(a) Number	(b) Name, address, and 2(P + 4	(c) Aggregate contributions	(d) Type of contribution
3	JEFFREY & KAREN CHANIN		Person X
	28 OLD LANDING ROAD	\$ <u>17,360</u> ,	Payroll
	TIBURON, CA. 94920		(Complete Part II if there Is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 2	(č) Aggregate contributions	(d) Type of contribution
4	CHOUINARD FAMILY TRUST		Person X
	4218 FARIA ROAD	\$5,000.	Payroll Noncash
	VENTURA, CA 93001		(Complete Part I) (r there is a noncash contribution.)
(a) Number	(5) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
5	DANCING TIDE FOUNDATION	· · · · · · · · · · · · · · · · · · ·	Person X
	590 MADISON AVE 9TH FIR	\$7,500,	Payroll Noncash
	<u>NEW YORK, NY 90022</u>		(Complete Part II if there is a rioncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
<u>    6                                </u>	GOLDMAN FUND		Person X
	ONE DANIEL BURNHAM CT. #330	\$ <u> </u>	Payroll Noncash
1	SAN FRANCISCO, CA 94109		(Complete Rait II if there is a noncesh contribution.)
BAA	TEKA0702(	Schedulo B (Porm 000	000 57

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Schedule B (Porm 990, 990-EZ, or 990-PF) (2007)

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Schedu Name of c	e B (Form 990, 990 EZ, or 990 PF) (2007)	Page 2	
	NDS OF THE RIVER FOUNDATION		yar identification number 2400210
Part	Contributors (See Specific Instructions.)		······································
(a) Numbe	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d). Type of contribution
7	DERRY & CHARLENE KABCENELL		Person X Pavroll
	4900 ALPINE ROAD PORTOLA VALLEY, EA 94028	\$25,000	
(a) Number	(b) Namé, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
8	JOHN & TINA KEKER	·	Person X Payroll
	1155 GREENWICH ST	<u>6,000</u>	
	SAN FRANCISCO, CA 94109		is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
9	WILL & ILENE LICHTIG		Renson X
	4100 FOLSOM BLVD #7A	<u>5,445</u> _	
	SACRAMENTO, CA 95819	. <u></u>	(Complete Parl II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIR + 4	(c) Aggregate contributions	(d). Type of contribution
<u>10</u>	JOHN N. ROSEKRANS		Person X Payroll
•	68 LOCUST AVE	\$5,000.	Noncash
	MILL VALLEY, CA 94941	_	(Complete Part II if there is a noncash controllion)
(a) Number	(b) Name, address, and 21P + 4	(c) Aggregate contributions	(d) Type of contribution
11	GUY T & JEANINE SAPERSTEIN	***	Person
	52 GLEN ALPINE RD	<u>\$ 10,000.</u>	Payroll Noncash
	PIEDMONT, CA 94611		(Complete Part II)if (here Is a noncesh contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
12	DAVE SHORE		Person X
	80 E. SIR FRANCIS DRAKE STE 1A	\$10,260.	Payroll Noncash
	LARKSPUR, CA. 94939		(Complete Part I) if there is a noncash contribution.)
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Partl		<u> 94</u>	-2400210
(a) Number	(b)	(c) Aggregate contributions	(d) Type of contribution
13	HARRY & MUFFY THORNE		Person X
	2782 BUENA VISTA AVE	 \$\$5_00	Payroll
	OAKLAND, CA 94618		Complete Part II if then is a noncesh contribution
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
14	TOMCHIN FAMILY CHARITABLE FOUN	= -:	Person X
ŀ	727 LILAC DRIVE	\$5,00	Payroll Noncash
-	MONTECITO, CA 93108	-, '''	(Complete Part I) if there is a noncash contribution.
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
15	MATT WINKLER		Rerson X
	960 LIVE OAK CR	\$1D, 000	Rayroll
	AUSTIN, TX 78746	• <u>;-</u>	(Complete Part II if Ihere is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
<u>16  </u>	TYSS FOUNDATION		Person X
j.	1302 WRIGHTS LANE EAST	\$10,000	Payroll 🗍
	WEST CHESTER, PA 19380		(Complete Part II if there is a noncash contribution.)
(a) lumber	(5) Name, address _{in} and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
	الله ومحمول المراجع المحمول المراجع المراجع المراجع المراجع المراجع المراجع المراجع المراجع المراجع المراجع المحمول ا المراجع المراجع br>المراجع المراجع	<u> </u>	Person Rayroli
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(8)			is a noncash contribution,)
	Name, address, and ZIP 3:4	(c) Aggregate contributions	(d) Type of contribution
	an an an an an an an an an an an an an a		1.
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	میں ہے۔ ایک میں ہے ہوئی ہے ہوئے ہیں ہے۔ جب ہوتا ہے ہوئی ہے کہ میں ہوتا ہے ہوئی ہے ہوئے ہوئے ہوئے ہے ہے ہے ہے ہے یہ بچھ نہی سے بھر بھر ہی ہے ہو ہو ہوئی ہے کہ ہو ہو ہو پارٹی ہے کہ میں ہو ایک ہو ہے ہو ہو ہے ہے ہے ہے ہے ہو ہو ہے		Person Payroll Noncash (Complete Part I) if there is a honcash contribution.)

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Schedule 8 (Form 990,	990-EZ,	or 990-PF)	(2007)
Name of organization	·		

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Page	L	of 1	of Part II
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FRIENDS OF THE RIVER FOUNDATION

94-2400210

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Part II Noncash Property (See Specific Instructions.)

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(a) No. from Part I	(b). Description of noncesh property given	(c) FMV (or estimate) (see instructions)	(d) Date receive
NZ			
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(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date receiver
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		· · · · · · · · · · · · · · · · · · ·	رمد بد <u>ب نه بد شاند هم</u> 
(a) Io, from Part I	(b) Deacription of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
مهند کې خونو به مخمند	سی ہے ہے۔ سی پیر سی آب اور بین سے پید بین سن سے نین میٹ سرائی ور بی سے میں ہورجی پر میں ہی ہے۔ جب میں میں سے اور میٹ سی ا سی سے ایر ان اے ایر ایر ایر این کرنے کرنے کا میٹ میٹ میٹ میٹ کے بعد وجارت کے ایر میں میں میں میں میں میں میں می	· · · · · · · · · · · · · · · · · · ·	
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(a) o. from Part 1	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
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TEEA0703L, 08/01/07

Schedule [ Name of organ	B (Form 990, 990, EZ, or 990, PF) (2007) Alzation			Page 1 of 1 of Part III			
FRIEND	S OF THE RIVER FOUNDATION			Employer identification number 94-2400210			
Part III	Exclusively religious, charitable organizations accretizing more	e, etc, individual contribution of the second states of the second states of the second states of the second states of the second states of the second states of the second states of the second states of the second states of the second states of the second states of the second states of the second states of the second states of the second states of the second states of the second states of the second states of the second states of the second states of the second states of the second states of the second states of the second states of the second states of the second states of the second states of the second states of the second states of the second states of the second states of the second states of the second states of the second states of the second states of the second states of the second states of the second states of the second states of the second states of the second states of the second states of the second states of the second states of the second states of the second states of the second states of the second states of the second states of the second states of the second states of the second states of the second states of the second states of the second states of the second states of the second states of the second states of the second states of the second states of the second states of the second states of the second states of the second states of the second states of the second states of the second states of the second states of the second states of the second states of the second states of the second states of the second states of the second states of the second states of the second states of the second states of the second states of the second states of the second states of the second states of the second states of the second states of the second states of the second states of the second states of the second states of the second states of the second states of the second states of the second states of the second states of the second states of the second states of the second states of the second state	ons to se	ction 501(c)(7), (8), or (10) s (a) through (e) and the following line entry.)			
	For organizations completing Part III, en contributions of \$1,000 or less for the ye	ler total of exclusively religious, chi ar. (Enter this information once – s	omplete co aritable, etc. ee instructio	is (a) Inrough (e) and the following line entry)			
(a) No. from Part I	(b) (c) Purpose of gift. Use of gift		<u>ee neataen</u>	(d) Description of how gift is held			
	N/A						
<b></b> .	، و چې چې چې د د درېمانو اساس سر او اندا د د اندا ساله د د او اندا د د ا	- بت هم		**************************************			
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	(e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee						
	اس سور اس می این اس می این اس اس این این این این این این این این این این	یکی و مراجع میں این ایک ایک ایک میں میں میں میں میں میں میں ایک اور اور اور اور اور اور اور اور اور اور	مىرىت بىر يىر يەر مىرىي بىر يېرىي	ار این این این این این این این این این این			
(a) No. from	(b) Purpose of gift	(c) Use of gift	، ' <u>منٹ ریمج ہو</u> ت ممیز بھی				
Part I		dar of But.	·····	Description of how gift is held			
·	ا است. ای می می باشند است. این این است است است است است است است است است است	بین پر پیش بین بین کردن این این کردن کند کند است است بین میدا است است کند. سیم بین پیش بین این این کردن است کند است است این این این این این این این این این این	•••• ••• •••• •••• ••• ••• ••• •••• ••• ••• •••	ور میدونی است که است که استان های میانید. می است است است است است است است است است است			
-	(e) Transferee's name, address, and ZIP + 4 Relationship of dransferor to transferee						
Ē			Relationship of transferor to transferee				
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(8)	an an an an an an an an an an an an an a		بو زیرو هم اسا همارند. 	a sa an an an an an an an an an an an an an			
No from Part I	(b) Purpose of gilt	(c) Use of gift		(d) Description of how gift is held			
یم بار بار	ایس استان سے اسے میں تیت سے اسار میں توجر بخار میں بھی ہوتا ہے۔ ایس ایک ایک ایک ایک ایک ایک ایک ایک ایک ایک	$\sum_{i=1}^{n} \sum_{j=1}^{n} \sum_{i=1}^{n} \sum_{i=1}^{n} \sum_{j=1}^{n} \sum_{i=1}^{n} \sum_{j=1}^{n} \sum_{i=1}^{n} \sum_{j=1}^{n} \sum_{j=1}^{n} \sum_{i=1}^{n} \sum_{i=1}^{n} \sum_{i=1}^{n} \sum_{i=1}^{n} \sum_{i$		م و و همینان است می میراند. پس پی وی میرانی آنیا است است است است است است ا و و پی است است است است است است است است است است			
	Transferee's name, address, and ZIP + 4			Relationship of transferor to transferee			
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-	، بىن ئىيا سىر بىر بىن بىن بىن سەر بىر بىر بىر بىر بىر بىر بىر بىر بىر بى			ان و هم نصر است. است به به مارونی میک سب می میکند. میکند است میکند است. این و هم نصر است است است است است میکند است است میکند. است است میکند است است است است است است است است است. است ا			
(a)		در بال بر مرجع بر معروم بردی کرد. مرجع کرد می شود می شود می شود می می می می می می می می می شود. مرجع می مرجع می می می می می می می می می می می می می		ار هو می والد می باشد. می والد باش این می والد این این این این این این این این این این			
No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held			
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بغ الم	= - + + + + + + + + + + + + + + + + + +						
ļ	(9)						
.   	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee				
نجا مع	ىرىم بى بىر بىر بىرىمىيە بىڭ <u>ئىر بىر</u> ايغۇر مەتتىمىغا ئەتلاخەر ساتىتە بىر بىر بىر بىر بىر بىر بىرەم بەرەبرىر بىر بىر بۇنارغانچان بىرىغان تىرىپى	نی ہے اور این ایک ایک ایک میں بین ایک میں میں بین ایک میں میں بین ایک ایک ایک ایک ایک ایک ایک ایک ایک ایک					
		مر میں بین بین بین بین بین بین میں بین میں میں میں میں میں میں اور اور اور اور اور اور اور اور اور اور	مر بین این این این این این این این این این ا	مرجع بدر این برای کرد است کرد است کرد است کرد است کرد است کرد است کرد است کرد است کرد است کرد است کرد است کرد ا مرجع بدر این برای مراجع با است کرد است کرد است کرد است کرد است کرد است کرد است کرد است کرد است کرد است کرد است ک مربق این مراجع برای مراجع برای مراجع برای مراجع برای مراجع برای مراجع برای مراجع برای مراجع برای مراجع برای مرا			
MA			Sched	ule B (Form 990, 990-EZ, or 990-PF) (2007)			

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007 FEDERAL STATEMENTS					PAGE
	F	RIENDS OF THE RIVE	REGUNDATION		94-240021
STATEMENT 1 FORM 990, PART I, NET GAIN (LOSS) F PUBLICLY TRADED	ROM NONINVE	ENTORY SALES			
GROSS SALES PRIC COST OR OTHER BA	le: Asts:	55,160. 54,215.			
	1	IOTAL GAIN (LOSS) I	UBLICLY TRAD	ED SECURITIES	<u>\$ 945.</u>
	Ĩ	otal net gain (los:	5) FROM NONIN	VENTORY SALES	<u>\$ 945.</u>
STATEMENT 2 FORM 990, PART I, NET INCOME (LOSS	LINE 9 5) FROM SPEC	AL EVENTS			. <u>.</u>
SPECIAL E	VENTS	LE GROSS CONT <u>RECEIPTS BUTI</u>	RI- GROS		NET INCOME (LOSS)
CALIFORNIA RIVER OTHER FUNDRAISIN RIVER FEES		139,791. 49,590. 21,293. \$ 210,674. \$	$\begin{array}{cccccccccccccccccccccccccccccccccccc$	93. 0	11,143 21,293
STATEMENT 3 FORM 990, PART I, I OTHER CHANGES II	n net assets	OR FUND BALANCES		u ve verene er regere 💈	್ಕು 'ಆರ್.ಆರ್.
UNREALIZED LOSS	ON INVESTMEN		• A 400 P 9 • 2 • AA 2 • • 4 A 6 4 4 4 • •	total <u>š</u>	<u>-1,577.</u> -1,577.
	<u></u>		• 4 m • • 9 • 5 • 4 4 • • • 6 6 4 4 4 • •	total <u>š</u>	<u>-1,577.</u> -1, <u>577.</u>
UNREALIZED LOSS STATEMENT 4 FORM 990, PART IL	<u></u>	(A) <u>Total</u>	(B) PROGRAM SERVICES	(C) MANAGEMENT & GENERAL	(D)

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2007	FEDERAL STATEMENTS FRIENDS OF THE RIVER FOUNDATION			PAGE
147				94-240021
STATEMENT 4 (CONTINUED) FORM 990, PART II, LINE 43 OTHER EXPENSES				4 <u>17</u>
WEBSITE	(A) <u>TOTAL</u> 10,057,	(B) PROGRAM SERVICES 9,950.	(C) MANAGEMENT & GENERAL 107.	(D) FUNDRAISING
ALLOCATED TO SPECIAL EVENT:	$\begin{array}{c} 5 & -63,060, \\ \text{TOTAL} & \underline{\$ 1,293,677}. \end{array}$		-	-63,060, -14,325.
STATEMENT 5 FORM 990, PART IV, LINE 558 INVESTMENTS - LAND, BUILDING	SS, AND EQUIPMENT	······	<b>**********************************</b> *****	<u>, , , , , , , , , , , , , , , , , , , </u>
CATEGORY			ACCUM. EPREC.	BOOK VALUE
FURNITURE AND FIXTURES MACHINERY AND EQUIPMENT	total <u>s</u>	8,006, \$ 48,642, 56,648, <u>\$</u>	7,193. \$ 30,872, 38,065, \$	813. <u>17,770.</u> 18,583.
STATEMENT 6 FORM 990, PART IV, LINE 56 INVESTMENTS - OTHER		inger ingentennetter zu		
DESCRIPTION OF I	NVESTMENT	VALUATI METHO	ion D	BOOK VALUE
SMITH BARNEY INVESTMENTS MORGAN STANLEY INVESTMENTS CHARLES SCWAB INVESTMENTS		MARKET VALUE MARKET VALUE MARKET VALUE	\$ TOTAL <u>3</u>	568,763. 12,223. <u>497.</u> 581,483.
STATEMENT 7 FORM 990, PART IV, LINE 58 OTHER ASSETS		99 — ² 00 — 999 - 200 <u>- 999 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 </u>		
DEPOSITS	enners en bet wert erter eine eine ein ein die het gehe diets ge	में देवेलेंग की इंड करने के मलना का स्ट्र	total. <u>\$</u>	<u>29,112.</u> 29,112.
STATEMENT 8 FORM 990, PART IV, LINE 65 OTHER LIABILITIES				
ACCRUED VACATIONS PAYABLE CAPITAL LEASE OBLIGATIONS ROUNDING	And of a second transmission is a second to be a second to be a second to be	e available e a sub-ser available e a		64,930. 7,697. <u>1.</u> 72,628.

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## FEDERAL STATEMENTS

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## FRIENDS OF THE RIVER FOUNDATION

94-2400210

PAGE 3

STATEMENT 9 FORM 990, PART V-A LIST OF OFFICERS, DIRECTORS, TRUSTEES, AND KEY EMPLOYEES

NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED	COMPEN- SATION	CONTRI- BUTION TO EBP & DC	EXPENSE ACCOUNT/ OTHER
PETER FERENBACH 915 20TH STREET SACRAMENTO, CA 95814	EXECUTIVE DIREC \$	84,000.		
ANTHONY BOGAR 915 20TH STREET SACRAMENTO, CA 95814	DIRECTOR 4000	51,000.	0.	0,
CRAIG THOMAS 915 20TH STREET SACRAMENTO, CA 95814	DIRECTOR 40.00	60, DOQ.	0.	.0.
STEVE EVANS 915 20TH STREET SACRAMENTO, CA 95814	DIRECTOR 40.00	61,500.	0.	Ó.
BJDRN STROMSNESS 915 20TH STREET SACRAMENTO, CA 95814	DIRECTOR 40.00	51,00 <u>0</u> .	0.	Q
WILLIAM DUARTE 915 20TH STREET SACRAMENTO, CA 95814	DIRECTOR 40,00	50,000.	Ø.	0.,
KETTH NAKATANI 915 20TH STREET SACRAMENTO, CA 95814	DIRECTOR 40.00	60,000,	0.	Q.
DAVID NESMITH 915 20TH STREET SACRAMENTO, CA 95814	DIRECTOR 40.00	34,044.	0.	.O
BARBARA BARRIGAN-PARILLA 915 20TH STREET SACRAMENTO, CA 95814	DIRECTOR 40.00	45,000.	ð.	0
SEE ATTACHED 915 20TH STREET SACRAMENTO, CA 95814	DIRECTOR 1.90	Q.	Ø.	<b>C</b>
	TOTAL <u>s</u>	496, 544,	3 <u>0.</u> 5	<u> </u>

2007	107 FEDERAL STATEMENTS FRIENDS OF THE RIVER FOUNDATION			
STATEMENT 10 SCHEDULE A, PAR OTHER INCOME	RT IV-A, LINE 22			
DESCRIE	TION (A) 2006 (B) 2005 (C) 2004 (D) 2003	<u>(E) TOTAL</u>		
MISCELLANEOUS	TOTAL $\frac{\$ -8,806}{\$ -8,806}$ , $\$ 0$ , $\$ 32,508$ , $\$ 3,599$ 5 -8,806, $$ 0$ , $$ 32,508$ , $$ 3,599$	$\frac{3}{27,301}$		

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