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Form **990**
 Department of the Treasury
 Internal Revenue Service

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

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

OMB No 1545-0047
2008
Open to Public Inspection

A For the 2008 calendar year, or tax year beginning 07-01-2008 and ending 06-30-2009

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Termination <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	Please use IRS label or print or type. See Specific Instructions.	C Name of organization THE RIVERS SCHOOL CORPORATION	D Employer identification number 04-2104457
		Doing Business As	E Telephone number (781) 235-9300
		Number and street (or P O box if mail is not delivered to street address) Room/suite 333 WINTER STREET	G Gross receipts \$ 23,165,936
		City or town, state or country, and ZIP + 4 WESTON, MA 024931040	
F Name and address of Principal Officer THOMAS P OLVERSON 333 WINTER STREET WESTON, MA 024931040		H(a) Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all affiliates included? <input type="checkbox"/> Yes <input type="checkbox"/> No (If "No," attach a list See instructions) H(c) Group Exemption Number ▶	
I Tax-exempt status <input checked="" type="checkbox"/> 501(c) (3) ▶ (insert no) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527			
J Web site: ▶ RIVERS.ORG			
K Type of organization <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> trust <input type="checkbox"/> association <input type="checkbox"/> other ▶		L Year of Formation 1924	M State of legal domicile MA

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities See Additional Data Table		
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its assets		
	3 Number of voting members of the governing body (Part VI, line 1a)	3	25
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	25
	5 Total number of employees (Part V, line 2a)	5	481
	6 Total number of volunteers (estimate if necessary)	6	391
	7a Total gross unrelated business revenue from Part VIII, line 12, column (C)	7a	160,927
b Net unrelated business taxable income from Form 990-T, line 34	7b	-103,743	
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	9 Program service revenue (Part VIII, line 2g)	2,905,352	1,905,569
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	16,842,247	17,948,479
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	322,508	-227,412
	12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	701,665	403,514
		20,771,772	20,030,150
	13 Grants and similar amounts paid (Part IX, column (A), lines 1–3)	2,487,343	2,700,376
Expenses	14 Benefits paid to or for members (Part IX, column (A), line 4)		0
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	10,327,877	11,686,839
	16a Professional fundraising fees (Part IX, column (A), line 11e)		22,532
	b (Total fundraising expenses, Part IX, column (D), line 25 <u>901,937</u>)		
	17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24f)	7,895,397	7,182,825
	18 Total expenses—add lines 13–17 (must equal Part IX, line 25, column (A))	20,710,617	21,592,572
	19 Revenue less expenses Subtract line 18 from line 12	61,155	-1,562,422
Net Assets or Fund Balances		Beginning of Year	End of Year
	20 Total assets (Part X, line 16)	55,190,147	50,715,611
	21 Total liabilities (Part X, line 26)	22,043,499	22,925,857
	22 Net assets or fund balances Subtract line 21 from line 20	33,146,648	27,789,754

Part II Signature Block

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

Please Sign Here	***** Signature of officer	2010-02-09 Date		
	BRUCE T AMSBARY PRESIDENT Type or print name and title			
Paid Preparer's Use Only	Preparer's signature ▶ Mark J Conklin CPA	Date 2010-02-09	Check if self-employed <input type="checkbox"/>	Preparer's PTIN (See Gen Inst)
	Firm's name (or yours if self-employed), address, and ZIP + 4 Miller Wachman LLP 10 St James Avenue 16th Floor Boston, MA 02116			EIN ▶
				Phone no ▶ (617) 338-6800

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

Part III Statement of Program Service Accomplishments (See the instructions.)

1 Briefly describe the organization's mission

See Additional Data Table

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

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

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

If "Yes," describe these changes on Schedule O

4 Describe the exempt purpose achievements for each of the organization's three largest program services by expenses Section 501(c)(3) and (4) organizations and 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

4a (Code) (Expenses \$ 13,859,937 including grants of \$ 2,488,500) (Revenue \$ 13,348,188)
SCHOOL PROGRAM - THE INSTRUCTION OF 441 STUDENTS - GRADE 6-12 THE SCHOOL YEAR RUNS FROM SEPTEMBER TO JUNE

4b (Code) (Expenses \$ 1,879,641 including grants of \$) (Revenue \$ 1,870,968)
MUSIC SCHOOL - OFFERS PREMIER CLASSICAL AND JAZZ MUSIC EDUCATION AND PERFORMANCE PROGRAMS THAT DEVELOP THE HIGHEST LEVELS OF ARTISTIC AND TECHNICAL ACHIEVEMENT IN STUDENT MUSICIANS OF ALL AGES

4c (Code) (Expenses \$ 1,261,506 including grants of \$) (Revenue \$ 1,741,970)
SUMMER CAMP PROGRAMS - THE INSTRUCTION AND SUPERVISION OF 927 TOTAL CAMPERS IN ARTS, CRAFTS, AND OUTDOOR ACTIVITIES

(Code) (Expenses \$ 1,389,912 including grants of \$) (Revenue \$ 987,353)




4d Other program services (Describe in Schedule O)
(Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses \$ 18,390,996 *Must equal Part IX, Line 25, column (B).*

Part IV Checklist of Required Schedules

		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A.</i>	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I.</i>		No
4	Section 501(c)(3) organizations Did the organization engage in lobbying activities? <i>If "Yes," complete Schedule C, Part II.</i>		No
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? <i>If "Yes," complete Schedule C, Part III.</i>		
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? <i>If "Yes," complete Schedule D, Part I.</i>		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? <i>If "Yes," complete Schedule D, Part II.</i>		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III.</i>	Yes	
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? <i>If "Yes," complete Schedule D, Part IV.</i>		No
10	Did the organization hold assets in term, permanent, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V.</i>	Yes	
11	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? <i>If "Yes," complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.</i>	Yes	
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? <i>If "Yes," complete Schedule D, Parts XI, XII, and XIII.</i>	Yes	
13	Is the organization a school as described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E.</i>	Yes	
14a	Did the organization maintain an office, employees, or agents outside of the U.S.?		No
14b	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.? <i>If "Yes," complete Schedule F, Part I.</i>		No
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? <i>If "Yes," complete Schedule F, Part II.</i>		No
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? <i>If "Yes," complete Schedule F, Part III.</i>		No
17	Did the organization report more than \$15,000 on Part IX, column (A), line 11e? <i>If "Yes," complete Schedule G, Part I.</i>	Yes	
18	Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II.</i>	Yes	
19	Did the organization report more than \$15,000 on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III.</i>		No
20	Did the organization operate one or more hospitals? <i>If "Yes," complete Schedule H.</i>		No
21	Did the organization report more than \$5,000 on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II.</i>		No
22	Did the organization report more than \$5,000 on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III.</i>	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? <i>If "Yes," complete Schedule J.</i>	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer questions 24b-24d and complete Schedule K. If "No," go to question 25.</i>		No
24b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
24c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
24d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25a	Section 501(c)(3) and 501(c)(4) organizations Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I.</i>		No
25b	Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a prior year? <i>If "Yes," complete Schedule L, Part I.</i>		No
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? <i>If "Yes," complete Schedule L, Part II.</i>		No
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? <i>If "Yes," complete Schedule L, Part III.</i>		No

Part IV Checklist of Required Schedules *(Continued)*

		Yes	No
28	During the tax year, did any person who is a current or former officer, director, trustee, or key employee		
a	Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other person(s) listed in Part VII, Section A)? <i>If "Yes," complete Schedule L, Part IV</i>		No
b	Have a family member who had a direct or indirect business relationship with the organization? <i>If "Yes," complete Schedule L, Part IV</i>		No
c	Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional corporation) doing business with the organization? <i>If "Yes," complete Schedule L, Part IV</i>		No
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> 	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i> 	Yes	
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i> 		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations section 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>		No
34	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1</i>		No
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>		No
36	501(c)(3) organizations Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>		No
37	Did the organization conduct more than 5 percent of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>		No

Part V Statements Regarding Other IRS Filings and Tax Compliance

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096, <i>Annual Summary and Transmittal of U.S. Information Returns</i> . Enter -0- if not applicable		
	1a 88		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable		
	1b 0		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	Yes	
2a	Enter the number of employees reported on Form W-3, <i>Transmittal of Wage and Tax Statements</i> filed for the calendar year ending with or within the year covered by this return		
	2a 481		
b	If at least one is reported in 2a, did the organization file all required federal employment tax returns? Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return.	Yes	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	Yes	
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	Yes	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	Yes	
b	If "Yes," enter the name of the foreign country <u>CJ</u> See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts .		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		No
c	If "Yes," to 5a or 5b, did the organization file Form 8886-T, <i>Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction</i> ?		
6a	Did the organization solicit any contributions that were not tax deductible?		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
7	<i>Organizations that may receive deductible contributions under section 170(c).</i>		
a	Did the organization provide goods or services in exchange for any quid pro quo contribution of \$75 or more?		No
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		No
d	If "Yes," indicate the number of Forms 8282 filed during the year		
	7d		
e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		No
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?		
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?		
8	<i>Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.</i> Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?		
9	<i>Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.</i>		
a	Did the organization make any taxable distributions under section 4966?		
b	Did the organization make a distribution to a donor, donor advisor, or related person?		
10	<i>Section 501(c)(7) organizations.</i> 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	<i>Section 501(c)(12) organizations.</i> Enter		
a	Gross income from members or shareholders		
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)		
12a	<i>Section 4947(a)(1) non-exempt charitable trusts.</i> Is the organization filing Form 990 in lieu of Form 1041?		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year		
	12b		

Part VI Governance, Management, and Disclosure (Sections A, B, and C request information about policies not required by the Internal Revenue Code.)

Section A. Governing Body and Management

For each "Yes" response to lines 2-7 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		
1b	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?		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?		No
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	Yes	
5	Did the organization become aware during the year of a material diversion of the organization's assets?		No
6	Does the organization have members or stockholders?		No
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?		No
7b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following		
8a	the governing body?	Yes	
8b	each committee with authority to act on behalf of the governing body?	Yes	
9a	Does the organization have local chapters, branches, or affiliates?		No
9b	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?		
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 990	Yes	
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		No

Section B. Policies

		Yes	No
12a	Does the organization have a written conflict of interest policy? If "No", go to line 13	Yes	
12b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	Yes	
12c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	Yes	
13	Does the organization have a written whistleblower policy?	Yes	
14	Does the organization have a written document retention and destruction policy?		No
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		
15a	The organization's CEO, Executive Director, or top management official?	Yes	
15b	Other officers or key employees of the organization? Describe the process in Schedule O	Yes	
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?		No
16b	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. Disclosure

- 17** List the States with which a copy of this Form 990 is required to be filed MA
- 18** Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply.
 own website another's website 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. See Additional Data Table
- 20** State the name, physical address, and telephone number of the person who possesses the books and records of the organization
 BRUCE T AMSBARY
 THE RIVERS SCHOOL 333 WINTER STREET
 WESTON, MA 02493
 (781) 235-9300

Part VIII Statement of Revenue

		(A) Total Revenue	(B) Related or Exempt Function Revenue	(C) Unrelated Business Revenue	(D) Revenue Excluded from Tax under IRC 512, 513, or 514	
Contributions, gifts, grants and other similar amounts	1a Federated campaigns . . . 1a					
	b Membership dues					
	1b					
	c Fundraising events					
	1c					
	d Related organizations . . . 1d					
	e Government grants (contributions) 1e					
	f All other contributions, gifts, grants, and similar amounts not included above 1,905,569 1f	1,905,569				
	g Noncash contributions included in lines 1a-1f \$ 409,420	409,420				
h Total (Add lines 1a-1f)	1,905,569					
Program Service Revenue	2a TUITION INCOME		900,099	13,348,188	13,348,188	
	b MUSIC SCHOOL		900,099	1,870,968	1,870,968	
	c SUMMER CAMPS		900,099	1,741,970	1,741,970	
	d SCHOOL ACTIVITIES		900,099	987,353	987,353	
	e					
	f All other program service revenue					
	g Total. Add lines 2a-2f					
	▶ \$ 17,948,479					
Other Revenue	3 Investment income (including dividends, interest other similar amounts)			211,617		211,617
	4 Income from investment of tax-exempt bond proceeds					
	5 Royalties					
	6a Gross Rents	(i) Real	82,337			
		(ii) Personal				
		b Less rental expenses	73,833			
		c Rental income or (loss)	8,504			
	d Net rental income or (loss)		8,504			8,504
	7a Gross amount from sales of assets other than inventory	(i) Securities	2,217,631			
		(ii) Other				
		b Less cost or other basis and sales expenses	2,656,660			
		c Gain or (loss)	-439,029			
	d Net gain or (loss)		-439,029	-439,029		
	8a Gross income from fundraising events (not including \$ 238,869 of contributions reported on line 1c) See Part IV, line 18 Attach Schedule G if total exceeds \$15,000 a					41,789
		b Less direct expenses b				106,849
c Net income or (loss) from fundraising events			132,020	132,020		
9a Gross income from gaming activities See part IV, line 19 Complete Schedule G if total exceeds \$15,000 a						
	b Less direct expenses b					
	c Net income or (loss) from gaming activities					
10a Gross sales of inventory, less returns and allowances a		339,963				
	b Less cost of goods sold b	298,444				
	c Net income or (loss) from sales of inventory		41,519	41,519		
Miscellaneous Revenue		Business Code				
11a ATHLETIC FACILITY RENT		713,990	160,927		160,927	
	b MISC INCOME	900,099	23,045	23,045		
	c INSURANCE REFUND	900,099	19,540	19,540		
	d All other revenue _____		17,959	17,959		
	e Total. Add lines 11a-11d					
\$ 221,471						
12 Total Revenue. Add lines 1h, 2g, 3, 4, 5, 6d, 7d, 8c, 9c, 10c, and 11e		20,030,150	17,743,533	160,927	220,121	

Part IX Statement of Functional Expenses

**Section 501(c)(3) and 501(c)(4) organizations must complete all columns.
All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).**

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.		(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the U S See Part IV, line 21				
2	Grants and other assistance to individuals in the U S See Part IV, line 22	2,700,376	2,700,376		
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	604,108		604,108	
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	9,126,682	7,706,831		519,324
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	548,742	411,557	82,311	54,874
9	Other employee benefits	707,635	530,726	106,145	70,764
10	Payroll taxes	699,672	524,754	104,951	69,967
11	Fees for services (non-employees)				
a	Management				
b	Legal	15,145		15,145	
c	Accounting	48,200		48,200	
d	Lobbying				
e	Professional fundraising See Part IV, line 17	22,532			22,532
f	Investment management fees	19,328		19,328	
g	Other				
12	Advertising and promotion	37,401	35,742	995	664
13	Office expenses	109,810	58,875	43,084	7,851
14	Information technology	191,726	143,794	28,759	19,173
15	Royalties				
16	Occupancy				
17	Travel	25,403	399	25,004	
18	Payments of travel or entertainment expenses for any Federal, state or local public officials				
19	Conferences, conventions and meetings	64,996		64,996	
20	Interest	727,883	727,883		
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	1,679,426	1,595,455	83,971	
23	Insurance	173,513	164,837	8,676	
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 below)				
a	OTHER SCHOOL ACTIVITIES	832,788	832,788		
b	REPAIRS & MAINTENANCE	541,851	514,758	27,093	
c	LUNCH PROGRAM	438,424	438,424		
d	DAYCAMP EXPENSES	405,088	405,088		
e	ATHLETIC DEPT	365,880	365,880		
f	All other expenses	1,505,963	1,232,829	136,346	136,788
25	Total functional expenses. Add lines 1 through 24f	21,592,572	18,390,996	2,299,639	901,937
26	Joint Costs. Check <input type="checkbox"/> 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				

Part X Balance Sheet

		(A)		(B)
		Beginning of year		End of year
Assets	1 Cash—non-interest-bearing	141,462	1	54,743
	2 Savings and temporary cash investments	5,063,307	2	5,607,290
	3 Pledges and grants receivable, net	2,904,648	3	1,834,644
	4 Accounts receivable, net	64,301	4	60,064
	5 Receivables from current and former officers, directors, trustees, key employees or other related parties <i>Complete Part II of Schedule L</i>		5	
	6 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) <i>Complete Part II of Schedule L</i>		6	
	7 Notes and loans receivable, net	52,313	7	52,313
	8 Inventories for sale or use	117,204	8	80,040
	9 Prepaid expenses and deferred charges	387,918	9	318,019
	10a Land, buildings, and equipment cost basis			
		10a 42,875,374		
	b Less accumulated depreciation <i>Complete Part VI of Schedule D</i>			
		10b 15,145,716	28,800,463	10c 27,729,658
	11 Investments—publicly traded securities	7,655,094	11	5,288,571
	12 Investments—other securities See Part IV, line 11 <i>Complete Part VII of Schedule D</i>	9,977,965	12	9,438,367
	13 Investments—program-related See Part IV, line 11 <i>Complete Part VIII of Schedule D</i>		13	
14 Intangible assets		14		
15 Other assets See Part IV, line 11 <i>Complete Part IX of Schedule D</i>	25,472	15	251,902	
16 Total assets. Add lines 1 through 15 (must equal line 34)	55,190,147	16	50,715,611	
Liabilities	17 Accounts payable and accrued expenses	758,820	17	842,194
	18 Grants payable		18	
	19 Deferred revenue	6,484,562	19	6,823,546
	20 Tax-exempt bond liabilities	14,000,000	20	13,640,000
	21 Escrow account liability <i>Complete Part IV of Schedule D</i>		21	
	22 Payable to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons <i>Complete Part II of Schedule L</i>		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable		24	
	25 Other liabilities <i>Complete Part X of Schedule D</i>	800,117	25	1,620,117
	26 Total liabilities. Add lines 17 through 25	22,043,499	26	22,925,857
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	23,077,391	27	18,973,678
	28 Temporarily restricted net assets	5,258,403	28	3,806,629
	29 Permanently restricted net assets	4,810,854	29	5,009,447
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
33 Total net assets or fund balances	33,146,648	33	27,789,754	
34 Total liabilities and net assets/fund balances	55,190,147	34	50,715,611	

Part XI Financial Statements and Reporting

		Yes	No
1	Accounting method used to prepare the Form 990 <input type="checkbox"/> cash <input checked="" type="checkbox"/> accrual <input type="checkbox"/> other		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		No
2b	Were the organization's financial statements audited by an independent accountant?	Yes	
2c	If "Yes" to lines 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?	Yes	
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?		No
3b	If "Yes," did the organization undergo the required audit or audits?		

SCHEDULE A
(Form 990 or 990EZ)

Public Charity Status and Public Support

OMB No 1545-0047

2008

Department of the Treasury
Internal Revenue Service

To be completed by all section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts.
Attach to Form 990 or Form 990-EZ. See separate instructions.

Open to Public Inspection

Name of the organization
THE RIVERS SCHOOL CORPORATION

Employer identification number

04-2104457

Part I Reason for Public Charity Status (to be completed by all organizations) (See Instructions)

The organization is not a private foundation because it is (Please check only **one** organization)

- 1 A church, convention of churches, or association of churches described in **Section 170(b)(1)(A)(i)**.
- 2 A school described in **Section 170(b)(1)(A)(ii)**. (Attach Schedule E)
- 3 A hospital or a cooperative hospital service organization described in **Section 170(b)(1)(A)(iii)**. (Attach Schedule H)
- 4 A medical research organization operated in conjunction with a hospital described in **Section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state _____
- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **Section 170(b)(1)(A)(iv)**. (Complete Part II)
- 6 A federal, state, or local government or governmental unit described in **Section 170(b)(1)(A)(v)**.
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **Section 170(b)(1)(A)(vi)** (Complete Part II)
- 8 A community trust described in **Section 170(b)(1)(A)(vi)** (Complete Part II)
- 9 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See **Section 509(a)(2)**. (Complete Part III)
- 10 An organization organized and operated exclusively to test for public safety See **Section 509(a)(4)**. (See instructions)
- 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See **Section 509(a)(3)**. Check the box that describes the type of supporting organization and complete lines 11e through 11h
 a Type I b Type II c Type III - Functionally Integrated d Type III - Other
- e By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2)
- f If the organization received a written determination from the IRS that it is a Type I, Type II or Type III supporting organization, check this box
- g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

	Yes	No
11g(i)		
11g(ii)		
11g(iii)		

- (i) a person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the the supported organization?
- (ii) a family member of a person described in (i) above?
- (iii) a 35% controlled entity of a person described in (i) or (ii) above?

h Provide the following information about the organizations the organization supports

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

Part II Support Schedule for Organizations Described in IRC 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.)

Public Support

Calendar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add line 1-3						
5 The portion of total contribution by each person (other than a government unit or publicly supported organization) included on line 1 that exceed 2% of the amount shown on line 11, column (f)						
6 Public Support subtract line 5 from line 4						

Total Support

Calendar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
7 Amounts from line 4						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
11 Total Support (Add lines 7 through 10)						
12 Gross receipts from related activities, etc (See instructions)					12	
13 First Five Years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here						<input type="checkbox"/>

Computation of Public Support Percentage

14 Public Support Percentage for 2008 (line 6 column (f) divided by line 11 column (f))	14	
15 Public Support Percentage for 2007 Schedule A, Part IV-A, line 26f	15	
16a 33 1/3% Test - 2008. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
b 33 1/3% Test - 2007. If the organization did not check the 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		<input type="checkbox"/>
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		<input type="checkbox"/>
b 10% Facts and Circumstances Test - 2007. If the organization did not check a box on line 13, 16a, 16b, or 17a and line 15 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts and circumstances" test The organization qualifies as a publicly supported organization		<input type="checkbox"/>
18 Private Foundation. If the organization did not check the box on line 13, 16a, 16b, 17a or 17b, check this box and see instructions		<input type="checkbox"/>

Part III Support Schedule for Organizations Described in IRC 509(a)(2)

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

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total Add lines 1-5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the total of lines 9, 10c, 11, and 12 for the year or \$5,000						
c Total of lines 7a and 7b						
8 Public Support (Subtract line 7c from line 6)						

Total Support

Calendar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after 30 June, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
13 Total Support (Add lines 9, 10c, 11 and 12)						
14 First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here <input type="checkbox"/>						

Computation of Public Support Percentage

15 Public Support Percentage for 2008 (line 8 column (f) divided by line 13 column (f))	15	
16 Public Support Percentage for 2007 Schedule A, Part IV-A, line 27g	16	

Computation of Investment Income Percentage

17 Investment Income Percentage for 2008 (line 10c column (f) divided by line 13 column (f))	17	
18 Investment Income Percentage from 2007 Schedule A, Part IV-A, line 27h	18	

- 19a 33 1/3% Tests - 2008.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization
- b 33 1/3% Tests - 2007.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization
- 20 Private Foundation** If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions

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

Facts and Circumstances Test

SCHEDULE D (Form 990)

OMB No 1545-0047

Supplemental Financial Statements

2008

Open to Public Inspection

Attach to Form 990. To be completed by organizations that answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

Department of the Treasury Internal Revenue Service

Name of the organization THE RIVERS SCHOOL CORPORATION

Employer identification number 04-2104457

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

Table with 3 columns: Line number, (a) Donor advised funds, (b) Funds and other accounts. Includes rows for total number at end of year, aggregate contributions, aggregate grants, aggregate value, and questions about donor informed status.

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

Table with 3 columns: Line number, Description, Held at the End of the Year. Includes rows for purpose of easements, total number, acreage, and monitoring expenses.

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

Table with 3 columns: Line number, Description, Amount. Includes rows for art collections reported in revenue statement and balance sheet.

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

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

- a** Public exhibition
- b** Scholarly research
- c** Preservation for future generations
- d** Loan or exchange programs
- e** Other

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

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

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

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

b If "Yes," explain why in Part XIV and complete the following table

	Amount
1c Beginning balance	
1d Additions during the year	
1e Distributions during the year	
1f Ending balance	

2a Did the organization include an amount on Form 990, Part X, line 21? Yes No

b If "Yes," explain the arrangement in Part XIV

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

	(a) Current Year	(b) Prior Year	(c) Two Years Back	(d) Three Years Back	(e) Four Years Back
1a Beginning of year balance	5,223,355				
b Contributions	204,176				
c Investment earnings or losses	-406,083				
d Grants or scholarships					
e Other expenditures for facilities and programs	857				
f Administrative expenses					
g End of year balance	5,020,591				

2 Provide the estimated percentage of the year end balance held as

- a** Board designated or quasi-endowment ▶ 0.220 %
- b** Permanent endowment ▶ 99.780 %
- c** Term endowment ▶

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

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

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

Part VI Investments—Land, Buildings, and Equipment. See Form 990, Part X, line 10.

Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Depreciation	(d) Book value
1a Land		1,294,453		1,294,453
b Buildings		26,346,394	6,879,805	19,466,589
c Leasehold improvements				
d Equipment				
e Other		15,234,527	8,265,911	6,968,616
Total. Add lines 1a-1e (Column (d) should equal Form 990, Part X, column (B), line 10(c).)				27,729,658

Part XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	20,030,150
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	21,592,572
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	-1,562,422
4	Net unrealized gains (losses) on investments	4	-2,974,472
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	-820,000
9	Total adjustments (net) Add lines 4 - 8	9	-3,794,472
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	-5,356,894

Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

1	Total revenue, gains, and other support per audited financial statements	1	14,799,192
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains on investments	2a	-2,974,472
b	Donated services and use of facilities	2b	35,412
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIV)	2d	427,806
e	Add lines 2a through 2d	2e	-2,511,254
3	Subtract line 2e from line 1	3	17,310,446
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	19,328
b	Other (Describe in Part XIV)	4b	2,700,376
c	Add lines 4a and 4b	4c	2,719,704
5	Total Revenue Add lines 3 and 4c . (This should equal Form 990, Part I, line 12)	5	20,030,150

Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

1	Total expenses and losses per audited financial statements	1	19,336,086
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
a	Donated services and use of facilities	2a	35,412
b	Prior year adjustments	2b	
c	Losses reported on Form 990, Part IX, line 25	2c	
d	Other (Describe in Part XIV)	2d	427,806
e	Add lines 2a through 2d	2e	463,218
3	Subtract line 2e from line 1	3	18,872,868
4	Amounts included on Form 990, Part IX, line 25, but not on line 1 :		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	19,328
b	Other (Describe in Part XIV)	4b	2,700,376
c	Add lines 4a and 4b	4c	2,719,704
5	Total expenses Add lines 3 and 4c . (This should equal Form 990, Part I, line 18)	5	21,592,572

Part XIV Supplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part XIV, lines 1b and 2b, Part V, line 4, Part X, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b

Identifier	Return Reference	Explanation
Part III, Line 4		THE SCHOOL'S RECORDING COLLECTION CONTAINS ONE OF THE MOST EXTENSIVE COLLECTIONS OF OPERA RECORDINGS IN THE UNITED STATES THESE RECORDINGS, COMBINED WITH THOUSANDS OF OTHER INSTRUMENTAL AND VOCAL RECORDINGS WILL PROVIDE A HISTORICAL AND EDUCATIONAL LISTENING RESOURCE FOR STUDENTS AND FACULTY AT THE RIVERS SCHOOL CONSERVATORY AND THE SCHOOL
Part V, Line 4	Description of Intended Use of Endowment Funds	THE ENDOWMENT SUPPORTS THE EDUCATIONAL MISSION OF THE SCHOOL BY PROVIDING SUPPORT FOR FINANCIAL AID FOR STUDENTS, FACULTY RELATED EXPENSES, SCHOOL PROGRAMS, SCHOOL FACILITIES, AS WELL AS GENERAL SUPPORT FOR SCHOOL OPERATIONS

SCHEDULE E
(Form 990 or 990-EZ)

Schools

OMB No 1545-0047

2008

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Attach to Form 990 or Form 990-EZ. To be completed by organizations that answer "Yes" to Form 990, Part IV, line 13, or Form 990-EZ, Part VI, line 48.

Name of the organization

THE RIVERS SCHOOL CORPORATION

Employer identification number

04-2104457

		YES	NO
1	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?	Yes	
2	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	Yes	
3	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe. If "No," please explain. NOTICE OF NON-DISCRIMINATION POLICY AS TO STUDENTS APPEARED IN THE BOSTON SUNDAY GLOBE ON DECEMBER 7, 2008	Yes	
4	Does the organization maintain the following?		
a	Records indicating the racial composition of the student body, faculty, and administrative staff?	Yes	
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	Yes	
c	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	Yes	
d	Copies of all material used by the organization or on its behalf to solicit contributions? If you answered "No" to any of the above, please explain (If you need more space, attach a separate statement)	Yes	
5	Does the organization discriminate by race in any way with respect to		
a	Students' rights or privileges?		No
b	Admissions policies?		No
c	Employment of faculty or administrative staff?		No
d	Scholarships or other financial assistance?		No
e	Educational policies?		No
f	Use of facilities?		No
g	Athletic programs?		No
h	Other extracurricular activities? If you answered "Yes" to any of the above, please explain (If you need more space, attach a separate statement)		No
6a	Does the organization receive any financial aid or assistance from a governmental agency?		No
b	Has the organization's right to such aid ever been revoked or suspended? If you answered "Yes" to either 6a or b, please explain using an attached statement		No
7	Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05 of Rev Proc 75-50, 1975-2 C B 587, covering racial nondiscrimination? If "No," attach an explanation	Yes	

**SCHEDULE G
(Form 990 or 990-EZ)**

**Supplemental Information Regarding
Fundraising or Gaming Activities**

OMB No 1545-0047

2008

**Open to Public
Inspection**

Department of the Treasury
Internal Revenue Service

▶ Attach to Form 990 or Form 990-EZ. Must be completed by organizations that answer "Yes" to Form 990, Part IV, lines 17, 18, or 19, and by organizations that enter more than \$15,000 on Form 990-EZ, line 6a.

Name of the organization
THE RIVERS SCHOOL CORPORATION

Employer identification number

04-2104457

Part I Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17.

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

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

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

b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. Form 990-EZ filers are not required to complete this table.

(i) Name of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
RUSSELL BUCKLEY	CAP CAMPAIGN FEASABILITY STUDY & CONSULT TO MAJOR GIFT COMM		No	0	22,532	0
Total						

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

MA

Part II Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 on Form 990-EZ, line 6a. List events with gross receipts greater than \$5,000.

		(a) Event #1	(b) Event #2	(c) Other Events	(d) Total Events
		PARENT LEAGUE AUCTION (event type)	GOLF TOURNAMENT (event type)	5 (total number)	(Add col (a) through col (c))
Revenue	1 Gross receipts	157,111	61,991	61,556	280,658
	2 Less Charitable contributions	37,348	1,131	3,310	41,789
	3 Gross revenue (line 1 minus line 2)	119,763	60,860	58,246	238,869
Direct Expenses	4 Cash Prizes		1,980		1,980
	5 Non-cash Prizes		10,980		10,980
	6 Rent/Facility costs				
	7 Other direct expenses	23,345	19,643	50,901	93,889
	8 Direct expense summary Add lines 4 through 7 in column (d) ▶				106,849
9 Net income summary Combine lines 3 and 8 in column (d) ▶				132,020	

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

		(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (Add col (a) through col (c))
Revenue	1 Gross revenue				
Direct Expenses	2 Cash prizes				
	3 Non-cash prizes				
	4 Rent/facility costs				
	5 Other direct expenses				
6 Volunteer labor	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No		
7 Direct expense summary Add lines 2 through 5 in column (d) ▶					
8 Net gaming income summary Combine lines 1 and 7 in column (d) ▶					

		Yes	No
9	Enter the state(s) in which the organization operates gaming activities _____		
a	Is the organization licensed to operate gaming activities in each of these states?	9a	
b	If "No," Explain _____ _____		
10a	Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?	10a	
b	If "Yes," Explain _____ _____		
11	Does the organization operate gaming activities with nonmembers?	11	
12	Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?	12	

13 Indicate the percentage of gaming activity operated in

- a** The organization's facility **13a**
- b** An outside facility **13b**

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

Name ▶ _____

Address ▶ _____

15a Does the organization have a contract with a third party from whom the organization receives gaming revenue?

- b** If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ _____ and the amount of gaming revenue retained by the third party ▶ \$ _____
- c** If "Yes," enter name and address

Name ▶ _____

Address ▶ _____

16 Gaming manager information

Name ▶ _____

Gaming manager compensation ▶ \$ _____

Description of services provided ▶ _____

Director/officer Employee Independent contractor

17 Mandatory distributions

- a** Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?
- b** Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ _____

	Yes	No
13a		
13b		
14		
15a		
16		
17a		
17b		

Schedule I (Form 990)

OMB No 1545-0047

Grants and Other Assistance to Organizations, Governments and Individuals in the U.S.

2008

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

Name of the organization

THE RIVERS SCHOOL CORPORATION

Employer identification number

04-2104457

Part I General Information on Grants and Assistance

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance...
2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 21 for any recipient that received more than \$5,000.

Table with 8 columns: (a) Name and address of organization or government, (b) EIN, (c) IRC section if applicable, (d) Amount of cash grant, (e) Amount of non-cash assistance, (f) Method of valuation, (g) Description of non-cash assistance, (h) Purpose of grant or assistance.

- 2 Enter total number of section 501(c)(3) and government organizations
3 Enter total number of other organizations

Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.
Use Schedule I-1 (Form 990) if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
FINANCIAL AID	110	2,478,500			
TUITION REMISSION	7	211,876			
SCHOLARSHIP	1	10,000			

Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.
See Additional Data Table

Identifier	Return Reference	Explanation
Procedure for Monitoring Grants in the U S	Part I, Line 2	Schedule I, Part I, Line 2 THE SCHOOL AWARDS FINANCIAL AID BASED UPON FINANCIAL NEED IN AN OBJECTIVE AND NON-DISCRIMINATORY MANNER THE SCHOOL MAINTAINS FILES ON EACH SUCCESSFUL CANDIDATE FOR NEED BASED FINANCIAL AID WHICH INCLUDES A COMPLETED "PARENT FINANCIAL STATEMENT"(PFS) PROVIDED BY THE SCHOOL AND STUDENT SERVICES FOR FINANCIAL AID (SSS) FORMS AND COPIES OF THE MOST RECENT FILING OF THE PARENTS' 1040 FEDERAL TAX RETURN THE SCHOOL USES THE INFORMATION PROVIDED BY THE ANALYSIS OF THE PFS BY SSS TO HELP MAKE AWARD DETERMINATIONS AWARDS ARE ALSO ADJUSTED, AS NECESSARY, TO REFLECT SUPPLEMENTAL INFORMATION PROVIDED BY THE PARENTS

Schedule J
(Form 990)

Compensation Information

OMB No 1545-0047

2008

Open to Public Inspection

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

▶ **Attach to Form 990. To be completed by organizations that answered "Yes" to Form 990, Part IV, line 23.**

Department of the Treasury
Internal Revenue Service

Name of the organization
THE RIVERS SCHOOL CORPORATION

Employer identification number

04-2104457

Part I Questions Regarding Compensation

	Yes	No								
<p>1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.</p> <table border="0"> <tr> <td><input type="checkbox"/> First class or charter travel</td> <td><input checked="" type="checkbox"/> Housing allowance or residence for personal use</td> </tr> <tr> <td><input type="checkbox"/> Travel for companions</td> <td><input type="checkbox"/> Payments for business use of personal residence</td> </tr> <tr> <td><input type="checkbox"/> Tax indemnification and gross-up payments</td> <td><input type="checkbox"/> Health or social club dues or initiation fees</td> </tr> <tr> <td><input checked="" type="checkbox"/> Discretionary spending account</td> <td><input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)</td> </tr> </table>	<input type="checkbox"/> First class or charter travel	<input checked="" type="checkbox"/> Housing allowance or residence for personal use	<input type="checkbox"/> Travel for companions	<input type="checkbox"/> Payments for business use of personal residence	<input type="checkbox"/> Tax indemnification and gross-up payments	<input type="checkbox"/> Health or social club dues or initiation fees	<input checked="" type="checkbox"/> Discretionary spending account	<input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)		
<input type="checkbox"/> First class or charter travel	<input checked="" type="checkbox"/> Housing allowance or residence for personal use									
<input type="checkbox"/> Travel for companions	<input type="checkbox"/> Payments for business use of personal residence									
<input type="checkbox"/> Tax indemnification and gross-up payments	<input type="checkbox"/> Health or social club dues or initiation fees									
<input checked="" type="checkbox"/> Discretionary spending account	<input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)									
<p>b If line 1a is checked, did the organization follow a written policy regarding payment or reimbursement or provision of all the expenses described above? If "No," complete Part III to explain.</p>	Yes									
<p>2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?</p>	Yes									
<p>3 Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director. Check all that apply.</p> <table border="0"> <tr> <td><input checked="" type="checkbox"/> Compensation committee</td> <td><input checked="" type="checkbox"/> Written employment contract</td> </tr> <tr> <td><input type="checkbox"/> Independent compensation consultant</td> <td><input checked="" type="checkbox"/> Compensation survey or study</td> </tr> <tr> <td><input checked="" type="checkbox"/> Form 990 of other organizations</td> <td><input checked="" type="checkbox"/> Approval by the board or compensation committee</td> </tr> </table>	<input checked="" type="checkbox"/> Compensation committee	<input checked="" type="checkbox"/> Written employment contract	<input type="checkbox"/> Independent compensation consultant	<input checked="" type="checkbox"/> Compensation survey or study	<input checked="" type="checkbox"/> Form 990 of other organizations	<input checked="" type="checkbox"/> Approval by the board or compensation committee				
<input checked="" type="checkbox"/> Compensation committee	<input checked="" type="checkbox"/> Written employment contract									
<input type="checkbox"/> Independent compensation consultant	<input checked="" type="checkbox"/> Compensation survey or study									
<input checked="" type="checkbox"/> Form 990 of other organizations	<input checked="" type="checkbox"/> Approval by the board or compensation committee									
<p>4 During the year, did any person listed in Form 990, Part VII, Section A, line 1a:</p> <p>a Receive a severance payment or change of control payment?</p>		No								
<p>b Participate in, or receive payment from, a supplemental nonqualified retirement plan?</p>		No								
<p>c Participate in, or receive payment from, an equity-based compensation arrangement?</p> <p>If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.</p>		No								
<p>501(c)(3) and 501(c)(4) organizations only must complete lines 5-8.</p>										
<p>5 For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:</p> <p>a The organization?</p>		No								
<p>b Any related organization?</p> <p>If "Yes," to line 5a or 5b, describe in Part III.</p>		No								
<p>6 For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:</p> <p>a The organization?</p>		No								
<p>b Any related organization?</p> <p>If "Yes," to line 6a or 6b, describe in Part III.</p>		No								
<p>7 For persons listed in form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III.</p>		No								
<p>8 Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regs. section 53.4958-4(a)(3)? If "Yes," describe in Part III.</p>		No								

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space needed.

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

Note. The sum of columns (B)(i)-(iii) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a

(A) Name		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other compensation				
THOMAS P OLVERSON	(i) (ii)	311,196				38,523	349,719	135,200
BRUCE T AMSBARY	(i) (ii)	162,140				27,477	189,617	85,991
JANICE H HICINBOTHEM	(i) (ii)	150,203				26,004	176,207	78,824
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

SCHEDULE M (Form 990)

Non-Cash Contributions

OMB No 1545-0047

2008

Open to Public Inspection

To be completed by organizations that answered "Yes" on Form 990, Part IV, lines 29 or 30. Attach to Form 990

Department of the Treasury Internal Revenue Service

Name of the organization THE RIVERS SCHOOL CORPORATION

Employer identification number

04-2104457

Part I Types of Property

Table with 4 columns: (a) Check if applicable, (b) Number of Contributions, (c) Revenues reported on Form 990, Part VIII, line 1g, (d) Method of determining revenues. Rows include Art, Books, Cars, Securities, Real estate, etc.

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

29 1

Table with 3 columns: Question, Yes, No. Rows include 30a, 31, 32a, 33 regarding contribution policies and reporting.

SCHEDULE O
(Form 990)

Supplemental Information to Form 990

2008

Open to Public Inspection

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.

Name of the organization
THE RIVERS SCHOOL CORPORATION

Employer identification number

04-2104457

Identifier	Return Reference	Explanation
Form 990, Part III, line 4d	Other Program Services	OTHER SCHOOL PROGRAMS - VARIOUS EXTRA - CURRICULAR ACTIVITIES Expenses \$ 1389912 including grants of \$ 0 Revenue \$ 987353

Identifier	Return Reference	Explanation
Form 990, Part VI, Section A, line 4		THE SCHOOL CREATED A DIVERSITY COMMITTEE THAT WILL OVERSEE AND STUDY THE SCHOOL'S DIVERSITY EFFORTS AND MAKE RECOMMENDATIONS TO THE BOARD OF TRUSTEES ON DIVERSITY GOALS AND INITIATIVES

Identifier	Return Reference	Explanation
Form 990, Part VI, Section A, line 10		THE FORM 990 IS ELECTRONICALLY DISTRIBUTED TO ALL TRUSTEES PRIOR TO THE BOARD OF TRUSTEES MEETING THE FORM 990 IS APPROVED OR RETURNED FOR ADDITIONAL PREPARATION BY THE TRUSTEES AT THE SUBSEQUENT BOARD MEETING

Identifier	Return Reference	Explanation
Form 990, Part VI, Section B, line 12c		THE SCHOOL ANNUALLY DISTRIBUTES TO ALL TRUSTEES, KEY EMPLOYEES AND OTHER COMMITTEE MEMBERS AN ELECTRONIC CONFLICT OF INTEREST SURVEY/QUESTIONNAIRE THE RETURNED QUESTIONNAIRES ARE REVIEWED AND COMPILED BY THE SCHOOL'S FINANCIAL OFFICE AND THE RESULTS ARE PRESENTED TO THE SCHOOL'S AUDIT COMMITTEE ANY ISSUES FOUND THAT THE AUDIT COMMITTEE BELIEVES ARE OF A CONCERN ARE FORWARDED TO THE SCHOOL'S COMMITTEE ON TRUSTEES FOR FURTHER ACTION THE COMPLETED QUESTIONNAIRES ARE MAINTAINED AS PART OF THE SCHOOL'S CORPORATE RECORDS BY THE ASSISTANT CLERK

Identifier	Return Reference	Explanation
Form 990, Part VI, Section B, line 15		THE EXECUTIVE COMMITTEE OF THE BOARD OF TRUSTEES, COMPRISED OF INDEPENDENT MEMBERS OF THE BOARD, MAKES UP THE SCHOOL'S COMPENSATION COMMITTEE THE COMMITTEE RELIES ON COMPARATIVE DATA FROM SURVEYS CONDUCTED BY THE NATIONAL ASSOCIATION OF INDEPENDENT SCHOOLS AND COMPARABLE DATA PROVIDED BY OTHER SCHOOLS ON THEIR IRS FORM 990 IN SETTING THE SALARY FOR THE HEAD OF SCHOOLS DOCUMENTATION OF THE BASIS OF DETERMINATION OF THE SALARY IS KEPT IN MINUTES PREPARED BY THE FIRST VICE PRESIDENT OF THE BOARD OF TRUSTEES THE EXECUTIVE COMMITTEE HAS DELEGATED THE AUTHORIZATION OF THE SALARIES OF ALL EMPLOYEES, INCLUDING KEY EMPLOYEES, TO THE HEAD OF SCHOOLS AND IS BASED ON COMPARABLE INFORMATION OBTAINED FROM SOURCES SUCH AS THE IRS FORM 990 OF OTHER SCHOOLS

Identifier	Return Reference	Explanation
Form 990, Part VI, Section C, line 19		THE SCHOOL RELIES ON THE WEBSITE OF THE MASSACHUSETTS' ATTORNEY GENERAL'S OFFICE OF PUBLIC CHARITIES DIVISION IN ORDER FOR THE PUBLIC TO ACCESS A COPY OF THE SCHOOL'S AUDITED FINANCIAL STATEMENTS THE SCHOOL RELIES ON THE WEBSITE OF THE MASSACHUSETTS' SECRETARY OF STATE'S OFFICE FOR PUBLIC ACCESS TO THE SCHOOL'S GOVERNING DOCUMENTS THE SCHOOL'S CONFLICT OF INTEREST POLICY IS NOT MADE AVAILABLE TO THE PUBLIC

Identifier	Return Reference	Explanation
FORM 990, PART XI, LINE 2C		THE BOARD OF TRUSTEES HAS AN AUDIT COMMITTEE THAT IS COMPRISED OF 3 MEMBERS, ONE OF WHICH IS A TRUSTEE, THAT IS RESPONSIBLE FOR THE SELECTION OF AN INDEPENDENT ACCOUNTING FIRM TO CONDUCT THE ANNUAL AUDIT, FOR MEETING WITH THE SELECTED AUDITORS PRIOR TO AND AT THE COMPLETION OF THE AUDIT, AND FOR REVIEWING ACCOUNTING POLICIES AND PROCEDURES

Additional Data

Software ID:
Software Version:
EIN: 04-2104457
Name: THE RIVERS SCHOOL CORPORATION

Form 990, Part VII - Section Aaa

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual Trustee or Director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Roy S MacDowell Jr , BOARD PRESIDENT	5 00	X		X				0	0	0
Clinton P Harris , BOARD TREASURER	3 00	X		X				0	0	0
THomas L Lyons , BOARD CLERK	3 00	X		X				0	0	0
Robert J Davis , BOARD VICE PRESIDENT	1 50	X		X				0	0	0
GEOFFREY S REHNERT , BOARD VICE PRESIDENT	1 50	X		X				0	0	0
MICHAEL A Bell , Trustee	1 50	X						0	0	0
BENJAMIN BLOOMSTONE , TRUstee	1 50	X						0	0	0
Robert E Buonato , Trustee	3 00	X						0	0	0
KAREN L DANIELS , Trustee	1 50	X						0	0	0
HOWard G Davis , Trustee	1 50	X						0	0	0
T Christopher Donnelly , TRUstee	1 50	X						0	0	0
MARia D Furman , Trustee	1 50	X						0	0	0
Andrew N Jaffe , Trustee	1 50	X						0	0	0
DANiel A Kraft , Trustee	1 50	X						0	0	0
Frank H Laukien , TRUstee	1 50	X						0	0	0
Deborah H McAneny , TRUstee	2 00	X						0	0	0
Michael E McGuinness , Trustee	1 50	X						0	0	0
PATRICIA A MORDAS , Trustee	1 50	X						0	0	0
James C Mullen , Trustee	1 50	X						0	0	0
Alan D Rose JR , Trustee	1 50	X						0	0	0
SOLOMON D ROTH , Trustee	3 00	X						0	0	0
LAURIE SCHOEN , Trustee	1 50	X						0	0	0
Mark S Schuster , Trustee	1 50	X						0	0	0
Steven J Snider , Trustee	1 50	X						0	0	0
Michael P Stansky , Trustee	1 50	X						0	0	0
Roger E Tackeff , Trustee	1 50	X						0	0	0
Car von Rumohr , Trustee	3 00	X						0	0	0
Joan C Walter , Clerk	3 00	X		X				0	0	0
THOMAS P OLVERSON , HEAD OF School	60 00			X				311,196	0	38,523
BRUCE T AMSBARY , DIR FIN & OPER/ASST TREA	60 00			X				162,140	0	27,477

Form 990, Part VII - Section Aaa

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual Trustee or Director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
JEAN I MOUZAR , ASSIST CLRK/ADMIN ASST H	37 50			X				57,795	0	10,134
JANICE H HICINBOTHEN , DIR OF DEVEL	55 00				X			150,203	0	26,004
JAMES M LONG , ASST HEAD SCH	50 00					X		110,301	0	22,282

Form 990, Part I, Line 1 - Briefly describe the Organization's mission or most significant activities:

THE RIVERS SCHOOL IS A COED COLLEGE PREPARATORY DAY SCHOOL FOR GRADES 6 THROUGH 12. RIVERS CHALLENGES STUDENTS TO ATTAIN THEIR HIGHEST LEVELS OF EXCELLENCE IN ACADEMICS, ARTS, AND ATHLETICS. WE SET HIGH STANDARDS AND EXPECT STUDENTS TO PARTICIPATE ACTIVELY IN THEIR LEARNING. WE CULTIVATE A CARING, RESPECTFUL, AND COLLABORATIVE ENVIRONMENT THAT ENCOURAGES STUDENT PERFORMANCE, INCLUDING DEMONSTRATION OF LOGICAL THOUGHT, INFORMED AND ARTICULATE VOICE, CREATIVE VISION, AND INTEGRITY. RIVERS IS DEDICATED TO PREPARING ITS STUDENTS FOR LEADERSHIP IN A WORLD THAT NEEDS THEIR TALENTS, IMAGINATION, INTELLECT, AND COMPASSION.

Form 990, Part III, Line 1 - Briefly describe the organization's mission:

THE RIVERS SCHOOL IS A COED COLLEGE PREPARATORY DAY SCHOOL FOR GRADES 6 THROUGH 12. RIVERS CHALLENGES STUDENTS TO ATTAIN THEIR HIGHEST LEVELS OF EXCELLENCE IN ACADEMICS, ARTS, AND ATHLETICS. WE SET HIGH STANDARDS AND EXPECT STUDENTS TO PARTICIPATE ACTIVELY IN THEIR LEARNING. WE CULTIVATE A CARING, RESPECTFUL, AND COLLABORATIVE ENVIRONMENT THAT ENCOURAGES STUDENT PERFORMANCE, INCLUDING DEMONSTRATION OF LOGICAL THOUGHT, INFORMED AND ARTICULATE VOICE, CREATIVE VISION, AND INTEGRITY. RIVERS IS DEDICATED TO PREPARING ITS STUDENTS FOR LEADERSHIP IN A WORLD THAT NEEDS THEIR TALENTS, IMAGINATION, INTELLECT, AND COMPASSION.