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DLN: 93493133041120

Form **990**

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)

2008

OMB No 1545-0047

Open to Public

Department of the Treasury
Internal Revenue Service

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

A Fo	r the :	2008 ca	lendar yea	r, or tax year beginning 07-0	1-2008 and ending 06-30-200	9		· · · · · · · · · · · · · · · · · · ·	
B Che	eck if a	pplicable	Please	C Name of organization	dation		D Employer ide	entification number	
┌ Add	iress ch	nange	use IRS	Red River Human Services Four	uation		45-035381	4	
┌ Nai	ne cha	nge	label or print or	Doing Business As			E Telephone nu	ımber	
Init	ial retu	rn	type. See Specific	Novel or and storet (as B.O. have	for all and below the state of all a	\	(701) 235-	0971	
_	minatio		Instruc- tions.	2506 35th Avenue South	ıf mail is not delivered to street addre	ess) Room/suit	G Gross receip	ts \$ 11,454,140	
_	ended		tions.	City or town state or country a	nd ZID + 4				
_				City or town, state or country, a Fargo, ND 581048897	na ZIP + 4				
J App	olication	pending							
				ne and address of Principal O ewberger	fficer		his a group return		
				Sth Avenue South		affil	ıates?	ΓYes Γ Nο	
				ND 581048897		H(b) Are	all affiliates include	ed?	
I Ta	x-exem	npt status	✓ 501(c)	(3) ◀ (insert no)	(1) or 527			See instructions)	
J W	eb sit	e: 🕨 www	v rrhsf org			H(c) Gro	oup Exemption Nu	mber ►	
К Тур	e of org	janization	Corporat	ion trust association othe	r I	L Year of I	Formation 1979 M	State of legal domicile ND	
Pa	rt I	Sumr	marv						
	1			e organization's mission or m	ost significant activities				
ቋ		We are o	dedicated t	o affirming human worth, righ	its, and dignity by providing se	rvices to pe	ople with disabiliti	es, which enhance the	
₩		quality o	of their live	s, and enable them to live, w	ork, and develop relationships	within their	communities		
Governance	١,	Charlet		.6.L		. 	250/ -5-5-	_	
λoκ			,		red its operations or disposed o				
	3		_		dy (Part VI, line 1a)			<u>12</u> 12	
es				nployees (Part V, line 2a)	governing body (Part VI, line 1	· · ·	_	407	
Activities &				lunteers (estimate if necess			-	48	
달 당				·	art VIII, line 12, column (C)	_		0	
-	1			ness taxable income from Fo		7b	0		
					·	P	rior Year	Current Year	
	8	Contrib	outions and	d grants (Part VIII, line 1h)			99,838	214,130	
를	9	Progra	m service i	revenue (Part VIII, line 2g)		6,189,432	6,764,277		
Ravenu	10	Invest	ment incor	ne (Part VIII, column (A), lır		57,510	54,812		
<u> </u>	11	Other	revenue (P	art VIII, column (A), lines 5	, 6d, 8c, 9c, 10c, and 11e)		289,368	84,105	
	12		evenue—a	dd lines 8 through 11 (must e	equal Part VIII, column (A), lın	е	6,636,148	7,117,324	
	13	12) Grants	and simila	ar amounts paid (Part IX, coli	ımn (A.) lines 1 – 3.)		0,030,140	7,117,324	
	14			r for members (Part IX, colu					
	15		•	• • •	fits (Part IX, column (A), lines	5-			
Expenses		10)	,	, , ,			4,586,160	5,445,645	
<u>₹</u>	16a	Profess	sional fund	raising fees (Part IX, column	(A), line 11e)			0	
ਡੋ	ь	(Total fu	ındraısıng exj	penses, Part IX, column (D), line 25	; <u>98,934</u>)				
	17	Other	expenses (Part IX, column (A), lines 11	a-11d, 11f-24f)		1,628,349	1,498,789	
	18				l Part IX, line 25, column (A))		6,214,509	6,944,434	
. 07	19	Revenu	ue less exp	enses Subtract line 18 from	421,639 172				
8 0 9 0 10 0						Begin	ning of Year	End of Year	
SS et	20	Total a	ssets (Par	t X, line 16)			4,462,627	4,953,031	
Net Assets or Fund Balances	21	Total li	iabilities (F	Part X, line 26)			1,553,656	1,953,224	
	22			d balances Subtract line 21		2,908,971	2,999,807		
Pai	rt II		ature Blo						
					ed this return, including accompanying of preparer (other than officer) is base				
Plea	se	****	,	·		1	10-05-12		
Sign		Signa	ture of office	er	te				
Here	2		Newberger C						
		Туре	or print nam	e and title					
		Preparer's		HAFFEE CDA		Check If self-	Preparer's PTIN	(See Gen Inst)	
Paid		signature	I LISA C	HAFFEE CPA		seir- empolyed 🕨 🎵	-		
	arer's		me (or yours	EIDE BAILLY LLP	·	EIN			
Use (Only	ıf self-em address,	nployed), and ZIP + 4	4310 17TH AVE S PO BOX 254					
				FARGO, ND 581082545			Phone no 🕨 (7	01) 239-8500	
Mav	he IR	S discus	s this retu	· · · · · · · · · · · · · · · · · · ·	oove? (See instructions)			✓ Yes No	

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

1	Briefly describe the organization	on's mission			
		human worth, rights, and digni op relationships within their con		ith disabilities, which enhance the quality	of their lives, and enable
2	Did the organization und the prior Form 990 or 9		ogram services during the yea		Yes ✓ No
	If "Yes," describe these	new services on Schedul	ie O		
3	Did the organization cesservices?	ase conducting or make s	ıgnıfıcant changes ın how ıt co	onducts any program	Yes ✓ No
	If "Yes," describe these	changes on Schedule O			
4	Section 501(c)(3) and	(4) organizations and 494	each of the organization's three P (a)(1) trusts are required to or each program service repor	e largest program services by exp report the amount of grants and a ted	penses allocations to
4a	(Code) (Expenses \$ 6	5,271,554 including grants of \$) (Revenue \$	6,647,126)
			s to 135 people living in Intermediate provided leisure and recreational ser	e Care Facilities, Transitional Living Facili rvices to 403 people	ies, Congregate Care
4b	(Code) (Expenses \$) (Revenue \$)
	(0000	, (Enpended 4	monaumy grants or q	, (Norollas y	,
4c	(Code) (Expenses \$	including grants of \$) (Revenue \$)
4d	Other program service	es (Describe in Schedule	0)		
ru	(Expenses \$	•	grants of \$) (Revenue \$)
4e	Total program service			X, 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)? If "Yes," complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors? 🕏	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		No
4	Section 501(c)(3) organizations Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4	Yes	
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? 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 I	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		No
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		No
10	Did the organization hold assets in term, permanent,or quasi-endowments? If "Yes," complete Schedule D, Part V	10		No
11	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If "Yes," complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable	11	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? If "Yes," complete Schedule D, Parts XI, XII, and XIII.	12	Yes	
13	Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the U.S.?	14a		No
b	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 I	14b		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>	15		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? If "Yes," complete Schedule F, Part III	16		No
17	Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I	17		No
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		No
19	Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19	Yes	
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		No
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		No
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		No
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete Schedule J	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer questions 24b-24d and complete Schedule K. If "No," go to question 25	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
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		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section $501(c)(3)$ and $501(c)(4)$ organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
b	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		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? If "Yes," complete Schedule L, Part II	26		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? If "Yes," complete Schedule L, Part III	27		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			
а	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)? If "Yes," complete Schedule L, Part			
		28a		Νo
b	Have a family member who had a direct or indirect business relationship with the organization? If "Yes," complete Schedule L, Part IV	28b		No
С	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? If "Yes," complete Schedule L, Part IV.	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 🕏	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32		Νo
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</i> "Yes," complete Schedule R, Part I	33		No
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		No
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		No
36	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		Νo
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? If "Yes," complete Schedule R, Part VI	37		Νo

Pai	rt V Statements Regarding Other IRS Filings and Tax Compliance	ce				
					Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal					
	of U.S. Information Returns. Enter -0- if not applicable					
		1a	12			
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 t	to ven	dors and reportable			
	gaming (gambling) winnings to prize winners?	: •		1 c	Yes	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax					
	Statements filed for the calendar year ending with or within the year covered by this return	2a	407			
ь	If at least one is reported in 2a, did the organization file all required federal employr					
_	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file thi			2b	Yes	
3a	Did the organization have unrelated business gross income of \$1,000 or more during return?	ng the	year covered by this	3a		Νο
h	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Sch	edule i	。	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a s			- 50		
- 70	over, a financial account in a foreign country (such as a bank account, securities acacount)?			4a		Νο
ь	If "Yes," enter the name of the foreign country					
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1 , Re Financial Accounts.	eport o	f Foreign Bank and			
5a	Was the organization a party to a prohibited tax shelter transaction at any time duri	ng the	tax year?	5a		Νο
ь	Did any taxable party notify the organization that it was or is a party to a prohibited	tax sh	nelter transaction?	5b		Νο
_	If "Yes," to 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exemp	t Entit	ty Pegarding Probibited			
·	Tax Shelter Transaction?	•	· · ·	5с		
6a	Did the organization solicit any contributions that were not tax deductible?			6a		Νο
b	If "Yes," did the organization include with every solicitation an express statement to were not tax deductible?	hat su	ch contributions or gifts	6b		
7	Organizations that may receive deductible contributions under section 170(c).					
а	Did the organization provide goods or services in exchange for any quid pro quo commore?	ntrıbut	ion of \$75 or	7a		No
b	If "Yes," did the organization notify the donor of the value of the goods or services p	rovide	d?	7b		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal prope					
	file Form 8282?	1		7c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d				
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay	y prem	niums on a personal			
	benefit contract?	• •		7e		Νο
f	Did the organization, during the year, pay premiums, directly or indirectly, on a pers	onal b	enefit contract?	7f		Νο
g	For all contributions of qualified intellectual property, did the organization file Form	8899	as required?	7 g		
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization f	file a F	orm 1098-C as			
_	required?	• •		7h		
8	Section $501(c)(3)$ and other sponsoring organizations maintaining donor advised funds a supporting organizations. Did the supporting organization, or a fund maintained by a supporting organization of the supporting organization organizati					
	excess business holdings at any time during the year?			8		
9	Section $501(c)(3)$ and other sponsoring organizations maintaining donor advised funds.					
а	Did the organization make any taxable distributions under section 4966?			9a		
ь	Did the organization make a distribution to a donor, donor advisor, or related person	۱۶.		9b		
10	Section 501(c)(7) organizations. Enter					
а	Initiation fees and capital contributions included on Part VIII, line 12	10a				
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b				
11	Section 501(c)(12) organizations Enter					
	Gross income from members or shareholders					
		11a				
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	11b				
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 ii	n lieu d I	of Form 1041? I	12a		
Ь	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b				

Section A. Governing Body and Management

Yes

11

Νo

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

For each "Yes" response to lines 2-7 below, and for a "No" response to lines 8 or 9b below, describe the circumst

	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.			
1a	Enter the number of voting members of the governing body 1a 12			
b	Enter the number of voting members that are independent 1b 12			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		No
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		No
6	Does the organization have members or stockholders?	6	Yes	
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a	Yes	
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		Νo
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	the governing body?	8a	Yes	
Ь	each committee with authority to act on behalf of the governing body?	8b		No
9a	Does the organization have local chapters, branches, or affiliates?	9a	Yes	
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	Yes	
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	10	Yes	

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

Section B. Policies

			Yes	No
12a	Does the organization have a written conflict of interest policy? If "No", go to line 13 \cdot .	12a		Νο
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		
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		
13	Does the organization have a written whistleblower policy?	13		Νο
14	Does the organization have a written document retention and destruction policy?	14		Νο
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			
а	The organization's CEO, Executive Director, or top management official?	15a	Yes	
b	Other officers or key employees of the organization?	15b		Νo
	Describe the process in Schedule O			
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		Νο
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. Disclosure

- 17 List the States with which a copy of this Form 990 is required to be filed MN
- 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

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

Erıka Gomez 2506 35th Avenue South

Fargo, ND 58104

(701) 235-0971

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. Use Schedule J-2 if additional space is needed

- * List all of the organization's current officers, directors, trustees (whether individuals or organizations) and key employees 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) of more than \$100,000 from the organization and any related organizations
- * List all of the organization's former officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- * List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

Check this box if the organization did not compensate any officer, director, trustee or key employee (C) Position (check all that apply) (F) (E) (D) Estimated Highest compensat employee (B) Reportable Individual Trustee or Director Institutional Reportable amount of other Š Average compensation (A) compensation compensation hours from related Name and Title 9#10g from the from the employee organizations per organization (Worganization and (W-2/1099week 2/1099MISC) related MISC) Trustee organizations ol Steve Skauge, President 2 00 Х 0 1 00 Х Х 0 Brian Ingulsrud, Vice-President 1 00 Х Х 0 Deanna Bakken, Secretary 1 00 Х Х ol 0 Roger Richels, Treasurer 0 0 1 00 Χ Jeanette Plummer, Board Member Х Michael Sundquist, Board Member 1.00 0 Ole Aarsvold, Board Member 1 00 Х 0 Alice Haugen, Board Member 1 00 Χ ol 0 Craig Cayler, Board Member 1 00 Х 0 0 Tom Fischer, Board Member 1 00 Χ 0 0 1 00 Х 0 Russell Thane, Board Member 0 1 00 Х 0 Marlys Hoeft, Board Member Х Paul Wilson, Board Member 1 00 0 Christine Olson , Board Member 1 00 Х 0 Rita Sackett , CFO 40 00 37,569 0 3,465 Х 40 00 Х 130,703 Tom Newberger, CEO 31,604

Continued

(A) Name and Title	(B) Average hours per week	1	on that Institutional Trustee	appl	y) 原	Highest compensated	Former	(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
1b Total							 -	168,272	. (35,069

2 Total number of individuals (including those in 1a) who received more than \$100,000 in reportable compensation from the organization ►1

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

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization

rendered to the organization? If "Yes," complete Schedule I for such person

(A) Name and business address	(B) Description of services	(C) Compensation
2 Total number of independent contractors (including those in 1) who received more than \$	100,000 in compensation	

Νo

5

Page **9**

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
	1a	Federated campaigns 1a	1		Nevende		312, 313, 61 311
##	ь	Membership dues					
E E		1b					
Program Serwice Revenue and other similar amounts	С	Fundraising events 1c					
	d	Related organizations 1d					
	e	Government grants (contributions) 1e	43,000				
	f	All other contributions, gifts, grants, and	171,130				
e E e		similar amounts not included above					
늍	g	Noncash contributions included in					
ပ္မ		lines 1a-1f \$		214,130			
	h	Total (Add lines 1a-1f)					
œ.			Business Code				
ΞĹ	2a	Residential and Day Pr	623,990	6,541,161	6,541,161		
₹	Ь	Thrift Store	453,310	117,151			117,151
e.	С	Regional Trainer	900,099	93,136	93,136		
ř	d	Activity Center	900,099	7,823	7,823		
፠	e	Miscellaneous Revenue	900,099	5,006	5,006		
<u>.</u>	f	All other program service revenue					
₽	g	Total. Add lines 2a-2f					
	3	Investment income (including divi	dends, interest				
		other similar amounts)	ŀ	52,212			52,212
	4	Income from investment of tax-exempt b	ond proceeds				
	-	·	•				
	5	Royalties					
	_	(i) Real	(II) Personal				
	6a	Gross Rents Less rental					
	Ь	expenses					
	С	Rental income or (loss)					
	d	Net rental income or (loss)	· · · · <u>·</u>				
		(ı) Securities	(II) O ther				
	7a	Gross amount	2,600				
		from sales of assets other					
	ь	than inventory Less cost or					
	"	other basis and					
	c	sales expenses Gain or (loss)	2,600				
	d	Net gain or (loss)	1	2,600			2,600
	_		. •				
ά	8a	Gross income from fundraising events (not including \$					
Other Revenue		of contributions reported on line					
क ≳		1c) See Part IV, line 18 Attach Schedule G if total exceeds					
ď		\$15,000 a					
ē	ь	Less direct expensesb					
₹	с	Net income or (loss) from fundrais	ing events				
	9a	Gross income from gaming	· •				
		activities See part IV, line 19					
		Complete Schedule G If total exceeds \$15,000					
		a	4,420,921				
	ь	Less direct expensesb					
	c	Net income or (loss) from gaming	activities	84,105			84,105
	10a	Gross sales of inventory, less	<u>►</u>				
	IUa	returns and allowances .					
		а					
	ь	Less cost of goods sold b					
	С	Net income or (loss) from sales of					
		Miscellaneous Revenue	Business Code				
	11a						
	Ь						
	С						
	d	All other revenue	Ι Τ]
	е	Total. Add lines 11a-11d	\$				
	12	Total Revenue. Add lines 1h, 2g, 3	3, 4, 5, 6 d, 7 d,	7,117,324	6,647,126	0	256,068
		8c, 9c,10c, and 11e	. ▶				

Part IX Statement of Functional Expenses

A	Section 501(c)(3) and 501(c)(4) orgall other organizations must complete column (A) but are not re).
Do ı	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				
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	223,916	149,184	74,732	
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	4,002,369	3,733,796		
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	277,717	249,533	28,184	
9	Other employee benefits	640,805	599,903	40,902	
10	Payroll taxes	300,838	278,404	22,434	
11	Fees for services (non-employees)				
а	Management				
b	Legal				
c	Accounting	13,519	318	13,201	
d	Lobbying				
e	Professional fundraising See Part IV, line 17				
f	Investment management fees				
g	Other	125,909	125,909		
12	Advertising and promotion	10,505	10,505		
13	Office expenses	508,328	487,180	21,148	
14	Information technology	43,387	19,327	24,060	
15	Royalties				
16	Occupancy	178,016	148,104	29,912	
17	Travel	63,825	53,980	9,845	
18	Payments of travel or entertainment expenses for any Federal, state or local public officials				
19	Conferences, conventions and meetings	19,492	10,131	9,361	
20	Interest	38,985	38,985		
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	189,165	170,384	18,781	
23	Insurance	57,387	49,265	8,122	
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)				
а	Provider Assessments	138,552	138,552		
b	Miscellaneous Expense	111,714	8,094	4,686	98,934
c	Bad Debt Expense	5		5	
f	All other expenses				
25	Total functional expenses. Add lines 1 through 24f	6,944,434	6,271,554	573,946	98,934
26	Joint Costs. Check 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				orm 000 /2009

Part X	Balance	Sheet

					(A)		(E	-
	1	Coch non interest hearing			Beginning of year 53.979	1	End of	49.619
	2	Cash—non-interest-bearing			1,667,105	2		1,563,800
	3	Savings and temporary cash investments			1,667,103	3		1,363,600
	4	Pledges and grants receivable, net			599,484	4		793,537
		Accounts receivable, net			399,464	4		793,337
	5	Receivables from current and former officers, directors, trustees, other related parties <i>Complete Part II of Schedule L</i>				5		
	6	Receivables from other disqualified persons (as defined under se persons described in section $4958(c)(3)(B)$ Complete Part II of S				6		
	7	Notes and loans receivable, net				7		
	8	Inventories for sale or use			19,313	8		16,043
\$	9	Prepaid expenses and deferred charges			19,551	9		23,849
Assets	10a	Land, buildings, and equipment cost basis	_{10a}	4,509,138				
•	b	Less accumulated depreciation Complete Part VI of	10b	2,363,343		10-		2,145,795
	4.4	Schedule D			434,828			360,388
	11	Investments—publicly traded securities			434,020	11		300,300
	12	Investments—other securities See Part IV, line 11 <i>Complete Part Schedule D</i>				12		
	13	Investments—program-related See Part IV, line 11 $\it Complete Part Set Part$	rt VIII			13		
	14	Intangible assets				14		
	15	Other assets See Part IV, line 11 Complete Part IX of Schedule D				15		
	16	Total assets. Add lines 1 through 15 (must equal line 34)			4,462,627	16	,	4,953,031
	17	Accounts payable and accrued expenses .			553,917	17		794,604
	18	Grants payable				18		
	19	Deferred revenue				19		
	20	Tax-exempt bond liabilities				20		
eS.	21	Escrow account liability Complete Part IV of Schedule D				21		
Liabilities	22	Payable to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified						
<u>.i</u>		persons Complete Part II of Schedule L				22		
	23	Secured mortgages and notes payable to unrelated third parties			932,784	23		1,105,183
	24	Unsecured notes and loans payable				24		
	25	Other liabilities Complete Part X of Schedule D			66,955	25		53,437
	26	Total liabilities. Add lines 17 through 25			1,553,656	26		1,953,224
— sə		Organizations that follow SFAS 117, check here ▶ 🔽 and complethrough 29, and lines 33 and 34.	ete line:	s 27				
inc	27	Unrestricted net assets			2,908,971	27		2,999,807
Balance	28	Temporarily restricted net assets				28		,
	29	Permanently restricted net assets				29		
Fund		Organizations that do not follow SFAS 117, check here 🕨 🦵 and	comple	ete				
ō	20	lines 30 through 34.						
ets.	30	Capital stock or trust principal, or current funds				30		
Assets	31	Paid-in or capital surplus, or land, building or equipment fund				31		
	32	Retained earnings, endowment, accumulated income, or other fun	as		2.000.074	32		2 000 007
Net	33	Total net assets or fund balances			2,908,971	33		2,999,807
	34	Total liabilities and net assets/fund balances			4,462,627	34	•	4,953,031
Pa	rt XI	Financial Statements and Reporting						
							Yes	No
1	Acco	ounting method used to prepare the Form 990	ccrual	┌ other				

- 1 3/7	
	Financial Statements and Reporting

1	Accounting method used to prepare the Form 990			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		Νo
b	Were the organization's financial statements audited by an independent accountant?	2b	Yes	
С	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?	2c		Νο
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		Νο
b	If "Yes," did the organization undergo the required audit or audits?	3b		

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As Filed Data -

DLN: 93493133041120

Employer identification number

OMB No 1545-0047

SCHEDULE A

(Form 990 or 990EZ)

Name of the organization

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

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

Red R	iver Hu	man Services F	oundation					1,5	025201	4	
Da	rt I	Peason	for Public C	harity Status (to be co	mnleted	hy all or	nanizatio		-0353814 Instruct		
				ation because it is (Please					TH3th det	10113)	
1	Г			nurches, or association of ch					(A)(i).		
2	, T	•		tion 170(b)(1)(A)(ii). (Attac					X7(-7-		
3	Ė			e hospital service organizati		•	tion 170(l	b)(1)(A)(i	ii). (Attac	h Schedul	e H)
4	Ė	•	·	zation operated in conjunction			-		• •		•
	·		name, city, and	•		•			. , ,		
5	Г	•		or the benefit of a college or	universit	y owned o	roperated	by a gove	rnmental	unit desc	rıbed ın
				(Complete Part II)			·				
6	\sqcap	A federal, s	tate, or local g	overnment or governmental	unıt descr	ıbed ın Se	ct ion 170	(b)(1)(A)	(v).		
7	Г	An organiza	ation that norm	ally receives a substantial p	art of its s	support fro	om a gove	rnmental u	ınıt or fron	n the gene	ral public
		described i	n Section 170(l	o)(1)(A)(vi) (Complete Pari	tII)						
8	Γ	A communi	ty trust describ	oed in Section 170(b)(1)(A)	(vi) (Com	plete Par	tII)				
9	▽	An organiza	ation that norm	ally receives (1) more than	331/3% o	fits supp	ort from c	ontributior	ıs, membe	rship fees	, and gross
		receipts fro	m activities re	lated to its exempt functions	—subject	to certair	n exceptio	ns, and (2) no more	than 331/	3% of
		ıts support	from gross inve	estment income and unrelate	ed busines	s taxable	income (l	less sectio	on 511 tax	k) from bu	sınesses
		acquired by	the organizati	on after June 30, 1975 See	Section 5	09(a)(2).	(Complet	e Part III)		
10	Γ	An organiza	atıon organızed	and operated exclusively to	test for p	ublic safe	ty See Se	ct ion 509	(a)(4). (Se	ee instruc	tions)
11	Г	_	=	and operated exclusively for					•	•	
				orted organizations describe type of supporting organizat				•		Section 5	09(a)(3). Check
			ype I b				nally Integ		'' d	Гтуре	III - Other
e	Г	·		rtify that the organization is					one or mor		
	·	•		agers and other than one or			•				•
_		section 50									
f		check this		d a written determination fro	m the IRS	that it is	a Type I,	Type II o	r Type III	supportir	ig organization,
g				as the organization accepted	d any gift	or contrib	utıon from	any of the	<u> </u>		•
		following pe	ersons?								
			•	r indirectly controls, either a		_	th persons	describe	d ın (ıı)		Yes No
				ng body of the the supported	_	tion?				11g	
			•	erson described in (i) above						11g(
				ty of a person described in (11g(iii)
h		Provide the	following infori	mation about the organizatio	ns the org	janization	supports				
	/:\ N:-		/::\	(iii) Tuna af anganin-tur-	(i) 7	- +	() D.d.		() 7	- +	() A maxima - f
		ame of oorted	(ii) EIN	(iii) Type of organization (described on lines 1-9	(iv) I	s the ation in		ou notify inization		s the ation in	(vii) A mount of support?
		nization		above or IRC section	_	listed in		i) of your		rganized	Support
				(See Instructions))	your go		supp	oort?	ın the	US?	
						ment?				ı	
					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.)

Pι	ıblic Support		, ,	,				
Cale	endar 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 The value of services or facilities					 		
3	furnished by a governmental unit to the							
	organization without charge							
4	Total. Add line 1-3					1		
5	The portion of total contribution by each							
5	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							
	otal Support		1		T			
	endar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) :	2008	(f) Total
7	A mounts 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							
10	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 instructio	ns)		•	12		
13	First Five Years. If the Form 990 is for the	organization's f	irst second thu	d fourth or fifth	ntay vearas a F		3)	
	organization, check this box and stop here		mat, second, tim	u, rouren, or mer	rtax year as a s	/O1(C)(C	• •	▶ □
								•
Co	omputation of Public Support Perc	entage						
14	Public Support Percentage for 2008 (line 6	5 column (f) dıvı	ded by line 11 c	olumn (f))		14		
15	Public Support Percentage for 2007 School	dule A , Part IV -	A, line 26f			15		
16a	33 1/3% Test - 2008. If the organization di	d not check the	box on line 13.	and line 14 is 3	3 1/3% or more.		this box	
	and stop here. The organization qualifies a				,			▶ □
b	33 1/3% Test - 2007. If the organization d				15 is 33 1/3% d	r more,	check th	
	box and stop here. The organization qualifi	es as a publicly	supported orga	nızatıon				▶ □
17a	10% Facts and Circumstances Test - 2008.							
	more, and if the organization meets the "fa		•					· —
	organization meets the "facts and circums							► □
Ь	10% Facts and Circumstances Test - 2007.							
	more, and if the organization meets the "fa		•					_
4.0	the organization meets the "facts and circu							n ▶
18	Private Foundation. If the organization did	not check the b	oux on line 13, 1	oa, 100, 1/a or	1/D, check this	oox an	u see	▶ □
	ınstructions							F-1

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

	ction A. Public Support							
Cale	ndar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e)	2008	(f) Total
1	Gifts, grants, contributions, and	177,744	157,136	110,122	99,838		214,130	758,970
	membership fees received (Do not	177,744	137,130	110,122	99,030		214,130	730,970
_	include any "unusual grants ") Gross receipts from admissions,							
2	merchandise sold or services performed,							
	or facilities furnished in any activity that	4,981,206	5,213,374	5,591,855	6,189,432		6,764,335	28,740,202
	is related to the organization's tax-		, ,	, ,	, ,		, ,	
	exempt purpose							
3	Gross receipts from activities that are							
_	not an unrelated trade or business under	4,923,498	6,159,819	5,383,735	5,708,657		4,420,863	26,596,572
	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	10.000.110	14 500 000	11 005 710	44 007 007		11 200 220	56.005.744
6	Total Add lines 1-5	10,082,448	11,530,329	11,085,712	11,997,927		11,399,328	56,095,744
7a	A mounts included on lines 1, 2, and 3							
	received from disqualified persons							
b	A mounts included on lines 2 and 3							
	received from other than disqualified	4,418,848	5,466,801	4,801,940	5,105,887		3,519,365	23,312,841
	persons that exceed the greater of 1% of	4,410,040	3,400,601	4,001,940	3,103,667		3,319,303	23,312,041
	the total of lines 9, 10c, 11, and 12 for							
_	the year or \$5,000 Total of lines 7a and 7b	4,418,848	5,466,801	4,801,940	5,105,887		3,519,365	23,312,841
	<u> </u>	7,710,040	3,400,001	4,001,540	3,103,007		3,313,303	25,512,041
8	Public Support (Substract line 7 c from line 6)							32,782,903
Т.								
	tal Support ndar year (or fiscal year beginning in)	(a) 2004	(1) 2005	(c) 2006	(d) 2007		2000	(C) T
cale		(2) / 11114 1		iciziiib i	- (a) /			
	F		(b) 2005				2008	(f) Total
9	A mounts from line 6	10,082,448	11,530,329	11,085,712	11,997,927		11,399,328	
9	A mounts from line 6 Gross income from interest, dividends,							
9	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans,							56,095,744
	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar	10,082,448	11,530,329	11,085,712	11,997,927		11,399,328	56,095,744
9 10a	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	10,082,448	11,530,329	11,085,712	11,997,927		11,399,328	56,095,744
9	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less	10,082,448	11,530,329	11,085,712	11,997,927		11,399,328	56,095,744
9 10a	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses	10,082,448	11,530,329	11,085,712	11,997,927		11,399,328	56,095,744
9 10a b	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after 30 June, 1975	10,082,448	11,530,329 19,926	11,085,712 80,223	11,997,927 57,510		52,212	56,095,744 220,410
9 10a b	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after 30 June, 1975 Add lines 10a and 10b	10,082,448	11,530,329	11,085,712	11,997,927		11,399,328	56,095,744 220,410
9 10a b	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after 30 June, 1975 Add lines 10a and 10b Net income from unrelated business	10,082,448	11,530,329 19,926	11,085,712 80,223	11,997,927 57,510		52,212	56,095,744 220,410
9 10a b	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after 30 June, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b,	10,082,448	11,530,329 19,926	11,085,712 80,223	11,997,927 57,510		52,212	56,095,744 220,410
9 10a b	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after 30 June, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly	10,082,448	11,530,329 19,926	11,085,712 80,223	11,997,927 57,510		52,212	56,095,744 220,410
9 10a b c 11	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after 30 June, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on	10,082,448	11,530,329 19,926	11,085,712 80,223	11,997,927 57,510		52,212	56,095,744 220,410
9 10a b	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after 30 June, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss	10,082,448	11,530,329 19,926	11,085,712 80,223	11,997,927 57,510		52,212	56,095,744 220,410
9 10a b c 11	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after 30 June, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on	10,082,448	11,530,329 19,926	11,085,712 80,223	11,997,927 57,510		52,212	56,095,744 220,410
9 10a b c 11	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after 30 June, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)	10,082,448	11,530,329 19,926	11,085,712 80,223	11,997,927 57,510		52,212	56,095,744 220,410 220,410
9 10a b c 11	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after 30 June, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets	10,082,448	11,530,329 19,926	11,085,712 80,223	11,997,927 57,510		52,212	56,095,744 220,410
9 10a b c 11	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after 30 June, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total Support (Add lines 9, 10c, 11 and	10,082,448 10,539	11,530,329 19,926 19,926	80,223 80,223	11,997,927 57,510 57,510		52,212 52,212	56,095,744 220,410 220,410 56,316,154
9 10a b c 11	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after 30 June, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total Support (Add lines 9, 10c, 11 and 12)	10,082,448 10,539	11,530,329 19,926 19,926	80,223 80,223	11,997,927 57,510 57,510		52,212 52,212	56,095,744 220,410 220,410 56,316,154
9 10a b c 11 12 13 14	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after 30 June, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total Support (Add lines 9, 10c, 11 and 12) First Five Years If the Form 990 is for the ocheck this box and stop here	10,082,448 10,539 10,539	11,530,329 19,926 19,926	80,223 80,223	11,997,927 57,510 57,510		52,212 52,212	56,095,744 220,410 220,410 56,316,154
9 10a b c 11 12 13 14	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after 30 June, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total Support (Add lines 9, 10c, 11 and 12) First Five Years If the Form 990 is for the o	10,082,448 10,539 10,539	11,530,329 19,926 19,926	80,223 80,223	11,997,927 57,510 57,510		52,212 52,212	56,095,744 220,410 220,410 56,316,154
9 10a b c 11 12 13 14	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after 30 June, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total Support (Add lines 9, 10c, 11 and 12) First Five Years If the Form 990 is for the ocheck this box and stop here	10,082,448 10,539 10,539 rganization's first	11,530,329 19,926 19,926 st, second, third	80,223 80,223 , fourth, or fifth t	11,997,927 57,510 57,510		52,212 52,212	56,095,744 220,410 220,410 56,316,154
9 10a b c 11 12 13 14	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after 30 June, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total Support (Add lines 9, 10c, 11 and 12) First Five Years If the Form 990 is for the ocheck this box and stop here mputation of Public Support Percetage Public Support Percetage for 2008 (line 8)	10,082,448 10,539 10,539 rganization's first	11,530,329 19,926 19,926 st, second, third	80,223 80,223 , fourth, or fifth t	11,997,927 57,510 57,510	01(c)(:	52,212 52,212	56,095,744 220,410 220,410 56,316,154 ation, 58 210 %
9 10a b c 11 12 13 14 Co	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after 30 June, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total Support (Add lines 9, 10c, 11 and 12) First Five Years If the Form 990 is for the ocheck this box and stop here	10,082,448 10,539 10,539 rganization's first	11,530,329 19,926 19,926 st, second, third	80,223 80,223 , fourth, or fifth t	11,997,927 57,510 57,510	01(c)(;	52,212 52,212	56,095,744 220,410 220,410 56,316,154 ation,
9 10a b c 11 12 13 14 <u>Co</u> 15 16	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after 30 June, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total Support (Add lines 9, 10c, 11 and 12) First Five Years If the Form 990 is for the ocheck this box and stop here mputation of Public Support Percet Public Support Percentage for 2008 (line 8	10,082,448 10,539 10,539 10,539 entage column (f) dividule A, Part IV-A	11,530,329 19,926 19,926 st, second, third	80,223 80,223 , fourth, or fifth t	11,997,927 57,510 57,510	01(c)(:	52,212 52,212	56,095,744 220,410 220,410 56,316,154 ation, 58 210 %
9 10a b c 11 12 13 14 <u>Co</u> 15 16	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after 30 June, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total Support (Add lines 9, 10c, 11 and 12) First Five Years If the Form 990 is for the ocheck this box and stop here mputation of Public Support Percetage Public Support Percetage for 2008 (line 8)	10,082,448 10,539 10,539 10,539 entage column (f) dividule A, Part IV-A Percentage	11,530,329 19,926 19,926 st, second, third ed by line 13 co	80,223 80,223 , fourth, or fifth to	11,997,927 57,510 57,510	01(c)(:	52,212 52,212	56,095,744 220,410 220,410 56,316,154 ation, 58 210 %

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

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 Private Foundation If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions



►V

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 A (Form 990 or 990-EZ) 2008

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

SCHEDULE C (Form 990 or 990-EZ)

To be completed by organizations described below. Attach to Form 990 or Form 990-EZ

Open to Public

						Inspection
	_	s," to Form 990, Part IV, Line 3, o		art VI, line 46	(Political Ca	mpaign Activities)
	. , . ,	mplete Parts I-A and B Do not comple		D	l-4- D4 I D	
	ection 501(c) (other than section a ection 527 organizations complete	501(c)(3)) organizations complete Pa	rts I-A and C belov	w Do not comp	ete Part FB	
		s," to Form 990, Part IV, Line 4, o	r Form 990EZ, Pa	art VI, line 47 (Lobbying A	ctivities)
		t have filed Form 5768 (election unde				•
• Se	ction 501(c)(3) organizations that	t have NOT filed Form 5768 (election	under section 501	(h)) Complete F	Part II-B Don	ot complete Part II-A
	-	s," to Form 990, Part IV, Line 5 (P	roxy Tax)			
	ection 501(c)(4), (5), or (6) organi	zations complete Part III		T_		
	me of the organization I River Human Services Foundation			Er	nployer ident	tification number
				4.5	5-0353814	
Par		by all organizations exempt e the instructions for Schedule		n 501(c) and	d section !	527
1	Provide a description of the or	ganızatıon's dırect and ındırect polit	ıcal campaıgn act	tivities in Part I	V	
2	Political expenditures					\$
3	Volunteer hours					
Par	t I-B To be completed be for Schedule C for d	oy all organizations exempt	under section	n 501(c)(3).	(See the i	nstructions
1		e tax incurred by the organization un	ider section 4955	5		\$
2	Enter the amount of any excise	e tax incurred by organization manaç	gers under sectio	n 4955		\$
3	T C + 1	t 4055 t d.d .t 61. 5		_		☐ Yes ☐ No
3	If the organization incurred in	a section 4955 tax, did it file Form 4	1/20 for this year	r/		1es 140
3 4a	Was a correction made?	a section 4955 tax, did it file Form 4	1/20 for this year	r <i>?</i>		Yes
4a	_	a section 4955 tax, did it file Form 4	1/20 for this year	,		
4a b	Was a correction made? If "Yes," describe in Part IV t I-C To be completed by	by all organizations exempt for Schedule C for details.)			cept sect	☐ Yes ☐ No
4a b	Was a correction made? If "Yes," describe in Part IV t I-C To be completed b (See the instructions	oy all organizations exempt	under section	n 501(c), ex		☐ Yes ☐ No
4a b Par	Was a correction made? If "Yes," describe in Part IV To be completed be (See the instructions) Enter the amount directly expenses.	oy all organizations exempt for Schedule C for details.)	under section	n 501(c), ex pt function activ	rities	☐ Yes ☐ No
4a b Par 1	Was a correction made? If "Yes," describe in Part IV To be completed to (See the instructions) Enter the amount directly expended to the instruction of the filing of t	oy all organizations exempt for Schedule C for details.) ended by the filing organization for so organization's internal funds contribu	under section ection 527 exemp ited to other orga	n 501(c), ex pt function activ nizations for se	rities ction	☐ Yes ☐ No
4a b Par 1	Was a correction made? If "Yes," describe in Part IV To be completed to (See the instructions) Enter the amount directly expendent to the filing of the filing of the filing of the following that it is to the following that it is to the filing of the f	oy all organizations exempt for Schedule C for details.)	under section ection 527 exemp ited to other orga	n 501(c), ex pt function activ nizations for se	rities ction	☐ Yes ☐ No
4a b Par 1	Was a correction made? If "Yes," describe in Part IV To be completed to (See the instructions) Enter the amount directly expended to the instruction of the filing of t	by all organizations exempt for Schedule C for details.) ended by the filing organization for sorganization's internal funds contribution the formula function expenditures.	under section ection 527 exemp ited to other orga	n 501(c), ex pt function activ nizations for se	rities ction	☐ Yes ☐ No
4a b Par 1 2	Was a correction made? If "Yes," describe in Part IV To be completed to (See the instructions) Enter the amount directly expendent to the filing of 527 exempt funtion activities. Total of direct and indirect exent 120-POL, line 17b Did the filing organization file I state the names, addresses an were made Enter the amount political contributions received.	by all organizations exempt for Schedule C for details.) ended by the filing organization for sorganization's internal funds contribution the formula function expenditures.	ection 527 exempled to other organs 1 and 2 and ento the filling did not be all sections and from the filling dito a separate pools.	n 501(c), expense of the function active nizations for setter here and on n 527 political gorganization's political organization's	rities ction Form organization own internal tion, such as	Yes No ion 501(c)(3).
4a b Par 1 2 3	Was a correction made? If "Yes," describe in Part IV To be completed to (See the instructions) Enter the amount directly expendent to the filing of 527 exempt funtion activities. Total of direct and indirect exent 120-POL, line 17b Did the filing organization file I state the names, addresses an were made Enter the amount political contributions received.	oy all organizations exempt for Schedule C for details.) ended by the filing organization for some programization is internal funds contributed from 1120-POL for this year? Ind Employer Identification Number (paid and indicate if the amount was ped and promptly and directly delivered.	ection 527 exempled to other organs 1 and 2 and ento the filling did not be all sections and from the filling dito a separate pools.	n 501(c), expense of the function active nizations for setter here and on n 527 political gorganization's political organization's	organization own internal tion, such as nation in Par paid from nization's ds If none,	Yes No ion 501(c)(3).
4a b Par 1 2 3	Was a correction made? If "Yes," describe in Part IV To be completed to (See the instructions) Enter the amount directly expendent of the filing of 527 exempt funtion activities. Total of direct and indirect exent 120-POL, line 17b Did the filing organization file to State the names, addresses as were made Enter the amount political contributions received segregated fund or a political and the segreg	by all organizations exempts for Schedule C for details.) ended by the filing organization for some sempt function expenditures. Add line form 1120-POL for this year? Ind Employer Identification Number (paid and indicate if the amount was paid and promptly and directly delivered action committee (PAC). If additional	ection 527 exempled to other organs 1 and 2 and enter EIN) of all sections and from the filing do a separate point space is needed.	n 501(c), expt function activing internal function activities of the functi	organization own internal tion, such as nation in Par paid from nization's ds If none,	Yes No ion 501(c)(3). \$ Yes No s to which payments funds or were a separate t IV (e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none,
4a b Par 1 2 3	Was a correction made? If "Yes," describe in Part IV To be completed to (See the instructions) Enter the amount directly expendent of the filing of 527 exempt funtion activities. Total of direct and indirect exent 120-POL, line 17b Did the filing organization file to State the names, addresses as were made Enter the amount political contributions received segregated fund or a political and the segreg	by all organizations exempts for Schedule C for details.) ended by the filing organization for some sempt function expenditures. Add line form 1120-POL for this year? Ind Employer Identification Number (paid and indicate if the amount was paid and promptly and directly delivered action committee (PAC). If additional	ection 527 exempled to other organs 1 and 2 and enter EIN) of all sections and from the filing do a separate point space is needed.	n 501(c), expt function activing internal function activities of the functi	organization own internal tion, such as nation in Par paid from nization's ds If none,	Yes No ion 501(c)(3). \$ Yes No s to which payments funds or were a separate t IV (e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none,

d Grassroots non-taxable amount

f Grassroots lobbying expenditures

e Grassroots ceiling amount (150% of line d, column (e))

P	art II-A To be completed by (election under sec						768
	Check If the filing organization	belongs to an affili	ated group				
<u>B</u>	Check If the filing organization Limits on Lo (The term "expenditure	(a) Filing Organization's Totals	(b) Affiliated Group Totals				
1a	Total lobbying expenditures to influe	nce public opinion	(grass roots lob	bying)			
ь	Total lobbying expenditures to influe	nce a legislative b	ody (direct lobby	yıng)			
c	Total lobbying expenditures (add line						
d	Other exempt purpose expenditures						
e	Total exempt purpose expenditures	(add lines 1c and 1	Ld)				
f	Lobbying nontaxable amount Enters columns— If the amount on line 1e, column (a) or (b) is: Not over \$500,000		taxable amount				
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% o	of the excess over \$	500,000			
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% o	of the excess over \$	51,000,000			
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of	f the excess over \$1				
	Over \$17,000,000	\$1,000,000					
	Grassroots nontaxable amount (ente	er 25% of line 1f)					
h	Subtract line 1g from line 1a Enter	0- ıflıne g ıs more	than line a				
i	Subtract line 1f from line 1c Enter-	0- ıflıne fıs more t	than line c				
j	If there is an amount other than zero section 4911 tax for this year?	on either line 1h c	or line 11, did the	organization file	Form 4720 rep	orting	┌ Yes ┌ No
	(Some organizations tha columns below.		on 501(h) el	ection do not	: have to cor		he five
	Lobb	ying Expendit	ures During	4-Year Avera	ging Period		
	Calendar year (or fisca beginning in)	l year	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) Total
_2a	Lobbying non-taxable amount						
	Lobbying ceiling amount (150% of line 2a, column(e))						
	: Total lobbying expenditures						

Schedule C (Form 990 or 990-EZ) 2008

Pa		by organizations exempt und				led		age 3 1
	5/68 (election u	nder section 501(h)). (See the	instructions for Schedule C for		IS.) a)	$\overline{}$	(b)	
				,	ľ	+	•	
				Yes	No	'	A moui	nt
1		rganızatıon attempt to ınfluence foreıgn			•			
		ipt to influence public opinion on a legis	slative matter or					
а	referendum, through the use of Volunteers?			Yes	1			
ь		ude compensation in expenses reported	t on lines c through i)?	Yes		-		
c	Media advertisements?	add dompensation in expenses reported	a on image consugnity		No	+		
d		rs, or the public?			No	+		
e					No	+		
f					Νο	+		
g		their staffs, government officials, or a	legislative body?	Yes				1,000
h	Rallies, demonstrations, semin	ars, conventions, speeches, lectures, c	or any other means?		Νο			
i				Yes				
j	Total lines 1c through							1,000
_	11		501/)/2)2		l			
2a 		e the organization to be not described	in section 501(c)(3)?		Νo	4		
		y tax incurred under section 4912 y tax incurred by organization managei	rs under section 4013			-		
		d a section 4912 tax, did it file Form 4			ĺ	\vdash		
		by all organizations exempt		ction	501/) or	
· ·		6). (See the instructions for Sched		Cuon	301(c)(s	,, UI	
			,				Yes	No
1	Were substantially all (90% or	more) dues received nondeductible by	members?			1		
2	Did the organization make only	in-house lobbying expenditures of \$2,	000 or less?			2		
3		arryover lobbying and political expendi				3		
Pai		by all organizations exempt						
		if BOTH Part III-A, questionsswered "Yes." (See the instruction			r Part	III- <i>F</i>	۹,	
1	Dues, assessments and similar		ons for Schedule e for details.	, 	1 \$			
2	•	lobbying and political expenditures (de	o not include amounts of politica	,				
	expenses for which the section	on 527(f) tax was paid).			_			
а	Current Year				2a \$			
	Carryover from last year				2b\$			
c	Total		1.11	-	2c \$			
3		section 6033(e)(1)(A) notices of nonde		-	3 \$			
4		nount on line 2c exceeds the amount or carryover to the reasonable estimate o		al				
	expenditure next year?		Then accurations reporting and points	.	4 \$			
5	Taxable amount of lobbying and	d political expenditures (line 2c total m	ınus 3 and 4)		5 \$			
P	art IV Supplemental In	formation						
	omplete this part to provide the de so, complete this part for any add	escriptions required for Part I-A, line 1, litional information	Part I-B, line 4, Part I-C, line 5, and	d Part I	I-B, lın	e 1ı		
	Ident if ier	Return Reference	Explana	tion				
Part	t II-B, Line 1i	Explanation of Other Lobbying Activities	Testified in front of legislative com	nmittee	on app	ropri	atıon l	bill
			-					

Part IV Supplemental I		
Ident if ier	Return Reference	Explanation

Schedule C (Form 990 or 990EZ) 2008

OMB No 1545-0047

2008

2008

SCHEDULE D (Form 990)

Department of the Treasury

► 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.

Supplemental Financial Statements

Open to Public Inspection

terriar	Revenue Service			Tiisheci	.1011
	ne of the organization River Human Services Foundation		Employer identifica	tion numbe	er
			45-0353814		
Pa	t I Organizations Maintaining Donor Adordary organization answered "Yes" to Form 99		unds or Accounts	. Complet	te if the
	organization answered Tes to Form 93	(a) Donor advised funds	(b) Funds and o	theraccou	nts
L	Total number at end of year				
2	Aggregate Contributions to (during year)				
3	Aggregate Grants from (during year)				
ı	Aggregate value at end of year				
5	Did the organization inform all donors and donor advi funds are the organization's property, subject to the		nor advised	☐ Yes	┌ No
5	Did the organization inform all grantees, donors, and used only for charitable purposes and not for the ben impermissible private benefit?		•	☐ Yes	Г No
Par	t III Conservation Easements. Complete	ıf the organizatıon answered "Yes"	to Form 990, Part I\	/, lıne 7.	
1 2	Purpose(s) of conservation easements held by the o Preservation of land for public use (e.g., recreating Protection of natural habitat Preservation of open space Complete lines 2a-2d if the organization held a qual	on or pleasure)	n historically important ertified historic structu m of a conservation eas	re	a
_	on the last day of the tax year			the End of	the Year
а	Total number of conservation easements		2a		
b	Total acreage restricted by conservation easement	rs .	2b		
c	Number of conservation easements on a certified hi	ıstorıc structure ıncluded ın (a)	2c		
d	Number of conservation easements included in (c) a	acquired after 8/17/06	2d		
3	Number of conservation easements modified, transfe	erred, released, extinguished, or terminat	ed by the organization	during	
	the taxable year ►				
1	Number of states where property subject to conserva	ation easement is located ►			
5	Does the organization have a written policy regarding enforcement of the conservation easements it holds?	=	lations, and	☐ Yes	┌ No
5	Staff or volunteer hours devoted to monitoring, inspe	ecting and enforcing easements during th	e year ►		
7	A mount of expenses incurred in monitoring, inspecti	ng, and enforcing easements during the y	∕ear ► \$		
3	Does each conservation easement reported on line 2 $170(h)(4)(B)(I)$ and $170(h)(4)(B)(II)$?	2(d) above satisfy the requirements of se	ection	☐ Yes	┌ No
•	In Part XIV, describe how the organization reports contained sheet, and include, if applicable, the text of the organization's accounting for conservation easer	the footnote to the organization's financia			
ar	Organizations Maintaining Collection Complete if the organization answered		or Other Similar	Assets.	
la	If the organization elected, as permitted under SFAS art, historical treasures, or other similar assets held provide, in Part XIV, the text of the footnote to its fire	for public exhibition, education or resea	rch in furtherance of pu		2 ,
b	If the organization elected, as permitted under SFAS historical treasures, or other similar assets held for provide the following amounts relating to these items	public exhibition, education, or research			
	(i) Revenues included in Form 990, Part VIII, line 1		► \$		
	(ii) Assets included in Form 990, Part X		► \$		
2	If the organization received or held works of art, histofollowing amounts required to be reported under SFA	•	for financial gain, provi	de the	
а	Revenues included in Form 990, Part VIII, line 1		F \$		
b	Assets included in Form 990, Part X		► \$		

	Using the organization's accession and other records, check any	ofth	ne fol	lowing that ar	e a significant u	se of its collectio	n	
	items (check all that apply)		_	_				
а	Public exhibition	d	ı	Loan or excl	hange programs			
b	Scholarly research	e	Γ	O ther				
c	Preservation for future generations							
4	Provide a description of the organization's collections and explain Part XIV	n hov	w the	y further the c	organization's ex	empt purpose in		
5	During the year, did the organization solicit or receive donations assets to be sold to raise funds rather than to be maintained as						Yes	□ No
Par	t IV Trust, Escrow and Custodial Arrangements.					<u> </u>		,
	Part IV, line 9, or reported an amount on Form 99							
1a	Is the organization an agent, trustee, custodian or other interme included on Form 990, Part X? $$	dıary	for c	ontributions o	or other assets i	not 🔽	Yes	┌ No
b	If "Yes," explain why in Part XIV and complete the following table \ensuremath{T}	е						
						A mou	ınt	
С	Beginning balance				1c		2,	046,317
d	Additions during the year				1d		3	300,000
e	Distributions during the year				1e		ϵ	08,246
f	Ending balance				1f		1,7	38,071
2a	Did the organization include an amount on Form 990, Part X, line	21?				Г	Yes	┌ No
b	If "Yes," explain the arrangement in Part XIV							
Par	t V Endowment Funds. Complete if the organization	ans	wer	ed "Yes" to	Form 990, Par	t IV, line 10.		
	(a)Current Year	(b) Prior	Year (c)Tw	o Years Back (d)	Three Years Back (e	:)Four Y	ears Back
1a	Beginning of year balance							
b	Contributions							
c	Investment earnings or 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 of the year end balance held a	s						
а	Board designated or quasi-endowment							
ь	Permanent endowment 🕨							
	Term endowment ▶							
c								
c 3a		tion	that	are held and a	dmınıstered for	the		
	Are there endowment funds not in the possession of the organization by	ition	that	are held and a	dmınıstered for	the	Yes	No
	Are there endowment funds not in the possession of the organiza	ition	that	are held and a	dmınıstered for	the 3a(i)	Yes	No
3a	A re there endowment funds not in the possession of the organization by (i) unrelated organizations						Yes	No
3a	A re there endowment funds not in the possession of the organization by (i) unrelated organizations	 I on S	Sched	 		3a(i)	Yes	No
3a b 4	Are there endowment funds not in the possession of the organization by (i) unrelated organizations	· · · I on S	Sched	 lule R?		3a(i)	Yes	No
3a b 4	A re there endowment funds not in the possession of the organization by (i) unrelated organizations	· · · I on S	Sched	 lule R?		3a(i)	Yes	No
3a b 4	Are there endowment funds not in the possession of the organization by (i) unrelated organizations	· · · I on S	ichec ent fo	 lule R?		3a(i)		No Dok value
b 4 Par	Are there endowment funds not in the possession of the organization by (i) unrelated organizations	· · · I on S	ichec ent fo	Iule R?	art X, line 10.	3a(i) 3a(ii) 3b		ook value
3a b 4 Par	Are there endowment funds not in the possession of the organization by (i) unrelated organizations	· · · I on S	ichec ent fo	Iule R?	art X, line 10. (b)Cost or other basis (other)	3a(i) 3a(ii) 3b	(d) Bo	ook value
b 4 Par	Are there endowment funds not in the possession of the organization by (i) unrelated organizations	· · · I on S	ichec ent fo	Iule R?	art X, line 10. (b)Cost or other basis (other) 313,106	3a(i) 3a(ii) 3b	(d) Bo	ook value
b 4 Pari	Are there endowment funds not in the possession of the organization by (i) unrelated organizations	· · · I on S	ichec ent fo	Iule R?	art X, line 10. (b)Cost or other basis (other) 313,106	3a(i) 3a(ii) 3b	(d) Bo	
b 4 Par	Are there endowment funds not in the possession of the organization by (i) unrelated organizations	· · · I on S	ichec ent fo	Iule R?	art X, line 10. (b)Cost or other basis (other) 313,106 3,011,167	(c) Depreciation	(d) Bo	ook value 313,106 1,471,219

Part VII	Investments-Other Securities. See	Form 990, Part X, line 1	2.	
(8	a) Description of security or cateory (including name of security)	(b)Book value		d of valuation ·year market value
Financial de	rivatives and other financial products			
	d equity interests			
Other				
Total. (Colum	n (b) should equal Form 990, Part X, col (B) line 12) 🕨			
Down VIII	Truestments Duesus Polated Co	a Farm 000 Dart V June	12	
	Investments—Program Related. Se			d of valuation
	(a) Description of investment type	(b) Book value		year market value
Total. (Colum	n (b) should equal Form 990, Part X, col (B) line 13) 🕨			
Part IX	Other Assets. See Form 990, Part X, II			
	(a) Descri	ption		(b) Book value
Total (Colum	ma (b) should agual Form 000 Part V sel (B) line	45 \	<u> </u>	
	nn (b) should equal Form 990, Part X, col.(B) line . Other Liabilities. See Form 990, Part X		<u></u>	
IGIUA	(a) Description of Liability	(b) A mount		
Federal Inco		7-7	1	
	itract Adjust DHS	53,437		
			1	
			1	
			1	
			1	
			1	
			1	
			1	
			1	
Total. (Colum	n (b) should equal Form 990, Part X, col (B) line 25) 🕨	53,437	1	
		1 23,137	1	

Pa	rt XI Reconciliation of Change in Net Assets from Form 990 to Financial Statemer	ıts	
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	7,117,324
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	6,944,434
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	172,890
4	Net unrealized gains (losses) on investments	4	-82,054
5	Donated services and use of facilities	5	<u> </u>
6	Investment expenses	6	
7	Prior period adjustments	7	
8		8	
9	Other (Describe in Part XIV)	9	-82,054
	Total adjustments (net) Add lines 4 - 8		-
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9 t XII Reconciliation of Revenue per Audited Financial Statements With Revenue p	10	90,836
1 1	Total revenue, gains, and other support per audited Financial Statements	1	7,647,64 <i>6</i>
2	A mounts included on line 1 but not on Form 990, Part VIII, line 12	-	7,047,040
	Net unrealized gains on investments		
a	Donated services and use of facilities		
Ь			
C			
d		3-	82.054
e ¬	Add lines 2a through 2d	2e	-82,054
3	Subtract line 2e from line 1	3	7,729,700
4	A mounts 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 Other (Describe in Part XIV)		
b	,	4-	612.27
c -	Add lines 4a and 4b	4c 5	-612,376
5 Para	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)		7,117,324
1	Total expenses and losses per audited financial statements	1	7,556,810
2	Amounts included on line 1 but not on Form 990, Part IX, line 25	_	7,330,010
a	Donated services and use of facilities		
ь	Prior year adjustments		
c	Losses reported on Form 990, Part IX, line 25		
d	Other (Describe in Part XIV)		
e	Add lines 2a through 2d	2e	620,113
3	Subtract line 2e from line 1	3	6,936,697
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	-	0,930,097
	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
a	Other (Describe in Part XIV)		
b	Add lines 4a and 4b	4c	7,737
с 5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	4c 5	6,944,434
	rt XIV Supplemental Information	3	0,944,434
	mplete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Pa	art XIV , lin	es 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

Ident if ier	Return Reference	Explanation
Part IV , Line 1b		These amounts are employee retirement accounts and not owned by RRHSF The Distributions include market fluctuations and distributions to employees
Part XII, Line 4b - Other Adjustments		Gaming Expenses -620113 G & A Other Income 3943 G & A Interest Income 1194 Gain on Sale 2600
Part XIII, Line 2d - Other Adjustments		Gaming Expenses 620113
Part XIII, Line 4b - Other Adjustments		G & A Other Income 3943 G & A Interest Income 1194 Gain on Sale 2600

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DLN: 93493133041120

OMB No 1545-0047

Department of the Treasury

(Form 990 or 990-EZ)

SCHEDULE G

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.

Supplemental Information Regarding

Fundraising or Gaming Activities

Open to Public

Internal Revenue Service	lines 17, 18, or 19, and	by organizat	m 990-EZ, line 6a.	Inspection			
Name of the organization Red River Human Service				_		ntification number	
					45-0353814		
Part I Fundraisir	ng Activities. Complete	e if the o	rganızat	ion answered "Yes" t	to Form 990, Part IV	, line 17.	
1 Indicate whether th a Mail solicitation b Email solicitation c Phone solicitation d In-person solicitation	ons ons	through a	ny of the	e Solicitation of r	non-government grants government grants		
or key employees li b If "Yes," list the ten	n have a written or oral agre sted in Form 990, Part VII; i highest paid individuals or at least \$5,000 by the orga) or entity entities (1	in connec	ction with professional f rs) pursuant to agreeme	undraising activities? ents under which the fui		
(i) Name of individu or entity (fundraise	I (III) A CTIVITY	fundrais custo conti	(iii) Did fundraiser have custody or control of contributions?		(v) A mount paid to (or retained by) fundraiser listed in col (i)	(vi) A mount paid to (or retained by) organization	
		Yes	No				
Total							

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

			(a) Event #1	(b) Event #2	(c) O ther Events		otal Eve	
						1 '	ol (a) th ol (c))	rough
			(event type)	(event type)	(total number)	,	O1 (C) /	
₽	1	Gross receipts						
Revenue	2	Less Charitable						
ě	3	Gross revenue (line 1 minus line 2)						
	4	Cash Prizes						
စ္	5	Non-cash Prizes						
Expenses	6	Rent/Facility costs						
	7	Other direct expenses						
Direct	8	Direct expense summary Add lin	es 4 through 7 in colum	n (d)				
_	9	Net income summary Combine li	nes 3 and 8 ın column (d	i)	•			
Par	t III	Gaming. Complete if the oi \$15,000 on Form 990-EZ, lii		"Yes" to Form 990, Pa	art IV, line 19, or repo	rted mo	re tha	n
Revenue			(a) Bıngo	(b) Pull tabs/Instant bingo/progressive bingo	(c) O ther gaming		al gaming hrough co	
	1	Gross revenue		884,040	3,536,853		4,42	0,893
	2	Cash prizes		690,358	3,026,345		3,71	6,703
Direct Expenses	3	Non-cash prizes						
ញ ប៊ូ	4	Rent/facility costs			194,748		19	4,748
<u>D</u>	5	Other direct expenses			321,073		32	1,073
	6	Volunteer labor	┌────────────────────────────────────	Yes	Yes			
	7	Direct expense summary Add line	,	,			4,23	2,524
	8	Net gaming income summary Com	nbine lines 1 and 7 in co	lumn (d)			18	8,369
							Yes	No
9		er the state(s) in which the organiza						
a		:he organization licensed to operate No," Explain	gaming activities in eac	ch of these states?		· 9a	Yes	-
b	11	NO, Explain						
10a		re any of the organization's gaming	licenses revoked, suspe	nded or terminated during	g the tax year?	10	a	Νο
b	If"	Yes," Explain						
						_		
	_			2		— 11		No
11	D	es the organization operate gaming						

								res	140
13	Indicate the percentage of gaming activity operated in								
а	The organiza	ation's facility			13a				
b	An outside f	acılıty			13b	100 000 %	1		
14	Provide the records	name and address of th	e person who prepares the o	organization's gaming/s	pecial e	vents books and			
	Name 🟲	Erıka Gomez					-		
	Address 🟲	2506 35th Ave S Fargo, ND 58104					_		
15a			act with a third party from w			· -	15a		No
ь	If "Yes," ent	er the amount of gamın	g revenue received by the c	organization 🟲 \$		and the			
	amount of ga	amıng revenue retained	by the third party 🟲 \$						
c	If "Yes," ent	er name and address							
	Name 🟲						_		
	Address 🟲								
16	Gaming man	ager information							
	Name 🟲	Charlotte Viou							
	Gaming man	ager compensation 🟲 \$	542,7	780					
	Description	of services provided 🟲	Oversee gaming operation	ns					
	Director,	officer/	Employee	┌ Independe	nt conti	actor			
17	Mandatory d	ıstrıbutıons							
а			tate law to make charitable				17a		No
b			quired under state law distr	•	organıza	ations or spent	1/4		140

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DLN: 93493133041120

Employer identification number

OMB No 1545-0047

Schedule J (Form 990)

Name of the organization

ın Part III

Department of the Treasury

Internal Revenue Service

Compensation Information

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.

2008

Open to Public Inspection

Red	River Human Services Foundation					
			45-0353814			
Pa	rt I Questions Regarding Compensation					
					Yes	Νo
1a	Check the appropriate box(es) if the organization provide					
	990, Part VII, Section A, line 1a Complete Part III to	provide any relevant information regard	ling these items			
	First class or charter travel	Housing allowance or residence for				
	Travel for companions	Payments for business use of pers				
	Tax idemnification and gross-up payments	Health or social club dues or initia				
	Discretionary spending account	Personal services (e g , maid, cha	uffeur, chef)			
b	If line 1a is checked, did the organization follow a writt provision of all the expenses described above? If "No,"		ement or	1b		
2	Did the organization require substantiation prior to reir officers, directors, trustees, and the CEO/Executive D		•	2		
3	Indicate which, if any, of the following the organization organization's CEO/Executive Director Check all that Compensation committee		he			
	Independent compensation consultant	Compensation survey or study				
	Form 990 of other organizations	Approval by the board or compens	sation committee			
4	During the year, did any person listed in Form 990, Pai	rt VII, Section A, line 1a				
а	Receive a severance payment or change of control pay	ment?		4a		Νo
ь	Participate in, or receive payment from, a supplementa			4b		Νo
С		·		4c		Νο
	If "Yes" to any of lines 4a-c, list the persons and provi		ı ın Part III			
	501(c)(3) and 501(c)(4) organizations only must comp	olete lines 5-8.				
5	For persons listed in form 990, Part VII, Section A, lin compensation contingent on the revenues of	e 1a, did the organization pay or accrue	any			
а	The organization?			5a		Νo
b	Any related organization?		Ţ	5b		Νo
	If "Yes," to line 5a or 5b, describe in Part III					
6	For persons listed in form 990, Part VII, Section A, lin compensation contingent on the net earnings of	le 1a, did the organization pay or accrue	any			
а	The organization?			6a		Νo
Ь	Any related organization?			6b		Νo
	If "Yes," to line 6a or 6b, describe in Part III		ļ			
7	For persons listed in form 990, Part VII, Section A, lin payments not described in lines 5 and 6? If "Yes," des	· · · · · · · · · · · · · · · · · · ·	on-fixed	7		Νo
8	Were any amounts reported in Form 990, Part VII, pair	d or accured pursuant to a contract that				

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	f W-2 and/or 1099-MI	SC compensation	(C) Deferred	(D) Nontaxable	(E) Total of columns	(F) Compensation
	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other compensation	compensation	benefits	(B)(ı)-(D)	reported in prior Form 990 or Form 990-EZ
Tom Newberger (I			232	17,956	14,555	163,214	
(ii							
(i)							
(ii)						
(i)							
(ii)						
(i)							
(ii)						
(i)							
(ii)						
(i)							
(ii)						
(i)							
(ii)						
(i)							
(ii)						

Part III Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8 Also complete this part for any additional information

Ident if ier	Return Reference	Explanation
-		
	·	

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(b)

DLN: 93493133041120

(d)

OMB No 1545-0047

Inspection

SCHEDULE M (Form 990)

Department of the Treasury

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

Non-Cash Contributions

Internal Revenue Service Name of the organization

(a)

Employer identification number Red River Human Services Foundation 45-0353814 Part I Types of Property

(c)

		Check	Number of Contributions	•	Method of de		nıng	
		ıf applicable		Form 990, Part VIII, line 1g	reven	ues		
1	Art—Works of art	аррисавіс		19				
	Art—Historical treasures .							
	Art—Fractional interests							
	Books and publications							
	Clothing and household							
	goods	X		117,151	Actual sales price			
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property							
	Securities—Publicly traded .							
10	Securities—Closely held stock $\ .$							
11	Securities—Partnership, LLC, or trust interests							
12	Securities—Miscellaneous							
	Qualified conservation contribution (historic structures)							
14	Qualified conservation contribution (other)							
15	Real estate—Residential .							
16	Real estate—Commercial							
	Real estate—Other							
	Collectibles							
19	Food inventory							
20	Drugs and medical supplies .							
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts							
	Other (describe)							
	Other (describe)							
	Other (describe)							
	Other (describe)							
	Number of Forms 8283 received which the organization complete Acknowledgement			ar for contributions for	29			
30a	During the year, did the organiza	ition receiv	e by contribution any prope	erty reported in Part I, lines	1-28 that it must		Yes	No
	least three years from the date of	of the initial	contribution, and which is	not required to be used for e	exempt purposes			
	for the entire holding period? .					30a		No
b	If "Yes", describe the arrangeme	ent in Part 1	II					
31	Does the organization have a gif	·		·		31]	No
32a	Does the organization hire or use contributions?	•	•	to solicit, process, or sell i	non-cash	32a		Νo
	If "Yes", describe in Part II							
33	If the organization did not report checked, describe in Part II	revenuesı	n Column (c) for a type of p	property for which Column (a	ı) ıs			
For P	aperwork Reduction Act Notice, see	the Instruct	tions for Form 990.	Cat No 51227J	Schedule	M (For	m 990'	2008

Supplemental Information. Complete this part to provide the information required by Part I, lines 30b, 32b, and 33. Also complete this part for any additional information.							
Identifier	ReturnReference	Explanation					
240111111	Notal III Colored	Explanation					
	1	1					

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DLN: 93493133041120

SCHEDULE 0

Department of the Treasury
Internal Revenue Service

(Form 990)

Supplemental Information to Form 990

► 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.

2008

Open to Public Inspection

Name of	t he organizat ion	
Red River	Human Services Foundation	

Employer identification number

45-0353814

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section A, line 6		Only one class of members - all have the same voting rights. Staff and board members can become a member for \$10 - any other individuals or corporations can become a member for \$25

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section A, line 7a		At the annual meeting the members elect the governing body

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section A, line 8b		There were no committees with authority to act on behalf of the full board

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section A, line 10		The CEO, Financial director and assistant financial director will review the 990 prior to a draft copy being submitted to board members via email to review the draft before it is submitted for filing

ldentifier	Return Reference	Explanation			
Form 990, Part VI, Section B, line 15		In 2004 the board used a market feasability study to determine fair market value of the CEO's compensation. The feasability study is done about every three years. The state legislature sets the rate increase for the interim years in April of each year. The CEO position is the only position that the board approves the salary.			

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section C, line 19		Upon request

Additional Data

Software ID: Software Version:

EIN: 45-0353814

Name: Red River Human Services Foundation

Form 990, Part VIII - Statement of Revenue - 2a - 2g Program Service Revenue -

	Business Code	(A) Total Revenue	(B) Related or Exempt Function Revenue	(C) Unrelated Business Revenue	(D) Revenue Excluded from Tax under IRC 512, 513, or 514
a Residential and Day Pr	623,990	6,541,161	6,541,161		
b Thrıft Store	453,310	117,151			117,151
c Regional Trainer	900,099	93,136	93,136		
d Activity Center	900,099	7,823	7,823		
e Miscellaneous Revenue	900,099	5,006	5,006		