

See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



990 orm

Department of the Treasury

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)

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

2009

Open to Public

Internal F	Revenue	Service Fine or	ganization may have to use	e a copy of this return to satisfy	state reporting	g requirements	Inspection	
A For	the .	2009 calendar yea	r, or tax year beginning 07-	01-2009 and ending 06-30-20:	LO	D Employer ide	ntification number	
_		pplicable Please	C Name of organization RIVERDALE COUNTRY SCHOOL	-		' '		
Add —		label or	Doing Business As			13-1740483 E Telephone nu		
Nam		type. See				(718) 519-2	708	
┌ Initi		Instruc-	Number and street (or P O bo 5250 FIELDSTON ROAD	ox if mail is not delivered to street addr	ess) Room/suite	G Gross receipts s		
Terr 						<u> </u>		
Ame			City or town, state or country, BRONX, NY 10471	and ZIP + 4				
App	lication	n pending]		
			ne and address of principal Schultz	officer		ns a group return ates?	for	
		5250 F	FIELDSTON ROAD		allilli	ates	j tes je no	
		BRONX	(,NY 10471		1	ll affiliates include	·	
I Tax	-exem	npt status 🔽 501(c)) (3) 4 (insert no)	a)(1) or	_	o," attach a list up exemption nui	(see instructions)	
		■: ► WWW RIVERD			H(c) Gro	up exemption har	ilber F	
					1	T		
K Form Par		ganization / Corporat Summary	tion Trust Association 0	ther 🟲	L Year of fo	ormation 1930 M	State of legal domicile NY	
Гаг			e organization's mission or	most significant activities				
ا م		•	CTIVITIES PRE-K THROL					
Governance								
<u> </u>								
<u> </u>	2	Check this box 🛏	if the organization discon	tinued its operations or dispose	d of more than	25% of its net a	ssets	
	3	_	-	ody (Part VI, line 1a)			3	
Activities &	4			e governing body (Part VI, line 1	b)		2	
	5		nployees (Part V, line 2a)				44	
[6 70		olunteers (estimate if neces	sary) Part VIII, column (C), line 12		6	-	
		<u>-</u>	iness taxable income from F	, , ,,		7a 7b		
					Prie	or Year	Current Year	
	8	Contributions and	d grants (Part VIII, line 1h)		7,094,559	5,185,478	
율	9	Program service	revenue (Part VIII, line 2g)		38,578,955	41,749,422	
Revenue	10	Investment incor	me (Part VIII, column (A),		-7,316,925	770,314		
	11	Other revenue (P	art VIII, column (A), lines	5, 6d, 8c, 9c, 10c, and 11e)		1,422,909	1,190,829	
	12			t equal Part VIII, column (A), lır	ne	39,779,498	48,896,043	
	13			olumn (A), lines 1-3)		5,823,110	6,010,117	
	14			umn (A), line 4)			C	
<i>w</i>	15		ompensation, employee ber	efits (Part IX, column (A), lines	5-	26.102.662	27.240.007	
<u>8</u>	16-	10)	Irosona face (Port IV colun	nn (A), line 11e)		26,183,662	27,318,007	
Expenses	16a b						C	
D	17		enses (Part IX, column (D), line 2	l1a-11d, 11f-24f)		13,509,287	13,168,207	
	18			al Part IX, column (A), line 25)		45,516,059	46,496,331	
	19			m line 12		-5,736,561	2,399,712	
<u>%</u> ह		•			_	g of Current	End of Year	
Net Assets or Fund Balances	30	T-1-1 : /5	mt V June 163			Year		
Ass HBs	20 21		rt X, line 16)			139,506,414	145,512,845	
2 E	21	-	nd balances Subtract line 2			76,317,083	65,279,140 80,233,705	
Par		Signature Blo		1 1101111111111111111111111111111111111		70,317,003	00,233,703	
		Under penalties of pe	erjury, I declare that I have exam	ned this return, including accompanyin				
		and belief, it is true, o	correct, and complete Declaration	n of preparer (other than officer) is bas	ed on all informa	tion of which prepare	r has any knowledge	
Sign		*****			2011	-05-04		
Here		Signature of office	er		Date			
		Daniel Schultz Dire						
		Type or print nam	e and title			1		
		Preparer's FREDE	ERICK H ROTHMAN	Date	Check if self-	Preparer's identify (see instructions)		
Paid -		signature FREDE	RICK II KOTHPIAN		empolyed •	(See instructions)		
Prepa		Firm's name (or yours	s LOEB & TROPER LLP	EIN Þ				
Use C	nly	address, and ZIP + 4	655 THIRD AVENUE 12TH FL					
			NEW YORK, NY 10017			Phone no 🕨 (2:	12) 867-4000	
1ay t	he IR	S discuss this retu	•	above? (see instructions)			✓ Yes No	

Part III Statement of Program Service Accomplishments

1	Briefly	describe	the	organization's	mission

See Schedule O

2				ervices during the year	which were not listed on	┌ Yes ┌ No	
	If "Yes," describe th	ese new services on S	chedule O				
3				nt changes in how it co	nducts, any program	┌ Yes ┌ No	
	If "Yes," describe th	ese changes on Sched	lule O				
4	Section 501(c)(3) a	nd 501(c)(4) organiza	tions and secti	_	largest program services by ire required to report the am service reported	•	nd
4a	(Code) (Expenses \$	34,872,191	ıncludıng grants of \$	6,010,117) (Revenue \$	41,749,4	22)
	see schedule o						
4b	(Code) (Expenses \$		including grants of \$) (Revenue \$)
) (2		
4c	(Code) (Expenses \$		including grants of \$) (Revenue \$)
4d	Other program serv	vices (Describe in Sch	hedule O)				
	(Expenses \$	•	luding grants o	f \$) (Revenue \$)	
4e	Total program serv	ice expenses ⊁ \$	34,872,19	1			

Part IV	Check	dist 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		N o
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4		Νο
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 similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? <i>If "Yes," complete Schedule D, Part II</i>	7		Νο
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 2	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, directly or through a related organization, hold assets in term, permanent,or quasiendowments? If "Yes," complete Schedule D, Part V	10	Yes	
11	Is the organization's answer to any of the following questions "Yes"? If so,complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable	11	Yes	
	◆ Did the organization report an amount for land, buildings, and equipment in Part X, line10? If "Yes," complete Schedule D, Part VI.			
	◆ Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.			
	◆ Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.			
	◆ Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.			
	◆ Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.			
	◆ Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X.			
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12	Yes	
12A	Was the organization included in consolidated, independent audited financial statements for the tax year? Yes No			
	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional	ĺ		
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	Yes	
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Νο
Ь	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I	14b		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 U S? If "Yes," complete Schedule F, Part II	15		Νο
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 U S ? If "Yes," complete Schedule F, Part III	16		Νο
17	Did the organization report a total of more than \$15,000, of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		Νο
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		Νο
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		Νο
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		Νο

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		Νο
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	Yes	
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 line 25	24a	Yes	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		Νo
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		Νο
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		No
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	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		N o
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		N o
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		Νο
28	Was the organization a party to a business transaction with one of the following parties? (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part			
		28a		Νο
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
С	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or owner? 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</i> " <i>Yes,"</i> complete Schedule N, Part II	32		Νο
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? <i>If "Yes," complete Schedule R, Part I</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		N o
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		Νο
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If</i> "Yes," complete Schedule R, Part V, line 2	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		N o
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	
		F	orm 99 0	(2009)

art V	Statements	Regarding	Other TR	S Filinas	and Tax	Compliance
	ota to illoito	itegai ailig	Otho: 210	g	ana ian	Compilation

			Yes	No
la	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	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			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions)	2b	Yes	
Ba	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a		No
ь	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		110
la	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	Yes	
b	If "Yes," enter the name of the foreign country Lord Fig. 8D. See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
ā	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Νο
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Νο
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?	5c		
а	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?	6a		Νo
	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
1	Organizations that may receive deductible contributions under section 170(c).			
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		Νo
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		Νo
	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal			
	benefit contract?	7e		Νo
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Νo
	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7h		
3	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
)	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
0	Section 501(c)(7) organizations. Enter			
	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			
1	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
.2a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the			
	year 12b			

5250 FIELDSTON ROAD Bronx,NY 10471 (718) 519-2726

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

Section A. Governing Body and Management

56	ection A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body			
ь	Enter the number of voting members that are independent 1b 29			
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		N o
3	Did the organization delegate control over management duties customarily performed by or under the direct	3		No
4	supervision of officers, directors or trustees, or key employees to a management company or other person? Did the organization make any significant changes to its organizational documents since the prior Form 990 was			
5	filed? Did the organization become aware during the year of a material diversion of the organization's assets?	5		No No
5 6	Does the organization have members or stockholders?	6		No
0 7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the			110
,	governing body?	7a		Νo
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	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
	ection B. Policies (This Section B requests information about policies not required by the Internal			
Ke	evenue Code.)		Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a		No
	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?	10b		
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?			
		11		Νo
11A	Describe in Schedule O the process, if any, used by the organization to review the Form 990			
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
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	Yes	
13	Does the organization have a written whistleblower policy?	13	Yes	
14	Does the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b		Νo
	If "Yes" to line a or b, describe the process in Schedule O (See instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
b	If "Yes," 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		
	ection C. Disclosure			
17	List the States with which a copy of this Form 990 is required to be filed NY Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990 T. (501(c))			
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you make these available. Check all that apply Own website. Another's website. Upon request			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public. See Additional Data Table			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the	ne orga	ınızatıor	n) =
	Daniel Schultz	J-		

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

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

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

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and current key employees Enter -0- in columns (D), (E), and (F) if no compensation was paid
- List all of the organization's current key employees. See instructions for definition of "key employee"
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any 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 i	not compen	sate any	y curi	rent	or fo	rmer	ffice	r, dırector, trustee	or key employee	
(A) Name and Title	(B) Average hours	that apply)						(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of other
	per week	Officer Institutional Trustee Individual trustee or director		Officei	Key employee	Highest compensated employee	Former	from the organization (W- 2/1099-MISC)	from related organizations (W- 2/1099- MISC)	compensation from the organization and related organizations
See add'l data										

1b	Total .	1									•	1,825,843	0)	350,470

Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization ▶60

			Yes	No
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee			
	on line 1a? If "Yes," complete Schedule J for such individual	3		Νo
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organizations greater than \$150,000? If "Yes," complete Schedule J for such			
	ındıvıdual	4	Yes	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? If "Yes," complete Schedule J for such person	_		N o

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

(A) Name and business address	(B) Description of services	(C) Compensation
FREDCO SPORTS 315 HOWE AVENUE PASSAIC, NJ 07055	Construction	2,358,296
MARIO BULFAMONTE & SONS LANDSCAPING 75 PORTMAN ROAD NEW ROCHELLE, NY 10801	Landscaping	463,279
SUPERTRANS NY INC 60 ALEXANDER STREET yonkers, NY 10701	School Bus Transportation Services	250,449
CAMPANA MANSORYINC 242 WHITE PLAINS ROAD TUCKAHOE, NY 10707	General Maintenance & Repairs	238,350
AQUILINE ADVISORS LLC 535 MADISON AVENUE new york, NY 10022	Investment Consultant	235,000
2 Total number of independent contractors (including but not limited to those listed above) \$100,000 in compensation from the organization ►10) who received more than	

Page 8

	Page 9								
Part V	<u>/1111</u>	Statement o	of Revenue		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512,513, or 514	
nts ots	1a	Federated camp	paigns 1a						
e Ta	b	Membership du	es 1b						
Contributions, gifts, grants and other similar amounts	c	Fundraising eve	ents 1c						
	d		rations 1d	275 247					
Ã. Ω.Ω	e	Government grants		375,247					
tributic other	f g	sımılar amounts no	butions included in	4,810,231					
a Co	h	Total. Add lines	3 1a-1f	▶	5,185,478				
				Business Code					
Program Serwce Revenue	2a b	TUITION		611,710	41,749,422	41,749,422			
е; П	С								
ž Š	d								
S =	e								
<u>S</u>	f	All other progra	ım service revenue						
ř	g	Total. Add lines	 		41,749,422				
	3	Investment inc	ome (including dividend	ds, interest					
			ar amounts)	F-	473,017			473,017	
	4		tment of tax-exempt bond p	· · · · . +					
	5	Royalties	(ı) Real	(II) Personal					
	6a	Gross Rents	78,921	(II) P el solial					
	ь	Less rental	75,841						
	c	expenses Rental income	3,080						
	d	or (loss) Net rental incoi	ll me or (loss)		3,080			3,080	
			(ı) Securities	(II) O ther					
	7a	Gross amount from sales of assets other than inventory	7,429,404						
	b	Less cost or other basis and	7,132,107						
	c	sales expenses Gain or (loss)	297,297						
	d	Net gaın or (los	s)	▶	297,297			297,297	
d١	8a	Gross income for							
Other Revenue		\$	reported on line 1c)						
<u> </u>	Ь	less directevi	a penses b						
₹	c		loss) from fundraising e	events ►					
	9a	Gross income fi See Part IV, lin	rom gaming activities e 19						
	b c		penses b loss) from gaming activ	vities					
	10a	Gross sales of returns and allo	wances .						
	Ь	less costofa	a oods sold b	51,222 44,287					
	c		loss) from sales of inve		6,935			6,935	
		Miscellaneous	s Revenue	Business Code					
	11a	Other Revenue		900,099	712,880			712,880	
	Ь	Riverclub		611,710	272,049			272,049	
	С	Day Care Cente		624,410	195,885			195,885	
	d	All other revenu	L						
	e	Total. Add lines	s 11a-11d		1,180,814				
	12	Total revenue.	See Instructions	. •	48,896,043	41,749,422	0	1,961,143	

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.										
	ll other organizations must complete column (A) but are not required to		(B), (C), and (B)	(D). (C)	(D)					
	ot include amounts reported on lines 6b, o, 9b, and 10b of Part VIII.	(A) Total expenses	Program service expenses	Management and general expenses	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	6,010,117	6,010,117							
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	1,305,835	1,083,961	221,874						
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	20,737,031	16,515,256	3,472,004	749,771					
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	1,420,780	1,123,253	244,786	52,741					
9	Other employee benefits	2,161,878	1,727,277	358,101	76,500					
10	Payroll taxes	1,692,483	1,350,640	283,787	58,056					
11	Fees for services (non-employees)									
а	Management									
b	Legal	156,744		156,744						
С	Accounting	57,542		57,542						
d	Lobbying									
e	Professional fundraising See Part IV, line 17									
f	Investment management fees	254,497		254,497						
g	Other	462,442	373,952	37,899	50,591					
12	Advertising and promotion	800	800							
13	Office expenses	3,423,602	1,609,071	1,635,136	179,395					
14	Information technology	70,838		70,838						
15	Royalties									
16	Occupancy	679,824	12,000	667,824						
17	Travel	666,643	630,551	31,112	4,980					
18	Payments of travel or entertainment expenses for any federal, state, or local public officials									
19	Conferences, conventions, and meetings	110,389	85,240	25,149						
20	Interest	1,811,390		1,811,390						
21	Payments to affiliates									
22	Depreciation, depletion, and amortization	2,556,111	2,556,111							
23 24	Insurance	269,575	18,595	250,980						
	total expenses shown on line 25 below)									
а	MISCELLANEOUS	2,315,630	1,480,516	558,848	276,266					
b	Bad Debt Expense	226,096	222,346	3,750						
c	Recruitment	106,084	72,505	33,579						
d										
e										
f	All other expenses									
25	Total functional expenses. Add lines 1 through 24f	46,496,331	34,872,191	10,175,840	1,448,300					
26	Joint costs. Check here ► ☐ If following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation									

Pa	rt X	Balance Sheet					
					(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing			4,281,918		146,552
	2	Savings and temporary cash investments			16,970,673	-	21.575.301
	3	Pledges and grants receivable, net	•		6,978,755		4,672,044
	4	Accounts receivable, net	•		104,974	H	81,434
	5	Receivables from current and former officers, directors, trustees	s kev	employees and		-	
		highest compensated employees Complete Part II of	, KC,	employees, and			
		Schedule L				5	_
ssets	6	Receivables from other disqualified persons (as defined under spersons described in section $4958(c)(3)(B)$ Complete Part II of		n 4958(f)(1)) and			
		Schedule L		6			
	7	Notes and loans receivable, net	and loans receivable, net				
8	8	Inventories for sale or use			14,897	8	18,797
⋖	9	Prepaid expenses and deferred charges			572,726	9	627,392
	10a	Land, buildings, and equipment cost or other basis <i>Complete</i> Part VI of Schedule D	10a	95,428,955			
	b	Less accumulated depreciation	10b	28,696,500	65,096,512	10c	66,732,455
	11	Investments—publicly traded securities			30,125,847	11	29,913,330
	12	Investments—other securities See Part IV, line 11		13,572,303	12	20,023,886	
	13	Investments—program-related See Part IV, line 11		13			
	14	Intangible assets		14			
	15	Other assets See Part IV, line 11	1,787,809	15	1,721,654		
	16	Total assets. Add lines 1 through 15 (must equal line 34) .			139,506,414	16	145,512,845
	17	Accounts payable and accrued expenses .	3,654,585	17	4,348,845		
	18	Grants payable		18			
	19	Deferred revenue			26,511,421	19	27,448,450
	20	Tax-exempt bond liabilities		20			
Sej	21	Escrow or custodial account liability Complete Part IV of Schedul	eD.			21	
Liabilities	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified					
Lia		persons Complete Part II of Schedule L				22	
	23	Secured mortgages and notes payable to unrelated third parties			28,950,000	23	28,250,000
	24	Unsecured notes and loans payable to unrelated third parties				24	
	25	Other liabilities Complete Part X of Schedule D			4,073,325	25	5,231,845
	26	Total liabilities. Add lines 17 through 25			63,189,331	26	65,279,140
-S		Organizations that follow SFAS 117, check here ▶ 🔽 and comp	lete l	ines 27			
9		through 29, and lines 33 and 34.					
<u> </u>	27	Unrestricted net assets			55,694,977	27	62,359,291
ũ	28	Temporarily restricted net assets		7,553,017	28	4,803,353	
Fund Balance	29	Permanently restricted net assets		13,069,089	29	13,071,061	
Fu		Organizations that do not follow SFAS 117, check here ► ar	ıd con	ıplet e			
oľ		lines 30 through 34.				_	
Assets	30	Capital stock or trust principal, or current funds				30	
SS	31	Paid-in or capital surplus, or land, building or equipment fund				31	
	32	Retained earnings, endowment, accumulated income, or other fu	ınas		76 247 002	32	90 222 705
Net	33	Total net assets or fund balances			76,317,083		80,233,705
	34	Total liabilities and net assets/fund balances			139,506,414	34	145,512,845

Part XI Financial Statements and Reporting

			Yes	No
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	
c	If "Yes," to 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? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	2c	Yes	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both			
	Separate basis Consolidated basis Both consolidated and separated basis			
3а	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		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3b		

Form **990** (2009)

Employer identification number

Cine GRATILE PLINE DO NOT I ROCES

SCHEDULE A (Form 990 or 990EZ)

Name of the organization

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

▶ Attach to Form 990 or Form 990-EZ. ► See separate instructions.

OMB No 1545-0047

2009

Open to Public Inspection

RIVERDALE COUNTRY SCHOOL 13-1740483 Reason for Public Charity Status (All organizations must complete this part.) See instructions The organization is not a private foundation because it is (For lines 1 through 11, check only one box) A church, convention of churches, or association of churches section 170(b)(1)(A)(i). $\overline{\mathbf{v}}$ A school described in section 170(b)(1)(A)(ii). (Attach Schedule E) 7 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi) (Complete Part II) A community trust described in section 170(b)(1)(A)(vi) (Complete Part II) An organization that normally receives (1) more than 331/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 331/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III) 10 An organization organized and operated exclusively to test for public safety Seesection 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h c Type III - Functionally integrated Type III - Other Type I **b** Type II By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) If the organization received a written determination from the IRS that it is a Type I, Type II or Type III supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? (i) a person who directly or indirectly controls, either alone or together with persons described in (ii) Yes No and (III) below, the governing body of the the supported organization? 11g(i) (ii) a family member of a person described in (i) above? 11g(ii) (iii) a 35% controlled entity of a person described in (i) or (ii) above? 11g(iii) Provide the following information about the supported organization(s) h

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 9 above or IRC section (see	(iv) Is the organization in col (i) listed in your governing document?		organizati col (i) of	(v) Did you notify the organization in col (i) of your support?		on in anized S ?	(vii) A mount of support?
		instructions))	Yes	No	Yes	No	Yes	No	
Total									

ınstructions

P	Support Schedule (Complete only if yo					and 170(b)	(1)(A)(vi)
S	ection A. Public Support	a checked tile	DOX OII IIIC 3,	,, or o or rare.	֥ <i>)</i>		
	endar year (or fiscal year beginning	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
	ın)	(a) 2005	(b) 2006	(6) 2007	(d) 2008	(e) 2009	(I) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not						
	include any "unusual						
_	grants ") Tax revenues levied for the						
2	organization's benefit and either						
	paid to or expended on its						
	behalf						
3	The value of services or facilities						
_	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions by						
	each person (other than a						
	governmental unit or publicly						
	supported organization) included on						
	line 1 that exceeds 2% of the						
	amount shown on line 11, column						
_	(f) Dublic Support Subtract line F from						
6	Public Support. Subtract line 5 from line 4						
S	ection B. Total Support	1		-			
	endar year (or fiscal year beginning	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
	ın)	(a) 2005	(b) 2000	(6) 2007	(d) 2008	(e) 2009	(1) Total
7	A mounts from line 4						
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar						
9	sources Net income from unrelated						
9	business activities, whether or						
	not the business is regularly						
	carried on						
10	Other income (Explain in Part						
	IV) Do not include gain or loss						
	from the sale of capital assets						
11	Total support (Add lines 7						
4.5	through 10)	/5					
12	Gross receipts from related activities	,	•			12	
13	First Five Years If the Form 990 is f	or the organizati	on's first, second	, third, fourth, or	fifth tax year as a	501(c)(3) orga	inization, ▶□
	check this box and stop here						-1
S	ection C. Computation of Pub	lic Support P	ercentage				
14	Public Support Percentage for 2009			11 column (f))		14	
15	Public Support Percentage for 2008	Schedule A . Pa	rt II. line 14			15	
	33 1/3% support test—2009. If the	•	,	v on line 13 and	line 14 is 33 1/30		k this hox
	and stop here. The organization qua	-		·	IIIIC 14 13 33 1/3/	o or more, ence	▶ □
ь	33 1/3% support test—2008. If the				5a, and line 15 is	33 1/3% or moi	
	box and stop here. The organization				,		▶
17a	10%-facts-and-circumstances test-	-2009. If the org	anızatıon dıd not	check a box on lı	ne 13, 16a, or 16	b and line 14	
	ıs 10% or more, and ıf the organizat						
	in Part IV how the organization mee	ts the "facts and	l cırcumstances"	test The organiz	ration qualifies as	a publicly supp	
L	organization	_2009 Ifthe c==	onization did net	chack a bay as li	no 12 165 164	or 17a and line	▶□
D	10%-facts-and-circumstances test- 15 is 10% or more, and if the organ	_					
	Explain in Part IV how the organizat						clv
	supported organization						▶ ┌
10	Deiveta Farmdation Ifthe averages	on did not obselv	a hay an line 12	16- 16- 17-	17	hay and cas	•

▶□

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

	(Complete only if you	cnecked the	box on line 9 o	r Part I.)			
	ction A. Public Support			<u> </u>	1	T	ı
Cale	ndar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not						
_	include any "unusual grants ")						
2	Gross receipts from admissions, merchandise sold or services						
	performed, or facilities furnished in						
	any activity that is related to the						
	organization's tax-exempt						
3	purpose Gross receipts from activities that				+		
3	are not an unrelated trade or						
	business under section 513						
4	Tax revenues levied for the						
	organization's benefit and either						
	paid to or expended on its behalf						
5	The value of services or facilities						
_	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5				-		
7a	A mounts included on lines 1, 2, and 3 received from disqualified						
	persons				1		
ь	Amounts included on lines 2 and 3						
	received from other than						
	disqualified persons that exceed						
	the greater of \$5,000 or 1% of the amount on line 13 for the year						
с	Add lines 7a and 7b						
8	Public Support (Subtract line 7c						
	from line 6)						
	ction B. Total Support		1			1	Γ
Cale	ndar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9	A mounts from line 6						
10a	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources						
ь	Unrelated business taxable						
	ıncome (less section 511 taxes)						
	from businesses acquired after						
_	June 30, 1975 Add lines 10a and 10b						
c 11	Net income from unrelated						
11	business activities not included						
	ın lıne 10b, whether or not the						
	business is regularly carried on						
12	Other income Do not include gain or loss from the sale of						
	capital assets (Explain in Part						
	IV)						
13	Total support (Add lines 9, 10c,						
14	11 and 12) First Five Years If the Form 990 is for	or the organizat	lon's first, second	L third fourth or	l fifth tax vear as a	1 a 501(c)(3) organ	l uzation
	check this box and stop here	or the organizat		., 4,	men tax your as t	(c)(c) c.gu.	▶ ┌
	ction C. Computation of Publ						
15	Public Support Percentage for 2009	(line 8 column	(f) divided by line	13 column (f))		15	
16	Public support percentage from 200	8 Schedule A , F	art III, line 15			16	
Se	ction D. Computation of Inve	stment Inco	ome Percenta	ge			
17	Investment income percentage for 2	009 (line 10c c	olumn (f) dıvıded	by line 13 columi	n (f))	17	
18	Investment income percentage from	2008 Schedule	A, Part III, line 1	L 7		18	
19a	33 1/3% support tests—2009. If the	organization di	d not check the b	ox on line 14, and	d line 15 is more	than 33 1/3% and	d line 17 is not
	more than 33 1/3%, check this box a	ind stop here. T					
L	organization 33 1/3% support tests—2008. If the	► C	d not chastes here	on line 14 amilion	100 and line 4	5 ic mara +ha= 22	1/20/2 and line
b	שר בו בע suppoit tests—zouo. If the	organization (I	и посепеска вох	OILLINE TH OLINE	= ⊥⊃a, anu nne 1(us more man 33	1/370 and ine

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

Part IV

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

Schedule A (Form 990 or 990-EZ) 2009

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

DLN: 93493126011061

OMB No 1545-0047

SCHEDULE D (Form 990)

Department of the Treasury

Supplemental Financial Statements

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

Open to Public

rnal R	evenue Service	► Attach to Fe	orm 990. ► See separate instructions.			Inspect	ion
	e of the organi			Emp	oloyer identifica	ion numbe	er .
TAEK	DALL COUNTRY S	CHOOL		13-	1740483		
art			lvised Funds or Other Similar F			. Complet	e if the
	organiz	zation answered "Yes" to Form 99	· · · · · · · · · · · · · · · · · · ·	T .	/b)		-1-
т	otal number a	t and afvent	(a) Donor advised funds	1	(b) Funds and of	neraccou	nts
	otal number a	·					
		tributions to (during year) hts from (during year)					
		ie at end of year					
ı	Did the organiz	zation inform all donors and donor advi	l sors in writing that the assets held in do organization's exclusive legal control?	nor adv	ısed	┌ Yes	Г No
[Did the organizused only for c	zation inform all grantees, donors, and	donor advisors in writing that grant funds	•		☐ Yes	┌ No
rt	TT Conse	rvation Easements. Complete	ıf the organızatıon answered "Yes" i	to Forr	n 990, Part IV	<u>, lıne 7.</u>	
]]]	Preservati Protection Preservati	conservation easements held by the o ion of land for public use (e g , recreati i of natural habitat ion of open space s 2a-2d if the organization held a qual he last day of the tax year		certifie	d historic struct	· -	a
					Held at the	End of the	Year
-	Total number o	of conservation easements		2a			
-	Total acreage	restricted by conservation easements		2b			
ı	Number of con	servation easements on a certified his	toric structure included in (a)	2c			
I	Number of con	servation easements included in (c) a	equired after 8/17/06	2d			
t	the taxable yea Number of stat	es where property subject to conserva	rred, released, extinguished, or terminat stion easement is located ► s the periodic monitoring, inspection, han			iuring	
•	enforcement of	fthe conservation easements it holds?				☐ Yes	☐ No
		3,	ng, and enforcing conservation easer		, , , , , , , , , , , , , , , , , , ,		
		iservation easement reported on line 2) and 170(h)(4)(B)(ii)?	(d) above satisfy the requirements of se	ction		☐ Yes	┌ No
ŀ	balance sheet,	<u>-</u>	onservation easements in its revenue an he footnote to the organization's financia nents		•		
rt			ns of Art, Historical Treasures, 'Yes" to Form 990, Part IV, line 8.	or Ot	her Similar <i>I</i>	Assets.	
ä	art, historical t	reasures, or other similar assets held	116, not to report in its revenue statem for public exhibition, education or resear ancial statements that describes these	rch ın fu			<u>.</u> ,
ı	historical treas	· ·	116, to report in its revenue statement bublic exhibition, education, or research			•	
((i) _{Revenues 1}	ncluded in Form 990, Part VIII, line 1			► \$		
((ii) Assets inc	luded in Form 990, Part X			► \$		
]	If the organiza	·	orical treasures, or other similar assets f S 116 relating to these items	or finan			
ı	Revenues incli	uded in Form 990, Part VIII, line 1			▶ \$		
		, , =					

b Assets included in Form 990, Part X

ar	Titl Organizations Maintaining Co	<u>llections of Art</u>	, His	toric	<u>:al Tre</u>	ası	ires, or (<u> 2the</u>	er Similai	r Asse	ets (co	ntınued)
3	Using the organization's accession and othe items (check all that apply)	r records, check any	y of th	e follo	owing the	at ar	re a signific	ant ı	use of its co	llectio	n	
а	Public exhibition		d	Γ	Loan or	exc	hange prog	rams	5			
b	Scholarly research		e	Γ	Other							
c	Preservation for future generations											
1	Provide a description of the organization's co	ollections and expla	ın hov	v they	further	the	organızatıo	n's e	xempt purp	ose in		
5	During the year, did the organization solicit of assets to be sold to raise funds rather than t								nılar	Г	Yes	┌ No
Pai	t IV Escrow and Custodial Arrang						n answere	ed "\	es" to For	m 990	Ͻ,	
	Part IV, line 9, or reported an ar											
.a	Is the organization an agent, trustee, custoo included on Form 990, Part X?					ons	or other as	sets	not	Γ	Yes	Г No
b	If "Yes," explain the arrangement in Part XI	√ and complete the	follow	ing ta	ble		Ī			_		
_										A mo	unt	
с	Beginning balance							1c				
d	Additions during the year							1d				
e	Distributions during the year							1e				
f	Ending balance							1f				
a	Did the organization include an amount on Fe	orm 990, Part X, line	e 21?							Γ	Yes	┌ No
	If "Yes," explain the arrangement in Part XIV	/										
Pa	rt V Endowment Funds. Complete											
		(a)Current Year 13,384,051	(b	Prior	Year ,191,138	(c)	Two Years Ba	:k (c	1) Three Years	Back (e	e)Four Ye	ars Back
a	Beginning of year balance			13				+				
b	Contributions	282,222 894,431			192,913			+				
с	Investment earnings or losses	694,431						+				
d	Grants or scholarships	935.003						+				
e	Other expenditures for facilities and programs	825,092										
f	Administrative expenses											
g	End of year balance	13,455,362		13	,384,051			\top				
2	Provide the estimated percentage of the yea	r end balance held a	as									
а	Board designated or quasi-endowment											
ь	Permanent endowment - 97.140 %											
	remailent endowment P											
c Ba	Term endowment > 2.860 % Are there endowment funds not in the posse	ssion of the organiz:	ation t	that a	re held a	and s	administara	d for	the			
_	organization by	John of the organize	201011	ac a	i c iicia c						Yes	No
	(i) unrelated organizations									3a(i)		Νο
	(ii) related organizations									3a(ii)		No
b	If "Yes" to 3a(II), are the related organization							•		3Ь		
	Describe in Part XIV the intended uses of th											
'a	t VI Investments—Land, Building	s, and Equipme	nt. S	ee Fo	orm 990	0, P.				Т		
	Description of investment				Cost or oth (investme		(b)Cost or o basis (oth		(c) Accumu depreciat		(d) Boo	k value
a	Land						4,47	3,167			4	,473,167
b	Buildings						79,53	4,376	19,9	12,930	59	,621,446
c	Leasehold improvements											
d	Equipment				<u> </u>		11,42	1,412	8,7	83,570		2,637,842
e	Other											

66,732,455

Part VII Investments—Other Securities. See (a) Description of security or category			d of valuation
(including name of security)	(b)Book value	Cost or end-o	f-year market value
Financial derivatives Closely-held equity interests			
Other			
limited partnership	20,023,886		F
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)	20,023,886		
Part VIII Investments—Program Related. See	· · ·		
(a) Description of investment type	(b) Book value	(c) Metho	d of valuation
	(2) 20011 14140	Cost or end-o	f-year market value
Total (Column (h) should equal Form 990 Part X col (R) line 13)			
Total. (Column (b) should equal Form 990, Part X, col (B) line 13) Part IX Other Assets. See Form 990, Part X, line			
	e 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, lin	e 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, lin	e 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, Iir	e 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, Iir	e 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, Iir	e 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, Iir	e 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, Iir	e 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, Iir	e 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, Iir	e 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, Iir	e 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, lin	e 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, Iir	e 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, Iir	e 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, Im (a) Descrip	e 15. tion		(b) Book value
Part IX Other Assets. See Form 990, Part X, Im (a) Descrip	e 15. tion 5.)	, , , , , , ,	(b) Book value
Part IX Other Assets. See Form 990, Part X, Im (a) Descrip	e 15. tion 5.)		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X	e 15. tion 5.) , line 25.		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability	e 15. tion 5.) , line 25.		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes	E 15. tion 5.) , line 25. (b) A mount		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes	E 15. tion 5.) , line 25. (b) A mount		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes	E 15. tion 5.) , line 25. (b) A mount		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes	E 15. tion 5.) , line 25. (b) A mount		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes	E 15. tion 5.) , line 25. (b) A mount		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes	E 15. tion 5.) , line 25. (b) A mount		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes	E 15. tion 5.) , line 25. (b) A mount	, , , , , -	(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes	E 15. tion 5.) , line 25. (b) A mount		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes	E 15. tion 5.) , line 25. (b) A mount	, , , , , , , ,	(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes	E 15. tion 5.) , line 25. (b) A mount		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes	E 15. tion 5.) , line 25. (b) A mount		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes	E 15. tion 5.) , line 25. (b) A mount		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes	E 15. tion 5.) , line 25. (b) A mount		(b) Book value

Second S	1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	48,896,043
A	2	Total expenses (Form 990, Part IX, column (A), line 25)	2	46,496,331
5	3	Excess or (deficit) for the year Subtract line 2 from line 1	3	2,399,712
Pro Pro	4	Net unrealized gains (losses) on investments	4	2,955,680
7	5	Donated services and use of facilities	5	
Note Chescribe in Part XIV) Reconciliation of Revenue per Audited Financial Statements Substanct Substa	6	Investment expenses	6	
Part Note Add lines Add lines Add Ad	7	Prior period adjustments	7	
Potal adjustments (net) Add lines 4 - 8 10 3,916,622	8	Other (Describe in Part XIV)	8	-1,438,770
Reconciliation of Revenue per Audited Financial Statements With Revenue per Return Total revenue, gains, and other support per audited financial statements 1 45,707,237 Amounts included on line 1 but not on Form 990, Part VIII, line 12 2a 2,955,680 Donated services and use of facilities 2b 2c C Recoveries of prior year grants 2d 120,128 E Add lines 2a through 2d 2e 3,075,808 Amounts included on Form 990, Part VIII, line 12, but not on line 1 a Investment expenses not included on Form 990, Part VIII, line 7b 4a 254,497 b Other (Describe in Part XIV) 4b 6,010,117 c Add lines 4a and 4b 40,632,095 a Donated services and loses per audited financial statements With Expenses per Return 1 Total expenses and losses per audited financial statements With Expenses per Return 1 Total expenses and losses per audited financial statements With Expenses per Return 1 Total expenses and losses per audited financial statements With Expenses per Return 2 Amounts included on line 1 but not on Form 990, Part IX, line 25 a Donated services and use of facilities 2b 40,632,095 a Donated services and use of facilities 2b 400,378 b Prior year adjustments 2c 400,378 c Other (Describe in Part XIV) 2d 400,378 a Add lines 2a through 2d 254,497 b Other (Describe in Part XIV) 25, but not on line 1: a Investment expenses not included on Form 990, Part IX, line 25, but not on line 1: a Investment expenses not included on Form 990, Part VIII, line 7b 4a 254,497 b Other (Describe in Part XIV) 4b 6,010,117 c Add lines 4a and 4b 4c 6,264,614 c Add lines 4a and 4b 4c 6,264,614 d Add lines 4a and 4	9		9	1,516,910
Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return 1	10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	3,916,622
1 Total revenue, gains, and other support per audited financial statements	Par		er R	eturn
Net unrealized gains on investments	1			45,707,237
b Donated services and use of facilities 2b 4 c Recoveries of prior year grants 2c 3 d Other (Describe in Part XIV) 2d 120,128 e Add lines 2a through 2d 2e 3,075,808 3 Subtract line 2e from line 1 3 42,631,429 4 Amounts included on Form 990, Part VIII, line 12, but not on line 1 4a 254,497 b Other (Describe in Part XIV) 4b 6,010,117 c Add lines 4a and 4b 4c 6,264,614 5 Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12) 5 48,896,043 Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return 1 Total expenses and losses per audited financial statements With Expenses per Return 2 A mounts included on line 1 but not on Form 990, Part IX, line 25 1 a Donated services and use of facilities 2a 40,632,095 a Prior year adjustments 2b 40,632,095 b Prior year adjustments 2c 40,03	2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
c Recoveries of prior year grants 2c 4 4 20 20 120,128 20 3 420,120,128 2 3,075,808 3 42,631,429 4 3,075,808 3 42,631,429 4 254,497 4 254,497 4 254,497 4 254,497 4 6,010,117 4 6,010,117 4 6,264,614 6,010,117 4 6,010,117 6 6,264,614 7 6 6,264,614 7 6 6,264,614 8 9,043 8 9,043 8 9,043 8 9,043 9 9,043 9 9,043 9 9,043 9 9,043 9 9,043 9 9,043 9 9,043 9 9,043 9 9,043 9 9,043 9 9,043 9 9 9,043 9 9 9,043 9 9 9,043 9 9 9,043 9 9 9,043 9 9 9,043 9 <th< th=""><th>а</th><th>Net unrealized gains on investments</th><th></th><th></th></th<>	а	Net unrealized gains on investments		
d Other (Describe in Part XIV) 2d 120,128 4 20,3075,808 3 3,075,808 3 42,631,429 3 42,631,429 4 3 42,631,429 4 4 254,497 4 254,497 4 254,497 4 254,497 4 6,010,117 4 6,010,117 4 6,010,117 4 6,010,117 4 6,040,117 4 6,040,117 4 6,040,117 4 6,040,117 4 6,040,117 4 6,040,614 5 48,896,043 8 96,043 8 96,043 96,043 96,043 96,043 97,043	b	Donated services and use of facilities		
e Add lines 2a through 2d 2e 3,075,808 3 Subtract line 2e from line 1 3 42,631,429 4 Amounts included on Form 990, Part VIII, line 12, but not on line 1 4a 254,497 4b b Other (Describe in Part XIV) 4b 6,010,117 4c 6,264,614 5 Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12) 5 48,896,043 Part XIII Reconciliation of Expenses per Audited Financial Statements 5 m 40,632,095 2 Amounts included on line 1 but not on Form 990, Part IX, line 25 1 40,632,095 a Prior year adjustments 2a 4 40,632,095 a Prior year adjustments 2a 4 40,632,095 a Other losses 2c 4 40,632,095 a Prior year adjustments 2a 4 4 c Other losses 2c 4 4 d Other (Describe in Part XIV) 2d 400,378 2e 400,378 3 Sub	c	Recoveries of prior year grants		
3	d	Other (Describe in Part XIV) 2d 120,128		
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 .	e	Add lines 2a through 2d	2e	3,075,808
Investment expenses not included on Form 990, Part VIII, line 7b 4a 254,497 4b 6,010,117 c Add lines 4a and 4b	3	Subtract line 2e from line 1	3	42,631,429
b Other (Describe in Part XIV)	4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
Add lines 4a and 4b	а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a 254,497		
Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	b	Other (Describe in Part XIV)		
Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return 1	c		4c	6,264,614
Total expenses and losses per audited financial statements				48,896,043
statements 1 2 A mounts included on line 1 but not on Form 990, Part IX, line 25 a Donated services and use of facilities 2a b Prior year adjustments 2b c Other losses 2c d Other (Describe in Part XIV) 2d 400,378 e Add lines 2a through 2d 2e 400,378 3 Subtract line 2e from line 1 3 40,231,717 4 A mounts included on Form 990, Part IX, line 25, but not on line 1: 3 40,231,717 b Other (Describe in Part XIV) 4a 254,497 b Other (Describe in Part XIV) 4b 6,010,117 c Add lines 4a and 4b 6,264,614			per	
2 A mounts included on line 1 but not on Form 990, Part IX, line 25 a Donated services and use of facilities	1		1	40,632,095
a Donated services and use of facilities . 2a . <th>2</th> <th></th> <th></th> <th></th>	2			
c Other losses 2c 2c d Other (Describe in Part XIV) 2d 400,378 e Add lines 2a through 2d 2c 400,378 3 Subtract line 2e from line 1 3 40,231,717 4 A mounts included on Form 990, Part IX, line 25, but not on line 1: 4a 254,497 b Other (Describe in Part XIV) 4b 6,010,117 c Add lines 4a and 4b 4c 6,264,614	а			
c Other losses 2c 2c d Other (Describe in Part XIV) 2d 400,378 e Add lines 2a through 2d 2c 400,378 3 Subtract line 2e from line 1 3 40,231,717 4 A mounts included on Form 990, Part IX, line 25, but not on line 1: 4a 254,497 b Other (Describe in Part XIV) 4b 6,010,117 c Add lines 4a and 4b 4c 6,264,614	b	Prior year adjustments		
e Add lines 2a through 2d	c			
3 Subtract line 2e from line 1 1 1 2 3 40,231,717 4 A mounts included on Form 990, Part IX, line 25, but not on line 1: 4 254,497 4 a Investment expenses not included on Form 990, Part VIII, line 7b 4a 254,497 4b b Other (Describe in Part XIV) 4c 6,010,117 c Add lines 4a and 4b 4c 6,264,614	d	Other (Describe in Part XIV)		
4 A mounts included on Form 990, Part IX, line 25, but not on line 1: a Investment expenses not included on Form 990, Part VIII, line 7b 4a 254,497 b Other (Describe in Part XIV)	e	Add lines 2a through 2d	2e	400,378
a Investment expenses not included on Form 990, Part VIII, line 7b 4a 254,497 b Other (Describe in Part XIV)	3	Subtract line 2e from line 1	3	40,231,717
b Other (Describe in Part XIV)	4	A mounts included on Form 990, Part IX, line 25, but not on line 1:		
c Add lines 4a and 4b	а	Investment expenses not included on Form 990, Part VIII, line 7b 4a 254,497		
	b	Other (Describe in Part XIV) 4b 6,010,117		
5 Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	c	Add lines 4a and 4b	4c	6,264,614
Part VIV Cupplemental Information			5	46,496,331

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

Part XIV Supplemental Information

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

Ident if ier	Return Reference	Explanation
Part V, Line 4	Description of Intended Use of Endowment Funds	The school's endowments were established for the continuous support of education in the School
Part X	Description of Uncertain Tax Positions Under FIN 48	Accounting for uncertainty in income taxes - Effective July 1, 2009, the School adopted the provision pertaining to uncertain tax positions (ASC Topic 740) and has determined that there are no material uncertain tax positions that require recognition or disclosure in the financial statements
Part XI, Line 8 - Other Adjustments		loss ON SWAP AGREEMENT -1158520 provision for bad debt for permanently restricted net assets -280250
Part XII, Line 2d - Other Adjustments		Cost of Goods Sold 44287 Rental Expenses 75841
Part XII, Line 4b - Other Adjustments		Financial aid 6010117
Part XIII, Line 2d - Other Adjustments		Cost of goods sold 44287 Provisions for bad debt - contributions 280250 Rental Expenses 75841
Part XIII, Line 4b - Other Adjustments		Financial aid 6010117

Employer identification number

SCHEDULE E

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

RIVERDALE COUNTRY SCHOOL

Schools

►Complete if the organization answered "Yes" to Form 990, Part IV, line 13, or Form 990-EZ, Part VI, line 48.

► Attach to Form 990 or Form 990-EZ.

OMB No 1545-0047

2009

Open to Public Inspection

	13-1740483			
			YES	NO
1	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws,			
	other governing instrument, or in a resolution of its governing body?	1	Yes	
2	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions,			
	programs, and scholarships?	2	Yes	
3	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way			
	that makes the policy known to all parts of the general community it serves? If "Yes," please describe If "No,"	_		
	please explain RIVERDALE COUNTRY SCHOOL PUBLICIZES ITS RACIALLY NON-DISCRIMINATORY POLICY IN ALL ITS	3		No
	ADMISSIONS CATALOGUES AND BROCHURES AS WELL AS IN ITS ANNUAL STUDENT HANDBOOK AND ITS WEBSITE			
4	Does the organization maintain the following?			
а	Records indicating the racial composition of the student body, faculty, and administrative staff?	4a	Yes	
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	4b	Yes	
c	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing			
	with student admissions, programs, and scholarships?	4c	Yes	
d	Copies of all material used by the organization or on its behalf to solicit contributions?	4d	Yes	
	If you answered "No" to any of the above, please explain If you need more space, use Schedule O (Form 990)			
		1		
5	Does the organization discriminate by race in any way with respect to			
а	Students' rights or privileges?	5a		No
b	Admissions policies?	5b		Νo
c	Employment of faculty or administrative staff?	5c		No
d	Scholarships or other financial assistance?	5d		Νο
e	Educational policies?	5e		No
_				
T	Use of facilities?	5f		No
g	Athletic programs?	5g		Νo
h	Other extracurricular activities?	5h		No
-	If you answered "Yes" to any of the above, please explain If you need more space, use Schedule O (Form 990)	<u> </u>		110
		-		
	Does the organization receive any financial aid or assistance from a governmental agency?	6a		Νo
b	Has the organization's right to such aid ever been revoked or suspended?	6b		Νo
7	If you answered "Yes" to either line 6a or line 6b, explain on Schedule O (Form 990) Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05			
	of Rev Proc 75-50, 1975-2 C B 587, covering racial nondiscrimination? If "No," explain on Schedule O (Form	7	Yes	

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493126011061

OMB No 1545-0047

2009

Statement of Activities Outside the United States

► Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16.

> Open to Public **Inspection**

Department of the Treasury Internal Revenue Service

Totals.

SCHEDULE F (Form 990)

▶ Attach to Form 990. ▶ See separate instructions.

	ne of the organization					Employer ide	ntification number					
RIV	'ERDALE COUNTRY SCHO	JOL				13-1740483	3					
Ρ	General Infor "Yes" to Form S			de the United States	. Complete	e if the organ	nization answered					
1	For grantmakers. Do assistance, the grante	es the organiza ees' eligibility fo	ntion maintain r or the grants or	ecords to substantiate assistance, and the se	lection crite	rıa used to a	ward					
2	For grant makers. Descri United States	ibe in Part IV the	organization's pr	ocedures for monitoring th	ne use of grar	nt funds outsıd	e the					
3	Activites per Region (U	Activites per Region (Use Schedule F-1 (Form 990) if additional space is needed)										
	(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	ıs a progra describe sp	ty listed in (d) am service, secific type of s) in region	(f) Total expenditures for region					
Cay	man Islands	0	0	Investments								
Irel	and	0	0	Investments								
Bermuda		0	0	Investments								

Part IV	, line 15, for an	sistance to Orgar y recipient who recensional	eived more than \$5	es Outside the Ur ,000. Check this box	nited States. Composite of the composite	plete if the organiza received more that	tion answered "Yes' n \$5,000	'to Form 990, ► 厂
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
2 Enter total n tax-exempt	number of recipions by the IRS, or f	ent organizations lis or which the grante	ted above that are e or counsel has pr	recognized as chari ovided a section 50	ties by the foreign o 1(c)(3) equivalency	country, recognized letter	as . ►	
3 Enter total n	umber of other	organizations or en	tities					: (Earm 990) 2009

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16. Use Schedule F-1 (Form 990) if additional space is needed. (c) Number of (b) Region (d) A mount of (e) Manner of cash (a) Type of grant or (f) A mount of (g) Description (h) Method of assistance cash grant disbursement of non-cash valuation recipients non-cash (book, FMV, assistance assistance appraisal, other)

Schedule F (Form 990) 2009

Identifier	ReturnReference	in Part I, line 2, and any additional information. Explanation
	+	

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

DLN: 93493126011061

OMB No 1545-0047

Schedule I (Form 990)

Department of the Treasury

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

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

Open to Public

Name of the organization						Employer identifica	ition number
RIVERDALE COUNTRY SCHO						13-1740483	
Does the organization m the selection criteria use	aıntaın records to s ed to award the grar	nts and Assistance ubstantiate the amount of the or assistance? edures for monitoring the us					F Yes □
Form 990, Part	IV, line 21 for ar	to Governments and ny recipient that receive 990) if additional space	d more than \$5,000	. Check this box if n	o one recipient receiv	ed more than \$5,00	0. Use
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)		(h) Purpose of grant or assistance
2 Enter total number of sec 3 Enter total number of oth		government organizations					1

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

(a)Type of grant or assistance	(b)Number of recipients	(c)A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
Financial Aid for students for educational purposes	211	6,010,117		Book	
See Addıtıonal Data Table					

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

Ident if ier	Return Reference	Explanation
Procedure for Monitoring Grants in the U S	Part I, Line 2	Schedule I, Part I, Line 2 Grants are need based Families must have a complete financial aid file to be considered for a financial aid grant. A complete financial aid file contains a Parent Financial Statement (PFS), the previous years' federal tax return (including schedules and W-2s), a family budget sheet and any other required supporting documents. Completing the PFS generates a Recommended Family Contribution (RFC) based primarily on the family income, assets including home equity, age of the parents (when considering assets needed for retirement) and number of children in tuition charging institutions. The RFC may then be adjusted at the discretion of the Financial Aid Director for such things as cost of living, unusual expenses, and a home equity protection allowance. The financial aid committee makes a final decision based on the Financial Aid Director's suggestion. PFSs which are based on estimates are then checked against families's filed taxes in the spring and awards are adjusted as needed. Consideration or funding from other parts of the financial aid budget is also given to such "extra" costs as transportation to school, tutoring, and expenses for school trips, college and athletics.

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

DLN: 93493126011061

OMB No 1545-0047

Employer identification number

Schedule J (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Compensation Information

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

► Complete if the organization answered "Yes" to Form 990, Part IV, question 23.

► Attach to Form 990. ► See separate instructions.

Open to Public Inspection

KIV	ERDALE COUNTRY SCHOOL		13-1740483			
Pa	rt I Questions Regarding Compensation		1			
					Yes	Νo
1a	Check the appropriate box(es) if the organization provid 990, Part VII, Section A, line 1a Complete Part III to					
	First-class or charter travel	<u> </u>	Housing allowance or residence for personal use			
	Travel for companions	Γ	Payments for business use of personal residence			
	Tax idemnification and gross-up payments					
	Discretionary spending account	<u> ~</u>	Personal services (e g , maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the organ reimbursement orprovision of all the expenses describe			1b	Yes	
2	Did the organization require substantiation prior to rein officers, directors, trustees, and the CEO/Executive Di			2	Yes	
3	Indicate which, if any, of the following the organization organization's CEO/Executive Director Check all that Compensation committee Independent compensation consultant	appl	ly Written employment contract			
		고	Approval by the board or compensation committee			
	Form 990 of other organizations	١٠	Approval by the board of compensation committee			
4	During the year, did any person listed in Form 990, Par or a related organization	rt V I	I, Section A, line 1a with respect to the filing organization			
а	Receive a severance payment or change-of-control pa	ymeı	nt?	4a		No
b	Participate in, or receive payment from, a supplementa	l nor	nqualified retirement plan?	4b		Νo
С	Participate in, or receive payment from, an equity-base	ed co	ompensation arrangement?	4c		Νο
	If "Yes" to any of lines 4a-c, list the persons and provi	de tl	he applicable amounts for each item in Part III			
	Only 501(c)(3) and 501(c)(4) organizations only must	com	plete lines 5-9.			
5	For persons listed in form 990, Part VII, Section A, lin compensation contingent on the revenues of	e 1 a	, did the organization pay or accrue any			
а	The organization?			5a		Νo
b	Any related organization?			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	e 1a	, did the organization pay or accrue any			
а	The organization?			6a		Νo
b	Any related organization?			6b		Νo
	If "Yes," to line 6a or 6b, describe in Part III					
7	For persons listed in Form 990, Part VII, Section A, lir payments not described in lines 5 and 6? If "Yes," des			7		No
8	Were any amounts reported in Form 990, Part VII, paid subject to the initial contract exception described in Ro in Part III			8		No
9	If "Yes" to line 8, did the organization also follow the re	butt	able presumption procedure described in Regulations			

section 53 4958-6(c)?

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)(1)-(111) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a

(A) Name	,	(B) Breakdown of	of W-2 and/or 1099-MIS	.SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	
		(i) Base compensation	(ii) Bonus & (iii) Other reportable compensation compensation		other deferred compensation	benefits	(B)(ı)-(D)	reported in prior Form 990 or Form 990-EZ
Dominic AA Randolph	(I) (II)	287,811 0	0 0	0	29,937	25,804 0	343,552	ار
Daniel P Schultz	(I) (II)	173,770 0	0 0	0,	13,020	28,134 0	214,924	
Kent J Kıldahl	(I) (II)	196,150 0	o	16,500	21,000	 0 C	233,650)
Sandy s Shaller	(I) (II)	176,107 0	0	16,500	31,524	23,660	247,791)
Miltonjsipp	(I) (II)	176,145 0	o c	0	18,250	32,434 0	226,829)
Kristi H Marshall	(I) (II)	158,982 0	0 0	´1	15,750	8,689 0	183,421	٠
David e Patnaude	(I) (II)	177,441 0	0 0	0	12,495	7,996 0	197,932	
Michael Michelson	(I) (II)	152,863 0	, o	0	16,068	19,824 0	188,755	
John B Ment	(I) (II)	147,142 0	0 0	0	11,025	22,372 0	180,539)
Lorraine R Mahony	(ı) (ıı)	146,432	0 0	0	10,088	2,400		,
				'				
				<u> </u>				
		<u> </u>	 	<u> </u>	-			1
	<u> </u>	 	 	 	 			1

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	Ret urn Ref erence	Explanation
]	Ident if ier	Reference	Explanation

Schedule J (Form 990) 2009

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

DLN: 93493126011061

OMB No 1545-0047

Open to Public **Inspection**

Schedule K (Form 990)

Department of the Treasury

Supplemental Information on Tax Exempt Bonds

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Schedule O (Form 990). ► Attach to Form 990. ► See separate instructions.

Internal Revenue Service

Name of the organization **Employer identification number** RIVERDALE COUNTRY SCHOOL 13-1740483 **Bond Issues**

	(a) Issuer Name	(b) Issuer EIN	(c) CUSIP #	(d) Date	Issued	(e) Issue	Price	(f) Des	cription of	Purpose	(g) Defeased		Beha	On alf of uer No
	NYC IDA variable rate civic				+						163	140	163	140
A	facility refunding	13-2906040	64971CX66	06-14-	06-14-2004				Refunding, Construction an Equipping Facilities			×		Х
Pa	rt III Proceeds	-	•	•	•			•			•			
				Α		E	3	С			D E			
1	Total proceeds of issue			3	2,107,251									
2	Gross proceeds in reserve funds													
3	Proceeds in refunding or defeasa													
4	Other unspent proceeds		133,290											
5	Issuance costs from proceeds			1,604,224										
6	Working capital expenditures from proceeds													
7	Capital expenditures from proceeds			2	9,043,824									
8	Year of substantial completion			2007										
				Yes	No	Yes	No	Yes	No	Yes	No	Ye	s	No
9	Were the bonds issued as part of	f a current refunding is	ssue?		Х									
10	Were the bonds issued as part of	f an advance refunding	g issue?	х										
11	Has the final allocation of procee	eds been made?		Х										
12	Does the organization maintain a	adequate books and re	ecords to support	х										
Par	t IIII Private Business Use											I	<u> </u>	
					A	Е	3		С	C)		E	
				Yes	No	Yes	No	Yes	No	Yes	No	Ye	s	No
1	Was the organization a partner in which owned property financed b				х									
2	Are there any lease arrangements with respect to the financed property which may result in private business use?				Х									
For P	rivacy Act and Paperwork Reduction	Act Notice, see the Inst	tructions for Form 990).		Cat No 50	0193E				Schedule	K (Form	990) 20	09

Part IIII Private Business Use (Continued)

	Titude Business as (continued)		_			1		I _			
			Α	E	3	<u> </u>	<u>C</u>	L)		<u>, </u>
		Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
3a	Are there any management or service contracts with respect to the financed property which may result in private business use?		Х								
3b	Are there any research agreements with respect to the financed property which may result in private business use?		Х								
3с	Does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts or research agreements relating to the financed property?		х								
4	Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government		0 %								
5	Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government		0 %								
6	Total of lines 4 and 5		0 %								
7	Has the organization adopted management practices and procedures to ensure the post-issuance compliance of its tax-exempt bond liabilities?	Х									
Dai	at IV Arbitrage										

_											
			A		В		С		D		E
		Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
1	Has a Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate, been filed with respect to the bond issue?		x								
2	Is the bond issue a variable rate issue?	Х									
3a	Has the organization or the governmental issuer identified a hedge with respect to the bond issue on its books and records?	х									
ь	Name of provider	Merrill Lync capital Serv			•		•				
С	Term of hedge	30 000	000000000								
4a	Were gross proceeds invested in a GIC?		Х								
ь	Name of provider										
С	Term of GIC										
d	Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?										
5	Were any gross proceeds invested beyond an available temporary period?	х									
6	Did the bond issue qualify for an exception to rebate?		х								
									Cahadul	o V /Eorm 00/	33 2000

NonCash Contributions

▶Complete if the organization answered "Yes" on Form 990, Part IV, lines 29 or 30. ► Attach to Form 990.

OMB No 1545-0047

Open to Public Inspection

Name of the organization

SCHEDULE M

Department of the Treasury

Internal Revenue Service

(Form 990)

Employer identification number

RIVER	DALE COUNTRY SCHOOL							
Da	rt I Types of Property				13-1740483			
		(a) Check If applicable	(b) Number of Contributions	(c) Revenues reported on Form 990, Part VIII, line 1g	(d) Method of do reven	etermı	nıng	
	Art—Works of art							
	Art—Historical treasures .							
	Art—Fractional interests							
4	Books and publications							
5	Clothing and household goods							
6	goods							
7	Boats and planes							
	Intellectual property							
	Securities—Publicly traded .	X	11	159 456	Selling price			
	Securities—Closely held stock			133,130	Sening price			
	Securities—Partnership, LLC, or trust interests							
12	Securities—Miscellaneous							
13	Qualified conservation contribution—Historic structures							
14	Q ualified conservation contribution—O ther							
15	Real estate—Residential .							
16	Real estate—Commercial							
17	Real estate—Other							
	Collectibles							
19	Food inventory							
20	Drugs and medical supplies .							
	Taxidermy							
	Historical artifacts							
	Scientific specimens							
	Archeological artifacts							
	O ther ▶ ()							
26	Other ▶()							
	Other ►()							
28	Other ► ()				<u> </u>			
29	Number of Forms 8283 received for which the organization comp				29		Yes	No
30a	During the year, did the organiza	ation receiv	e hy contribution any prope	rty reported in Part I lines	1-28 that it		163	110
500	must hold for at least three year	rs from the o	date of the initial contributi					
	for exempt purposes for the ent					30a		No
	If "Yes," describe the arrangem					٠, ا		NI -
31	Does the organization have a gr	π acceptan	ce policy that requires the i	eview of any non-standard	contributions?	31	I	No
32a	Does the organization hire or us contributions?	e third part	ies or related organizations	to solicit, process, or sell	non-cash	32a		No
Ь	If "Yes," describe in Part II							
33	If the organization did not repor	t revenues i	n column (c) for a type of p	roperty for which column (a) is checked,			

Part II

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.

Ident if ier	Return Reference	Explanation
Method for Determining Number of Contributors	Part I, Column (b)	reporting is based on the number of contributors

Schedule M (Form 990) 2009

Software ID: Software Version:

EIN: 13-1740483

Name: RIVERDALE COUNTRY SCHOOL

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

SCHEDULE 0

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990

DLN: 93493126011061

OMB No 1545-0047

2009

Open to Public

Name of the organization RIVERDALE COUNTRY SCHOOL Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

Attach to Form 990.

Employer identification number

13-1740483

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section B, line 11		The full board received a complete copy of the 990 for their review with the names of the donors on Sch B redacted, hence, the question has been answered no

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section B, Iine 12c		On an annual basis board members and officers are required to complete a conflict of interest disclosure. At the first board meeting of the school year, the Chairman of the Board distributes the conflict of interest form to each member. At the end of that session, each conflict of interest form is collected and reviewed. If a conflict of interest is identified, the board will review the item and determine whether to allow the activity, or exclude the individuals from items involving their conflict. When any matter in which a board member or officer has an interest comes before the board for decision or approval, that interest shall be immediately disclosed to the board by that board member or officer and the person in conflict shall recuse himself/herself from any discussion or vote relating thereto.

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section B, line 15a		AN INDEPENDENT COMPENSATION CONSULTANT IS USED ADDITIONALLY, IT IS ALSO REVIEWED BY THE CHAIRMAN OF THE BOARD AND THE CHAIR OF THE FINANCE COMMITTEE THE LAST REVIEW TOOK PLACE DURING THE 2ND QUARTER OF CALENDAR YEAR 2010

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section C, line 19		TRANSPARENCY IS VERY IMPORTANT TO RIVERDALE COUNTRY SCHOOL, AS SUCH, RIVERDALE COUNTRY SCHOOL PROVIDES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS TO THE GENERAL PUBLIC UPON REQUEST

ldentifier	Return Reference	Explanation
Part XI Line 2 C		The process for reviewing financial statements has not changed since the prior year

Identifier	Return Reference	Explanation
		Schedule K, Part I, (A) Complete Issuer Name New York City Industrial Development Agency Variable Rate Civic Facility Refunding and Improvement Bonds (2004 Riverdale Country School, Inc. Project)

ldentifier	Return Reference	Explanation
		Schedule K, Part II, Line 5 \$1,002,069 of issuance costs relate to Credit Enhancement Fees

ldentifier	Return Reference	Explanation
Part III 4a	Program Service Accomplishements	At Riverdale, we rely on a pow erful model based on guiding principles in four key areas mind, character, commtment, and community. Within each category we strive to create ambitious programs that benefit the entire community. Within each category we strive to create ambitious programs that benefit the entire community. Within each category we strive to create ambitious programs that benefit the entire community. Within each category we strive to create ambitious programs that benefit the entire community. Within each category we strive to create ambitious programs that benefit the entire community. Within each category we strive to create ambitious programs that benefit the entire community. Within each category we strive to create ambitious programs that benefit the entire community. Within each category we strive to category and emotional grow the are given thoughtful support even as they grow independent as learners, which serves them well during their college years and beyond. "Character" - Honesty, self-discipline, resilience, and perseverance are qualities we encourage in our students every day. A multifaceted support system on campus provides students with the support they need as they pursue opportunities and learn life lessons. "Communement" - A successful life is made up of the many communements we make, both to ourselves and to others. Riverdale's emphasis on commitment to a wide range of activities, including academics, sports, community service, and the arts, endows students with a sense of satisfaction and balance during their years at Riverdale. "Community" - The Riverdale is carpused activities, including academics, sports, community service, and the arts, endows students with a sense of satisfaction and balance during their years at Riverdale. "Community" - The Riverdale students with a sense of satisfaction and balance during their years at Riverdale. Disciplinary learners as a carpus as a citizens of the world, with all the joy and responsibility that implies interdisciplinary learning is a

ldentifier	Return Reference	Explanation								
Part III, Line 1	Mission	"The mission of Riverdale Country School adopted November 15, 2006, is to offer students the foundations of a liberal education that will guide them to rew arding, purposeful lives. In its second century, Riverdale's unique character is still shaped by the commitment of its founder, Frank S. Hackett, to high academic standards, scholarly, intimate teaching, abundant play in the open, and a care for the best influences. It is out duty to help our students expand their competence and resourcefulness and to enable them to think critically. Riverdale students are not merely passive recipients of knowledge, teachers support students in the challenging work of actively constructing their own understanding and skills in a balance of intellectual, artistic, athletic, and community activities. The ideal Riverdale experience is a friendly, lively meeting of disciplined minds working, creating, and performing together in the classroom and in the larger arena made possible by New York City and our country campuses. The knowledge, culture, experiences, interests, abilities, and points of view that each member of the Riverdale community brings to the school enrich the lives and deepen the understanding of those with whom they interact. We value the quality of the relationships we forge. Parents feel a strong partnership with the school and students form lasting bonds with their teachers, mentors, and peers. For these reasons, we seek diverse experiences and view points in our students and their families, our faculty, and our curriculum in the patterns of our daily life on campus, we seek to create a model of the ways in which people should treat and respect one another. Riverdale Country School is an independent day school that provides a continuous coeducational program for boys and girls from pre-kindergarten through grade twelve. The school is located on two wooded campuses in the northwate corner of New York City, NY. At Riverdale we seek academic excellence and personal achievement within an ethical and supportive envir								

Software ID: Software Version:

EIN: 13-1740483

Name: RIVERDALE COUNTRY SCHOOL

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Compensated Employees, and Independent Contractors											
(A) Name and Title	(B) Average hours per week	Posi t	tion (hat a	che	')	_	T	(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation	
		Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former			from the organization and related organizations	
Dominic AA Randolph Headmaster	40 00	х		х				287,811	0	55,741	
Jane Lisman Katz Chair	1 00	×						0	0	0	
David N Roberts Treasurer	1 00	×						0	0	0	
Lısa Argrette Ahmad BOARD	1 00	х						0	0	0	
Jessica Weill Bibiliowic BOARD	1 00	х						0	0	0	
Emily Latour Bogle BOARD	1 00	Х						0	0	0	
Alfonso L Carney Jr BOARD	1 00	х						0	0	0	
Christopher J Carrera BOARD	1 00	х						0	0	0	
A nla Cheng-Kıngdon BO A RD	1 00	Х						0	0	0	
Tıkı Barber b0 A R D	1 00	х						0	0	0	
Robert F Goldrich BO A RD	1 00	Х						0	0	0	
Perry Golkin BO A RD	1 00	х						0	0	0	
Gregg S Hymowitz BOARD	1 00	х						0	0	0	
Theodore P Janulis BOARD	1 00	х						0	0	0	
Beryl R Jones-Woodin BO A RD	1 00	Х						0	0	0	
Brad S Karp BO A RD	1 00	х						0	0	0	
Barbara Basser Bigio bO A RD	1 00	х						0	0	0	
Jıll Cornet b0 A RD	1 00	Х						0	0	0	
David T Hamamoto bOARD	1 00	х						0	0	0	
Brunhilda M Musikant BO A RD	1 00	Х						0	0	0	
Mark Hostetter bOARD	1 00	Х						0	0	0	
Beth Roberts BO A RD	1 00	Х						0	0	0	
Daniel J Rosen BO A RD	1 00	Х						0	0	0	
Laurence Lederer b0 A RD	1 00	Х						0	0	0	
Thomas Montag bOARD	1 00	Х						0	0	0	

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week	Posi t	((tion (hat a	ched)			(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former			
Jeffrey Pash b0 A R D	1 00	Х						0	0	0
Philip Tod Waterman II b0 A RD	1 00	Х						0	0	0
Prakash Melwanı bOARD	1 00	Х						0	0	0
Stacey Weinstein bOARD	1 00	Х						0	0	0
David Westin bOARD	1 00	Х						0	0	0
Daniel P Schultz Dir of finance & oper	40 00			х				173,770	0	41,154
Kent J Kıldahl Head of upper school	40 00				х			212,650	0	21,000
Sandy s Shaller Head of lower school	40 00				х			192,607	0	55,184
Milton j sipp Head of mid school	40 00				х			176,145	0	50,684
Krıstı H Marshall Dır ofcollege guıdance	40 00					х		158,982	0	24,439
David e Patnaude dir of plant & sust	40 00		_			Х		177,441	0	20,491
Michael Michelson Dir of studies	40 00					Х		152,863	0	35,892
John B Ment Dır oftechnology	40 00					х		147,142	0	33,397
Lorraine R Mahony Faculty member	40 00					х		146,432	0	12,488