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Department of the Treasury Internal Revenue Service A For the 2012 color

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

▶ Do not enter Social Security numbers on this form as it may be made public. Information about Form 990 and its instructions is at www.urs.gov/form990 OMB No 1545-0047

Open to Public Inspection

<u> </u>	רטו נוופ	2013 Calendar year, or tax year beginning 000 1, 2013 and	enaing C	ON 30, 2014			
В	Check if applicable	C Name of organization		D Employer identific	eation number		
	Addres	RIVERDALE SCHOOL DISTRICT FOUNDATION					
	Name change	Doing Business As		94-3:	187982		
	Initial return		Room/suite	E Telephone number			
	Termin			(503	303-8470		
	Amend	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	917,973.		
L	Application pendin	TORTHAND, OR 37233		H(a) Is this a group re			
	,	F Name and address of principal officer:MARK COUPER		for subordinates'			
		SAME AS C ABOVE		H(b) Are all subordinates in	cluded? Yes No		
		mpt status: X 501(c)(3) 501(c)()	or 527	If "No," attach a	list. (see instructions)		
		HTTP://WWW.RIVERDALEFOUNDATION.ORG		H(c) Group exemption			
		organization: X Corporation	∟ Year	of formation: 1993 M	State of legal domicile: OR		
P		Summary					
ě	1 1	Bnefly describe the organization's mission or most significant activities: ${f SEE}$	SCHEDU	JLE O			
Activities & Governance	.						
Jerr	1	Check this box F if the organization discontinued its operations or dispos	sed of more	1 1			
ģ		Number of voting members of the governing body (Part VI, line 1a)		3	17		
অ		Number of independent voting members of the governing body (Part VI, line 1b)		4	17		
ies	1	Total number of individuals employed in calendar year 2013 (Part V, line 2a)		5	0		
Ξ		Total number of volunteers (estimate if necessary)		6	25		
Aci		Total unrelated business revenue from Part VIII, column (C), line 12		7a	0.		
_	b	Net unrelated business taxable income from Form 990-T, line 34		7b	0.		
				Prior Year	Current Year		
e		Contributions and grants (Part VIII, line 1h)		818,670.	915,218.		
Revenue		Program service revenue (Part VIII, line 2g)		0.	0.		
è		nvestment income (Part VIII, column (A), lines 3, 4, and 7d)		2,724.	2,755.		
_	1	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		1,629.	0.		
_		Total revenue - add lines 8 through 11 (must equal Pert VII), equinn (A), line 12)		823,023.	917,973.		
		Grants and similar amounts paid (Part IX, comma (A) times 149)		865,325.	863,312.		
	14	Benefits paid to or for members (Part IX, column (A), line 4)	_	0.	0.		
es	15	Salanes, other compensation, employee benefits (Part IX; colling (A), lines 5-10)		0.	0.		
Expenses	16a I	Professional fundraising fees (Part IX, column (A), line 11e)	L	0.	0.		
ă. X	b	Total fundraising expenses (Part IX, column (D), line 25) 23,7(09.				
ш	'' '	Other expenses (Part IX, column (A), lines 1727 10 1724	<u></u>	24,223.	32,695.		
	18	Total expenses. Add lines 13-17 (must equal Part-IX, column (A), line 25)	<u> </u>	889,548.	896,007.		
,		Revenue less expenses. Subtract line 18 from line 12		-66,525.	21,966.		
, PSC	<u> </u>		Be	ginning of Current Year	End of Year		
Net Assets	20	Total assets (Part X, line 16)		1,212,377.	1,234,343.		
\$ E	21	Total liabilities (Part X, line 26)	<u></u>	0.	0.		
	22	Net assets or fund balances. Subtract line 21 from line 20	ļ	1,212,377.	1,234,343.		
_		Signature Block					
		ities of perjury, I declare that I have examined this return, including accompanying schedules		-	knowledge and belief, it is		
true	e, correc	l, and complete. Declaration of preparer (other than officer) is based on all information of wh	nich preparei	r has any knowledge.			
		Jeboch K. Cooner					
Sig	מן	Signature of officer		Date	114		
_		Type or print name and title	_	Note I	II STIU		
Print/Type preparer's name Preparer's signature Date Check PTIN							
Pai		YEE LEE MCGEE		self-employe	_d ₱01294356		
	parer	Firm's name GARY MCGEE & CO. LLD		Firm's EIN			
Use	Only	Firm's address 808 S.W. THIRD AVENUE, SUITE 700	U				
		PORTLAND, OR 97204		Phone no. (5)			
Ma	y the IF	S discuss this return with the preparer shown above? (see instructions)			Yes No		

332001 10-29-13 LHA For Paperwork Reduction Act Notice, see the separate instructions.

SCANNED DEC 18 2014

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Form	990 (2013) RIVERDALE SCHOOL DISTRICT FOUNDATION	94-3187982	Page 2
Pai	rt III Statement of Program Service Accomplishments		
	Check if Schedule O contains a response or note to any line in this Part III		X
1	Bnefly describe the organization's mission:		
	SEE SCHEDULE O		
	<u> </u>	· · · · · · · · · · · · · · · · · · ·	
2	Did the organization undertake any significant program services during the year which were not listed on		
	the prior Form 990 or 990-EZ?	Yes [X No
	If "Yes," describe these new services on Schedule O.		
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	Yes [X No
	If "Yes," describe these changes on Schedule O.		
4	Describe the organization's program service accomplishments for each of its three largest program services, as	measured by expenses.	
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to other	ers, the total expenses, a	nd
	revenue, if any, for each program service reported.		
4a	(Code) (Expenses \$ 863,312. including grants of \$ 863,312.) (Reven)
	THE FOUNDATION PROVIDED FINANCIAL SUPPORT TO THE RIVERD	ALE SCHOOL	
	DISTRICT 51J DURING THE YEAR ENDED JUNE 30, 2014.		
4b	(Code) (Expenses \$	nue \$	
		-	
			
	· · · · · · · · · · · · · · · · · · ·		
4c	(Code) (Expenses \$ Including grants of \$) (Reven	nuo ¢	
70	/cone) (cyheilee a) (usasii		<i>'</i>
			
		-	
			
		-	
	Other and an idea (December in Cohertal A.)		
4d	Other program services (Describe in Schedule O.)		
	(Expenses \$ Including grants of \$) (Revenue \$ Total program service expenses > 863,312.)	
40	Total program service expenses 863,312.		

Form 990 (2013) RIVERDALE SC Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		x
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			37
_	during the tax year? If "Yes," complete Schedule C, Part II	4		<u> </u>
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		x
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			37
7	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete	<u> </u>		
	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for			
	amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		_ <u>X</u> _
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	40		х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X	10		
•	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			, w
	Part VI	11a		X
b	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	11b		<u> </u>
С	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	110		Х
d	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	11c		
_	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		Х
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			v
h	Schedule D, Parts XI and XII Was the organization included in consolidated, independent audited financial statements for the tax year?	12a		X
b	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			77
4-	or more? If "Yes," complete Schedule F, Parts I and IV	14b		<u> </u>
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	- -		
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		х
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		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			v
10	1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		х
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		$\frac{x}{x}$
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
		Form	990	(2013)

Form 990 (2013) RIVERDALE SCHOOL D
Part IV Checklist of Required Schedules (continued)

			Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	24	Х	
22	- · · · · · · · · · · · · · · · · · · ·	21	A	_
22	Did the organization report more than \$5,000 of grants or 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		х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		X
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 lines 24b through 24d and complete			
	Schedule K. If "No", go to line 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary penod exception?	24b		
¢	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
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		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or			
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so,			l
	complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			٠,,
	of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			1
	instructions for applicable filing thresholds, conditions, and exceptions):		<u></u>	ائي-
	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			х
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	X	<u> </u>
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			x
21	contributions? If "Yes," complete Schedule M	30		<u> </u>
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I			l x
32	, ,	31		<u> </u>
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		x
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	32		
33	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and	33	-	
5 4	Part V, line 1	34		x
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			\vdash
-	If "Yes," complete Schedule R, Part V, line 2	36		х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			\vdash
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		x
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			
	Note. All Form 990 filers are required to complete Schedule O	38	Х	
				(2013)

Form **990** (2013)

	990 (2013) RIVERDALE SCHOOL DISTRICT FOUNDATION 94-516	1902	<u> </u>	age 5
Par	Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V			
	Officer in Octredule O Contains a response of flote to any line in this Part V		T	<u> </u>
4	Establic number and dis Bar 0 of Earl 4000 Establic Day 1	0	Yes	No
	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	尚	l	
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable Did the association and the bold of the association and the second state of the association and the second state of the association and the second state of the secon	4		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
0-	(gambling) winnings to prize winners?	_1c	-	-
Za	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 2a	ol		
h	filed for the calendar year ending with or within the year covered by this return [2a] If at least one is reported on line 2a, did the organization file all required federal employment tax returns?			
b	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	-	-
20	Did the organization have unrelated business gross income of \$1,000 or more during the year?			X
	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O	3a 3b	1	1
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a	30		
70	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4-		х
ь	If "Yes," enter the name of the foreign country:	_4a		
U	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.	· ,		.*
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
ь	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit	30	-	\vdash
-	any contributions that were not tax deductible as charitable contributions?	6a		х
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	U		
_	were not tax deductible?	6ь		
7	Organizations that may receive deductible contributions under section 170(c).	1	· ·	
а	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	***	X
b	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		Х
d	If "Yes," indicate the number of Forms 8282 filed during the year	,		
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g	N/	A
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C	7h	N/	Α
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting N/A			
	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8	<u> </u>	
9	Sponsoring organizations maintaining donor advised funds.	,		_
а	Did the organization make any taxable distributions under section 4966? N/A	9a	L	
b	Did the organization make a distribution to a donor, donor advisor, or related person? N/A	9b		
10	Section 501(c)(7) organizations. Enter:		i	
а	Initiation fees and capital contributions included on Part VIII, line 12 N/A 10a	╛.,		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	4	l	į
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders N/A 11a	4		
þ	Gross income from other sources (Do not net amounts due or paid to other sources against		l	
	amounts due or received from them.)	-		ļ
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	ļ	
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year N/A 12b	4		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	-	ļ	-
а	Is the organization licensed to issue qualified health plans in more than one state? N/A	13a		ļ
	Note. See the instructions for additional information the organization must report on Schedule O.			
Ь	Enter the amount of reserves the organization is required to maintain by the states in which the			
_	organization is licensed to issue qualified health plans Enter the amount of reserves an head	\dashv		
C 142	Enter the amount of reserves on hand Did the organization receive any payments for indeer tanning continue the tay year?		-	V
	Did the organization receive any payments for indoor tanning services during the tax year? If "Yes" has it filed a Form 720 to report these payments? If "No." provide an explanation in School (I.C.)	14a	-	Х
U	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b	1	1

Form 990 (2013) RIVERDALE SCHOOL DISTRICT FOUNDATION 94-318/982 Page
Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

	Check if Schedule O contains a response or note to any line in this Part VI						
Sec	tion A. Governing Body and Management						
						Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a		17	-		
	If there are material differences in voting rights among members of the governing body, or if the governing						-
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.				-		_]
b	Enter the number of voting members included in line 1a, above, who are independent	1b		17			1
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationshi	p with	any othe	r	3 44.7		
	officer, director, trustee, or key employee?				2		X
3	Did the organization delegate control over management duties customarily performed by or under the	e dire	ct superv	rision			
	of officers, directors, or trustees, or key employees to a management company or other person?				3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 9	990 w	as filed?		4		X
5	Did the organization become aware during the year of a significant diversion of the organization's as	sets?			5		X
6	Did the organization have members or stockholders?				6		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or a	ppoin	t one or				
	more members of the governing body?				7a		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,	stockł	nolders, o	r			
	persons other than the governing body?				7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the ye	ar by t	he followin	g:		, ,	
а	The governing body?				8a	X	
b	Each committee with authority to act on behalf of the governing body?				8b		X
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be rea	ached	at the				
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O				9		Х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal R	evenu	ie Code)				
						Yes	No
10a	Did the organization have local chapters, branches, or affiliates?				10a		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such c	hapte	rs, affiliate	es,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?				10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing boo	ly bef	ore filing t	he form?	11a		X
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.					No. of Street,	
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13				12a	X	
Ь	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise	e to co	nflicts?		12b	X	
C	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Y	es," (describe				
	in Schedule O how this was done				12c	Х	
13	Did the organization have a written whistleblower policy?				13		Х
14	Did the organization have a written document retention and destruction policy?				14		Х
15	Did the process for determining compensation of the following persons include a review and approve	al by	ındepend	ent	, ';	NE C	l
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	,			1	·	
а	The organization's CEO, Executive Director, or top management official				15a		X
þ	Other officers or key employees of the organization				15b		X
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)						
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrange	ment	with a		, 		<u>:-</u> -
	taxable entity during the year?				16a		X
Ь	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate			tion			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organic	ınızatı	on's				
	exempt status with respect to such arrangements?				16b		L
Sec	tion C. Disclosure						
17	List the states with which a copy of this Form 990 is required to be filed ▶OR						
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-	T (Sed	ction 501(c)(3)s only)	avaılat	ole	
	for public inspection. Indicate how you made these available. Check all that apply.						
	Own website Another's website X Upon request Other (explain						
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, c	onflic	t of intere	st policy, an	d finai	ncial	
	statements available to the public during the tax year.						
20	State the name, physical address, and telephone number of the person who possesses the books a	ınd re	cords of t	he organiza	tion:		
	DEBORAH COONAN - (503) 697-3110						
	11659 S.W. MILITARY ROAD, PORTLAND, OR 97219						

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-()[[]	330	CULSI	

RIVERDALE SCHOOL DISTRICT FOUNDATION

94-3187982

Page 7

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

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee

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

(A)	(B)			(C				(D)	(E)	(F)
Name and Title	Average hours per week	box	not c , unle:	heck sspe dad	more	than is bot	h an	Reportable compensation from	Reportable compensation from related	Estimated amount of other
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Боrmer	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) CATHERINE BEKOOY DIRECTOR	2.00	x						0.	0.	0.
(2) TINA BROWN	2.00				┢	\vdash				
DIRECTOR		X						0.	0.	0.
(3) JILLIAN CAIN	2.00									
DIRECTOR		X					}	0.	0.	0.
(4) KRIS COLLINS	1.00					Г				
DIRECTOR		Х						0.	0.	0.
(5) DEAN DORDIVIC	1.00							_	_	_
DIRECTOR		X	_			╙	<u> </u>	0.	0.	0.
(6) ZACH FRANCIS	1.00	ļ								
DIRECTOR	1 00	X		_	_	<u> </u>	_	0.	0.	0.
(7) AMBER HILLMAN	1.00	١.,					ļ			
DIRECTOR	1 00	X				-	-	0.	0.	0.
(8) DOUGLAS KEY	1.00	x						0.	0.	0.
DIRECTOR (9) JOE PRATS	2.00	^			\vdash	-	├	· · · · · · · · · · · · · · · · · · ·	0.	<u> </u>
DIRECTOR	2.00	x						0.	٥.	0.
(10) BRAD SANDERS	1.00	 ^	╁	-	╁	\vdash	\vdash		0.	
DIRECTOR	1.00	\mathbf{x}					İ	0.	0.	0.
(11) LANCE STEINBERG	1.00	 	\vdash	\vdash	\vdash	t	T			
DIRECTOR		\mathbf{x}	Ì	ļ				0.	0.	0.
(12) ROBERT STEWART	1.00	T	Т		Г					
DIRECTOR		X	1				1	0.	0.	0.
(13) DAVID VEVERKA	1.00									
DIRECTOR		X						0.	0.	0.
(14) LISA WHITLOCK	1.00									
DIRECTOR		X	$oxed{oxed}$		_	┖		0.	0.	0.
(15) MARK COOPER	10.00	Į					1		_	
PRESIDENT	F 65	X	<u> </u>	X	L			0.	0.	0.
(16) LESLIE GOSS	5.00	١		,.			1			
SECRETARY	10 00	X	\vdash	X	├	┼	\vdash	0.	0.	0.
(17) DEBORAH COONAN	10.00	$ _{\mathbf{x}}$		x				0.	_	_
TREASURER	<u> </u>	ΙV	<u> </u>	Λ	L .	<u>L</u>	_		0.	0.

Part VII Section A. Officers, Directors, Trus	tees, Key Em	ploy	ees			ighe	st C	Compensated Employe	es (continued)			
(A)	(B)			-	C)			(D)	(E)			(F)
Name and title	Average	(do			ntion more	l than	one	Reportable	Reportable		Est	timated
	hours per week					is bot or/trus		compensation	compensation			ount of
	(list any		T		Г	Π	T	from the	from related			other
	hours for	direct				Ļ		organization	organization (W-2/1099-MIS			pensation om the
	related	5 8	stee		1	ısate		(W-2/1099-MISC)	(***271055-14110	30,		anization
	organizations	trust	al fr		82	E E		(** = * * = * * * * * * * * * * * * * *				related
	below	Individual trustee or director	Institutional trustee	₽	Key employee	Highest compensated employee	<u> </u>				orga	nızations
	line)	ğ	Instr	Officer	ğ	E E	Former		_			
		1										
		_	lacksquare		$oxed{oxed}$	$oxed{oxed}$	$oxed{igspace}$					
		╙	_	$ldsymbol{ldsymbol{ldsymbol{eta}}}$	L	↓	┞					
		1							"			
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	<u> </u>	\vdash	\vdash	\vdash	\vdash	\vdash						_
		ł										
	1		1		\vdash	┢	\vdash					
		1										
		╁				H	\vdash		_			
		1										
	<u> </u>	t		 		t	\vdash					
		ĺ										
1b Sub-total	1							0.		0.		0.
c Total from continuation sheets to Part V	II. Section A						•	0.		0.		0.
d Total (add lines 1b and 1c)	•						•	0.		0.		0.
2 Total number of individuals (including but n	ot limited to th	nose	liste	ed a	bov	e) wi	ho r	eceived more than \$100	,000 of reportab	le		
compensation from the organization									•			0
												Yes No
3 Did the organization list any former officer,	director, or tru	uste	e, ke	y er	nplo	oyee	, or	highest compensated e	mployee on			
line 1a? If "Yes," complete Schedule J for s	uch individual										3	X
4 For any individual listed on line 1a, is the su	ım of reportab	le c	omp	ensa	atior	n and	d ot	her compensation from	the organization			
and related organizations greater than \$15	0,000? <i>If "Ye</i> s,	, co	mpl	ete S	Sche	edul	e J	for such individual			4	X
5 Did any person listed on line 1a receive or a	accrue compe	nsat	ion i	from	any	y uni	relat	ted organizatıon or ındıv	idual for services	;	·	
rendered to the organization? If "Yes," com	plete Schedul	e J i	for s	uch	pers	son					5	X
Section B. Independent Contractors												
1 Complete this table for your five highest co										npens	ation f	rom
the organization. Report compensation for	the calendar y	ear	end	ng v	vith	or w	/ithii		year.			
(A) Name and business	address	NT/	INC					(B) Description of s	envices	_	O) Ompor	s) nsation
Trainio and basiness	444,033	TA	OI41					Description of s			omper	
							- 1					
							\dashv					
							\dashv				-	
							ŀ					
									l			
2 Total number of independent contractors (ncluding but r	not li	mıte	d to	tho	se li	stec	d above) who received n	nore than			
\$100,000 of compensation from the organi	_					0						
											Form 9	990 (2013)

Form 990 (2013) RIVERDALE SCHOOL DISTRICT FOUNDATION
| Part VIII | Statement of Revenue

		Check if Schedule O contains a res	sponse or note to anv	line in this Part VIII			. 🗀
				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512 - 514
nts	1 :	a Federated campaigns	1a				
ig ja	١	b Membership dues	1b		`		
A,C	(c Fundraising events	1c	7			İ
i i		d Related organizations	1d	1			
S,E		e Government grants (contributions)	1e		•		
io		f All other contributions, gifts, grants, and		7			
투		similar amounts not included above	1f 915,218	.			
들임		g Noncash contributions included in lines 1a-1f \$	94,252	.]	~	•	
Contributions, Gifts, Grants and Other Similar Amounts		h Total. Add lines 1a-1f	<u> </u>	915,218.	-		ļ
			Business Cod			•	
8	2 :	a					
اه چَ	1	b					
S 5		С		Ĭ			
eve eve	(d					
Program Service Revenue		е					
۱ ۵	1	f All other program service revenue					
		g Total. Add lines 2a-2f	•				
	3	Investment income (including dividend	s, interest, and				
l		other similar amounts)	•	2,755.			2,755.
	4	Income from investment of tax-exempt	bond proceeds				
ľ	5	Royalties	<u> </u>				
		(ı) R	eal (II) Personal		5	•	. 1
	6 8	a Gross rents					
	١	b Less: rental expenses		_[*		
	•	c Rental income or (loss)		_	/,	£22	. 23.
	•	d Net rental income or (loss)					
	7 :	a Gross amount from sales of (i) Section (ii) Section (ii) Section (iii)	urities (11) Other				
		assets other than inventory		-	\$		7
	1	b Less: cost or other basis			,		
		and sales expenses		_			
	•	c Gain or (loss)		_			
		d Net gain or (loss)					
e	8	a Gross income from fundraising events	(not				
/enne		including \$ o		•			
Be		contributions reported on line 1c). See	1				1
Other Rev		Part IV, line 18	a	4			
5		b Less: direct expenses	b			mark or the control of	
		c Net income or (loss) from fundraising e					
	9 :	a Gross income from gaming activities. S					
		Part IV, line 19	a	-			
		b Less: direct expenses	Ь[- 	-		ŀ
		c Net income or (loss) from gaming activ	ities				
	וטו	a Gross sales of inventory, less returns					
		and allowances	a	-{			
		b Less cost of goods sold	ь	-∤			
}		c Net income or (loss) from sales of inver	•				
ł	11 :	Miscellaneous Revenue	Business Cod				
				 		<u> </u>	 -
			 				
		d All other revenue		+			
		e Total. Add lines 11a-11d					+
ļ	12	Total revenue. See instructions.		917,973.	0.	0.	2,755.
33200 10-29-		. a.a. revenues des mos donono.		1 221,77130			Form 990 (2013)

Form 990 (2013) RIVERDALE SCHO Part IX Statement of Functional Expenses

Secti	on 501(c)(3) and 501(c)(4) organizations must com	plete all columns All oth	er organizations must co	omplete column (A).	
	Check if Schedule O contains a respor				
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States. See Part IV, line 21	863,312.	863,312.	- <u>-</u> -	
2	Grants and other assistance to individuals in				·
_	the United States. See Part IV, line 22		_		
3	Grants and other assistance to governments,				, T- 3
	organizations, and individuals outside the United States. See Part IV, lines 15 and 16				•
4	Benefits paid to or for members				· ·
5	Compensation of current officers, directors,	-·			
•	trustees, and key employees				
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				
8	Pension plan accruals and contributions (include				· <u>-</u> · · ·
	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees):				
а	Management	240		0.70	
b	Legal	240. 2,659.		240.	
C.	Accounting	2,039.		2,659.	
d	Lobbying Professional fundraising services. See Part IV, line 17		, a te	, , , , , , , , , , , , , , , , , , , ,	
e f	Investment management fees			<u></u>	
g	Other. (If line 11g amount exceeds 10% of line 25,	· · · · · · · · · · · · · · · · · · ·			
9	column (A) amount, list line 11g expenses on Sch O.)				
12	Advertising and promotion	5,817.			5,817.
13	Office expenses	5,743.		690.	5,053.
14	Information technology	6,692.		3,907.	2,785.
15	Royalties				
16	Occupancy				
17	Travel				
18	Payments of travel or entertainment expenses				
40	for any federal, state, or local public officials				
19 20	Conferences, conventions, and meetings Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization		- 		
23	Insurance	1,144.		1,144.	
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				. ,
а	CREDIT CARD FEES	9,918.			9,918.
b	REGISTRATION FEES	346.		346.	
С	BANK SERVICE FEES	136.			136.
d					
	All other expenses	006 007	062 212	0 000	00 700
25	Total functional expenses. Add lines 1 through 24e	896,007.	863,312.	8,986.	23,709.
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				

Part X | Balance Sheet Check if Schedule O contains a response or note to any line in this Part X (A) (B) Beginning of year End of year 540,239. 220,378. Cash - non-interest-bearing 672,138. 1,013,965. 2 Savings and temporary cash investments 2 3 Pledges and grants receivable, net 3 4 Accounts receivable, net 4 Loans and other receivables from current and former officers, directors. trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 5 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instr). Complete Part II of Sch L 6 Assets Notes and loans receivable, net 7 Inventones for sale or use 8 Prepaid expenses and deferred charges 9 10a Land, buildings, and equipment: cost or other 10a basis. Complete Part VI of Schedule D 10b b Less: accumulated depreciation 10c Investments - publicly traded securities 11 12 Investments - other securties. See Part IV, line 11 12 13 Investments - program-related See Part IV, line 11 13 14 Intangible assets 14 15 Other assets. See Part IV, line 11 15 1,212,377. 1,234,343. Total assets. Add lines 1 through 15 (must equal line 34) 16 16 Accounts payable and accrued expenses 17 17 18 Grants payable 18 19 Deferred revenue 19 20 Tax-exempt bond liabilities 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D 21 22 Loans and other payables to current and former officers, directors, trustees, Liabilities key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 22 23 Secured mortgages and notes payable to unrelated third parties 23 24 Unsecured notes and loans payable to unrelated third parties 24 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D 25 0. 0. Total liabilities. Add lines 17 through 25 26 Organizations that follow SFAS 117 (ASC 958), check here complete lines 27 through 29, and lines 33 and 34. Net Assets or Fund Balances 27 Unrestricted net assets 27 28 Temporanly restricted net assets 28 29 Permanently restricted net assets 29 Organizations that do not follow SFAS 117 (ASC 958), check here and complete lines 30 through 34, Ō 30 Capital stock or trust principal, or current funds 30 Ω. 31 Paid-in or capital surplus, or land, building, or equipment fund 31 1,212,377. 32 Retained earnings, endowment, accumulated income, or other funds 1,234,343. 32 33 Total net assets or fund balances 1,212,377. 1,234,343. 33 Total liabilities and net assets/fund balances 1,234,343.

Form **990** (2013)

	990 (2013) RIVERDALE SCHOOL DISTRICT FOUNDATION	94	<u>-3187982</u>	Page 12
Pa	t XI Reconciliation of Net Assets			
	Check if Schedule O contains a response or note to any line in this Part XI	_		
1	Total revenue (must equal Part VIII, column (A), line 12)	1		<u>7,973.</u>
2	Total expenses (must equal Part IX, column (A), line 25)	2		6,007.
3	Revenue less expenses. Subtract line 2 from line 1	3		1,966.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	1,21	2,377.
5	Net unrealized gains (losses) on investments	5		
6	Donated services and use of facilities	6		
7	Investment expenses	7		
8	Pnor penod adjustments	8		
9	Other changes in net assets or fund balances (explain in Schedule O)	9		0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,		•	
	column (B))	10	1,23	4,343.
Pa	rt XII Financial Statements and Reporting		-	
	Check if Schedule O contains a response or note to any line in this Part XII			
	<u> </u>			Yes No
1	Accounting method used to prepare the Form 990: X Cash Accrual Other			
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	0.		عَدُ اللَّهُ عَالَمُ اللَّهُ عَالَمُ اللَّهُ عَالَمُ اللَّهُ عَالَمُ عَلَيْهُ عَالَمُ عَالَمُ عَالَمُ
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	d on a	3	.· / _~
	separate basis, consolidated basis, or both:			- <u>-</u> -
	Separate basis Consolidated basis Both consolidated and separate basis		1 3	,
ь	Were the organization's financial statements audited by an independent accountant?		2b	X
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	e basis	s, 🦠	1
	consolidated basis, or both:			2
	Separate basis Consolidated basis Both consolidated and separate basis			, ,
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audıt	t, <u> </u>	-
	review, or compilation of its financial statements and selection of an independent accountant?		2c	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch	edule (o. 📆	3-16
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sii	ngle Au	ıdıt 📜 📗	* * * * * * * * * * * * * * * * * * * *
	Act and OMB Circular A-133?		3a	X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requi	ired au	ıdıt	
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3ь	
			Form	990 (2013

10-29-13

SCHEDULE'A (Form 990 or 990-EZ)

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.

Open to Public Inspection

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

Name of the organization

► Attach to Form 990 or Form 990-EZ.

Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www irs gov/form990.

Employer identification number

	RIVERDALE SCHOOL DISTRICT FOUNDATION 94-3187982										
Pa	ırt l	Reason	for Public Char	ity Status (All organiz	ations mu	st complet	e this part	t.) See inst	tructions.		
Πhe	organ	ization is not a	private foundation	because it is: (For lines 1	through	11, check	only one b	ox.)			
1	닏	A church, co	nvention of churches	s, or association of chur	ches desc	nbed in se	ction 170	(b)(1)(A)(i)	١.		
2		A school des	cnbed in section 17	'0(b)(1)(A)(ii). (Attach Sc	hedule E.)						
3	\sqsubseteq	A hospital or	a cooperative hospr	tal service organization o	described	n section	170(b)(1)	(A)(iii).			
4		A medical res	search organization of	operated in conjunction	with a hos	pıtal desc	nbed in se	ction 170	(b)(1)(A)(ii	i). Enter	the hospital's name,
		city, and stat									
5			on operated for the (b)(1)(A)(iv). (Comple	benefit of a college or ur ete Part II.)	niversity ov	wned or op	perated by	a governi	mental unr	t descnb	ped in
6		A federal, sta	ite, or local governm	ent or governmental unit	t described	d in sectio	n 170(b)(1	I)(A)(v).			
7	X	An organizati	on that normally rec	eives a substantial part	of its supp	ort from a	governme	ental unit c	or from the	general	public described in
		section 170(b)(1)(A)(vi). (Comple	te Part II)							
8		A community	trust described in s	ection 170(b)(1)(A)(vi).	(Complete	Part II)					
9		An organizati	on that normally rec	eives: (1) more than 33 1	1/3% of its	support f	rom contri	butions, n	nembershi	p fees, a	nd gross receipts from
				nctions - subject to certa							
		income and u	unrelated business to	axable income (less sect	tion 511 ta	x) from bu	sinesses a	acquired b	y the orga	nization	after June 30, 1975.
	See section 509(a)(2). (Complete Part III.)										
10	An organization organized and operated exclusively to test for public safety. See section 509(a)(4).										
11	An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or										
	more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that										
	describes the type of supporting organization and complete lines 11e through 11h.										
	a Type I b Type II c Type III - Functionally integrated d Type III - Non-functionally integrated										
е	e By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than										
	foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2)										
f											
		supporting of	rganization, check th	nis box							
g	ı	Since August	t 17, 2006, has the c	organization accepted ar	ny gift or co	ontribution	from any	of the follo	owing pers	sons?	
		(i) A perso	n who directly or ind	lirectly controls, either al	one or tog	ether with	persons o	lescnbed	ın (ıi) and (ıii) below	, Yes No
		the gove	erning body of the s	upported organization?							11g(i)
		(ii) A family	member of a persor	n described in (i) above?							11g(ii)
		(iii) A 35% d	controlled entity of a	person described in (i) o	or (ii) above	∍?					11g(iii)
h	1	Provide the f	ollowing information	about the supported or	ganization	(s).					
(i) Name	of supported	(ii) EIN	(iii) Type of organization			(v) Did you		(vi) ls	the	(vii) Amount of monetary
•	orga	inization	'.'	(described on lines 1-9		in col. (i) listed in your organization in col.		(i) organiz	organization in col. (VII) Amoun		
				above or IRC section (see instructions))	governing document?		(1) of your	r support?	U.S	.?	
				(000 111011 0010110))	Yes	No	Yes	No	Yes	No	
											
								<u>.</u>	Ĭ		
		 									
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	-										
rot:	al			ŀ							

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

Schedule A (Form 990 or 990-EZ) 2013

Schedule A (Form 990 or 990 EZ) 2013 RIVERDALE SCHOOL DISTRICT FOUNDATION

(Form 990 or 990-EZ) 2013 RIVERDALE SCHOOL DISTRICT FOUNDATION 94-3187982 Page 2 Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III)

Sec	tion A. Public Support	_							
Cale	ndar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total		
1	Gifts, grants, contributions, and								
	membership fees received. (Do not								
	include any "unusual grants.")	425,854.	732,218.	846,425.	818,670.	915,218.	3,738,385.		
2	Tax revenues levied for the organ-								
	ization'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	425,854.	732,218.	846,425.	818,670.	915,218.	3,738,385.		
5	The portion of total contributions	,		ν,	<i>₹</i> ,				
	by each person (other than a	:		-	· - 1				
	governmental unit or publicly	,		-	:				
	supported organization) included		, d -		~				
	on line 1 that exceeds 2% of the	*,	***		•				
	amount shown on line 11,		• •			-			
	column (f)	, **** * , ,	* * *	. , ', '	~ ¬ ^	4 · · · · · · ·	105,727.		
6	Public support. Subtract line 5 from line 4		, ,	÷ ·		*	3,632,658.		
Sec	Section B. Total Support								
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total		
7	Amounts from line 4	425,854.	732,218.	846,425.	818,670.	915,218.	3,738,385.		
8	Gross income from interest,								
	dividends, payments received on								
	securities loans, rents, royalties								
	and income from similar sources	9,846.	4,095.	68,514.	2,724.	2,755.	87,934.		
9	Net income from unrelated business								
	activities, whether or not the								
	business is regularly carried on								
10	Other income. Do not include gain								
	or loss from the sale of capital								
	assets (Explain in Part IV.)								
11	Total support. Add lines 7 through 10	*	^ ,	, ′ -	** -	().	3,826,319.		
12	Gross receipts from related activities,	etc. (see instruction	ons)			12	10,781.		
13	First five years. If the Form 990 is for	r the organization's	first, second, thir	d, fourth, or fifth ta	ax year as a sectio	n 501(c)(3)	· 		
_	organization, check this box and stor	here					<u> </u>		
	tion C. Computation of Publ								
14	Public support percentage for 2013 (line 6, column (f) d	ivided by line 11, o	olumn (f))		14	94.94 %		
15	Public support percentage from 2012	Schedule A, Part	II, line 14			15	93.04 %		
16a	33 1/3% support test - 2013. If the	organization did no	t check the box o	n line 13, and line	14 is 33 1/3% or n	nore, check this bo			
	stop here. The organization qualifies	as a publicly supp	orted organization	ı			▶ X		
b	33 1/3% support test - 2012. If the	organization did no	t check a box on I	ine 13 or 16a, and	line 15 is 33 1/3%	or more, check th	is box		
	and stop here. The organization qual	= =	• •						
17a	10% -facts-and-circumstances tes								
	and if the organization meets the "fac	ts-and-circumstan	ces" test, check tl	nis box and stop h	ere. Explain in Pai	t IV how the organ	ization		
	meets the "facts-and-circumstances"	test. The organiza	tion qualifies as a	publicly supported	d organization				
b	10% -facts-and-circumstances tes	t - 2012. If the org	anization did not d	heck a box on line	3, 16a, 16b, or	17a, and line 15 is	10% or		
	more, and if the organization meets the	ne "facts-and-circu	mstances" test, cl	heck this box and	stop here. Explain	in Part IV how the			
	organization meets the "facts-and-cire	cumstances" test.	The organization of	qualifies as a publi	cly supported orga	anization	▶□		
18	Private foundation. If the organization	n did not check a	box on line 13, 16	a, 16b, 17a, or 17t	o, check this box a	ind see instruction	s ▶ □		

Schedule A (Form 990 or 990 EZ) 2013 Part III | Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to

Se	ction A. Public Support	siow, piease com	piete Fait II.)				
	endar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
	Gifts, grants, contributions, and	(4) 2000	(5) 2010	(0) 2011	(4) 2012	(e) 2013	(i) iotai
-	membership fees received. (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions.						
_	merchandise sold or services per-						
	formed, or facilities furnished in						
	any activity that is related to the organization's tax-exempt purpose		1				
3	Gross receipts from activities that		1		<u> </u>		
Ŭ	are not an unrelated trade or bus-		1				
	iness under section 513						
4	Tax revenues levied for the organ-						·
-			1				
	ization's benefit and either paid to or expended on its behalf		i				
_	` <u> </u>					<u> </u>	
J	The value of services or facilities						
	furnished by a governmental unit to						•
_	the organization without charge		<u> </u>				
	Total. Add lines 1 through 5			<u> </u>			
78	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
	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						
	Add lines 7a and 7b						
8	Public support (Subtractline 7c from line 6)			*	3.	, -	
	ction B. Total Support	4)				1	
	endar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
	Amounts from line 6						
108	Gross income from interest, dividends, payments received on				i		
	securities loans, rents, royalties				1		
	and income from similar sources						
t	Unrelated business taxable income						
	(less section 511 taxes) from businesses		ł				
	acquired after June 30, 1975						
	Add lines 10a and 10b						
11	Net income from unrelated business activities not included in line 10b,						
	whether or not the business is						
	regularly carned on]				
12	Other income. Do not include gain or loss from the sale of capital						
	assets (Explain in Part IV.)						
13	Total support. (Add lines 9, 10c, 11, and 12)						
14	First five years. If the Form 990 is for	the organization's	s first, second, third	l, fourth, or fifth t	ax year as a sectio	on 501(c)(3) organiz	ation,
_	check this box and stop here						<u> </u>
_	ction C. Computation of Publi	· · · · · · · · · · · · · · · · · · ·					
	Public support percentage for 2013 (lii		•	olumn (f))		15	%
	Public support percentage from 2012					16	%
	ction D. Computation of Inves						
	Investment income percentage for 20	•	• • • • • • • • • • • • • • • • • • • •	e 13, column (f))		17	%
	Investment income percentage from 2	•	•			18	%
198	a 33 1/3% support tests - 2013. If the						7 is not
	more than 33 1/3%, check this box an		•	• •	• • • •		▶∟
ŀ	33 1/3% support tests - 2012. If the						and
	line 18 is not more than 33 1/3%, chec						▶Щ
<u> 20</u>	Private foundation. If the organization	n did not check a	box on line 14, 19a	, or 19b, check t	his box and see in	structions	▶∟

Part IV Supplemental Information. Provide the explanations required by Part III, line 10; Part III, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).	Schedule A	(Form 990 or 990-EZ) 2013 RIVERDALE SCHOOL DISTRICT FOUNDATION Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or	94-3187982 Page 4
Also complete this part for any additional information. (See instructions).	Part IV		17b; and Part III, line 12.
		Also complete this part for any additional information. (See instructions).	
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SCHEDULE (Form 990)

Department of the Treasury

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

Complete if the

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Tes to Local ago, Fartin, line 21 of	Ę
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II the organization answered	
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Open to Public OMB No 1545-0047 Inspection **Employer identification number**

94-3187982

°N □

X Yes

▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.

Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection

RIVERDALE SCHOOL DISTRICT FOUNDATION

General Information on Grants and Assistance

Part

Name of the organization

Internal Revenue Service

criteria used to award the grants or assistance?

OCAL OPTION REVENUES AND TO FILL THE SIGNIFICANT UNDING FROM STATE AND SAP BETWEEN AVAILABLE (h) Purpose of grant or assistance Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any non-cash assistance (g) Description of (f) Method of valuation (book, FMV, appraisal, other) ٥. (e) Amount of assistance non-cash Describe in Part IV, the organization's procedures for monitoring the use of grant funds in the United States recipient that received more than \$5,000 Part II can be duplicated if additional space is needed (d) Amount of PUBLIC SCHOOL/ G\$V'T 863,312. cash grant Enter total number of section 501(c)(3) and government organizations listed in the line 1 table (c) IRC section if applicable Enter total number of other organizations listed in the line 1 table (b) EIN 1 (a) Name and address of organization RIVERDALE SCHOOL DISTRICT 51J 11733 S.W. BREYMAN AVENUE or government OR 97219 PORTLAND, Part II N

Schedule I (Form 990) (2013)

(Form 990) (2013) RIVERDALE SCHOOL DISTRICT FOUNDATION

Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22.

Part III can be duplicated if additional space is needed Schedule I (Form 990) (2013)
Part III Grants and Other

Page 2

94-3187982

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
Part IV Supplemental Information. Provide the information required	uired in Part I, lin	e 2, Part III, column	in Part I, line 2, Part III, column (b), and any other additional information.	ditional information.	
PART I, LINE 2:					
EXPLANATION: THE FOUNDATION RECEIVES	1	A REPORT FROM THE		SCHOOL DISTRICT ON	
AN ANNUAL BASIS DESCRIBING IN GENERAL TERMS THE DISPOSITION OF THE FUNDS.	RAL TERM	S THE DISP	OSITION OF	THE FUNDS.	
THE FOUNDATION REVIEWS THE REPORT	TO MONI	TOR THAT T	REPORT TO MONITOR THAT THE SCHOOL DISTRICT	DISTRICT IS	
DISTRIBUTING THE FUNDS IN THE MANNER	ER REQUESTED	STED.			
PART II, LINE 1, COLUMN (H):					
NAME OF ORGANIZATION OR GOVERNMENT:	: RIVERDALE		SCHOOL DISTRICT	51J	

Schedule I (Form 990) (2013)

THE SIGNIFICANT GAP BETWEEN

(H) PURPOSE OF GRANT OR ASSISTANCE: TO FILL

332102 10-29-13

Schedule I (Form 9 Part IV Supr	90)	KIVI	KUALE	SCH	ודת חחי	STRICT	OUNDATIO	N .	94-	-318/982	Page 2
Part IV Supp	olemental in	tormatic	n								
AVAILABLE	PINDING	ED OM	CMVME	Z NTD	TOCAT	ODMION	DEMENTIES	Z NID	mura	A MATERIA T	
AANTHABLE	FONDING	FROM	SIMIE	AND	TOCAL	OPTION	REVENUES	MIND	THE	ANNUAL	
OPERATING	BUDGET (OF THE	DIST	RICT	•						
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SCHEDULE M (Form'990)

Department of the Treasury

Internal Revenue Service

Noncash Contributions

Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

Attach to Form 990.

Information about Schedule M (Form 990) and its instructions is at www.irs.gov/form990. Inspection Employer identification number

OMB No 1545-0047

Open to Public

Name of the organization

RIVERDALE SCHOOL DISTRICT FOUNDATION

94-3187982

Pa	Types of Property					
		(a) Check if applicable	(b) Number of contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of de noncash contribu	
1	Art - Works of art		items contributed	Tom 550, Fart VIII, line 1g		
2	Art - Historical treasures					
3	Art - Fractional interests					
4	Books and publications		^^			-
5	Clothing and household goods		, , , ,		· · · · · · · · · · · · · · · · · · ·	
6	Cars and other vehicles					
7	Boats and planes					
8	Intellectual property					
9	Secunties - Publicly traded	Х	11	92,723.	FAIR MARKET	VALUE
10	Secunties - Closely held stock				· · · · · · · · · · · · · · · · · · ·	
11	Securities - Partnership, LLC, or					
	trust interests					
12	Securities - Miscellaneous					
13	Qualified conservation contribution -					
	Histonc structures					
14	Qualified conservation contribution - Other					
15	Real estate - Residential					
16	Real estate - Commercial					
17	Real estate - Other					
18	Collectibles			4 000		
19	Food inventory	Х	3	1,332.	ACTUAL COST	
20	Drugs and medical supplies					
21	Taxidermy					
22	Historical artifacts					
23	Scientific specimens					
24	Archeological artifacts Other ► (SUPPLIES)	Х	6	197.	ACTUAL COST	
25	· · · · · · · · · · · · · · · · · · ·			137.	ACTUAL COST	
26 27	Other ()					
27 28	Other (-		······································
<u>20</u> 29	Number of Forms 8283 received by the organiz	zation dunn	the tay year for a	Contributions		
	for which the organization completed Form 828			l I		
	Tel William the organization completed from ozi	50, r arriv,		<u> 20 j</u>		Yes No
30a	During the year, did the organization receive by	v contributio	on any property rei	oorted in Part I, lines 1 - 28 t	hat it must hold for	163 140
	at least three years from the date of the initial of					
	the entire holding period?		,		,p. p.a. p.a.a.a. 101	30a X
b	If "Yes," describe the arrangement in Part II.					332
31	Does the organization have a gift acceptance p	oolicy that re	equires the review	of any non-standard contrib	utions?	31 X
32a	Does the organization hire or use third parties of					
	contributions?		<u> </u>	,,,		32a X
b	If "Yes," describe in Part II.					
33	If the organization did not report an amount in	column (c) f	or a type of prope	rty for which column (a) is ch	iecked,	
	describe in Part II					
. ц.	For Donomusek Reduction Act Nation and					

Schedule M (Form 990) (2013)

Schedule M (Form 990) (2013) RIVERDALE SCHOOL DISTRICT FOUNDATION	94-3187982	Page 2
Part If Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33 is reporting in Part I, column (b), the number of contributions, the number of items received, or a com this part for any additional information.	, and whether the organiza bination of both. Also com	ation plete
SCHEDULE M, PART I, COLUMN (B):		
EXPLANATION: REPRESENTS THE NUMBER OF CONTRIBUTIONS.		
		
		
		
		
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SCHEDULE &

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

Attach to Form 990 or 990-EZ.

2013
Open to Public

Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990

m990 Inspection
Employer identification number

94-3187982

Name of the organization
RIVERDALE SCHOOL DISTRICT FOUNDATION

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

THE MISSION OF THE RIVERDALE SCHOOL FOUNDATION IS TO CULTIVATE AND

ENSURE EDUCATIONAL EXCELLENCE. TO DO THAT, THE FOUNDATION STRIVES TO

FILL THE GAP BETWEEN THE SCHOOL DISTRICT'S OPERATING BUDGET AND WHAT IT

ACTUALLY COSTS TO PROVIDE OUR CHILDREN THE RIVERDALE EDUCATION THEY

DESERVE-A NUMBER THAT CAN RUN AS HIGH AS \$6,000 PER STUDENT.

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

TO FILL THE SIGNIFICANT GAP BETWEEN AVAILABLE FUNDING FROM STATE AND
LOCAL OPTION REVENUES AND THE ANNUAL OPERATING BUDGET OF THE DISTRICT.

FUNDS RAISED FROM OUR ANNUAL CAMPAIGNS MAINTAIN SMALL CLASS SIZES AND
THE BREADTH OF PROGRAMS THAT HAVE SET THE STANDARD FOR EXCEPTIONAL
EDUCATION IN OREGON.

FORM 990, PART VI, SECTION A, LINE 8B:

EXPLANATION: THE FOUNDATION DOES NOT HAVE COMMITTEES THAT CAN ACT ON BEHALF
OF THE GOVERNING BODY. THE BOARD OF DIRECTORS MAKES ALL DECISIONS AND
TAKES ALL ACTIONS.

FORM 990, PART VI, SECTION B, LINE 11:

EXPLANATION: THE TREASURER GATHERS INFORMATION AND PROVIDES TO CPA FIRM FOR PREPARATION. THE FOUNDATION PRESIDENT REVIEWS THE COMPLETED RETURN WITH THE TREASURER PRIOR TO FILING. THE COMPLETED RETURN IS POSTED ONLINE AND ACCESSIBLE TO ALL BOARD MEMBERS.

FORM 990, PART VI, SECTION B, LINE 12C:

Schedule O (Form 990 or 990-EZ) (2013)	Page 2
Name of the organization RIVERDALE SCHOOL DISTRICT FOUNDATION	Employer identification number 94-3187982
EXPLANATION: THE FOUNDATION ASKS AT THE BEGINNING OF EACH	FISCAL YEAR
WHETHER DIRECTORS OR OFFICERS HAVE CONFLICTS OF INTEREST.	THEY READ THE
POLICY, SIGN A FORM AND SUBMIT IT TO THE SECRETARY.	
FORM 990, PART VI, SECTION C, LINE 19:	
EXPLANATION: THE ORGANIZATION MAKES ITS GOVERNING DOCUMEN	TS, CONFLICT OF
INTEREST POLICY, AND FINANCIAL STATEMENTS AVAILABLE TO TH	E PUBLIC UPON
REQUEST.	
	