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DLN: 93493109005026

Form **990**

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private

▶ 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.IRS.gov/form990

OMB No 1545-0047

Open to Public Inspection

A Fo	r the :	2014 ca	l <mark>endar year, or tax year beginni</mark>	ng 06-01-2014 , and ending 05-31-20:	L5		
B Che	eck if a	pplicable	C Name of organization Riverside Military Academy Inc			D Employer ide	entification number
☐ Add	lress ch	nange	,			58-061699	94
┌ Nar	ne cha	inge	Doing business as			·	
┌ Init	ıal retu	ım				E Telephone nur	mhar
_ Fina			Number and street (or P O box if 2001 Riverside Drive	mail is not delivered to street address) Room/s	uite	•	
		mınated	2001 Riverside Drive			(770)532-	6251
☐ Am			Gainesville, GA 30501	ountry, and ZIP or foreign postal code		G Gross receipts	¢ 50 223 300
App	lication	n pending]			G Gloss receipts	
			F Name and address of pr	rıncıpal officer	H(a) Is th	– us a group retur	n for
			James H Benson Sr 2001 Riverside Drive		subo	rdinates?	┌ Yes 🗸 No
			Gainesville, GA 30501		H(b) Are	all subordinates	┌ Yes ┌ No
			<u> </u>		ınclu	ided?	
I Tax	x-exem	npt statu:	s ✓ 501(c)(3) 501(c)() ◀	(Insert no) 4947(a)(1) or 527	If "N	o," attach a list	(see instructions)
J W	ebsite	e:► wv	ww riversidemilitary com		H(c) Gro	up exemption nu	ımber ►
K Form	n of org	ganızatıo	n 🔽 Corporation 🗌 Trust 🦳 Associat	tion Other ►	L Year of fo	ormation 1907	◀ State of legal domicile GA
Pa	rt I	Sun	nmary				
Activities & Governance	t <u>-</u> -	the provand the	vision of a rigorous academic pr structure and discipline inherer	emy is to prepare ethical young men of ogram, leadership opportunities, compent in a military college preparatory school of the college prepar	titive athletic: ol environmer	s, extensive co- it	curricular activities,
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8	l			rning body (Part VI, line 1a)			23
툳	l			s of the governing body (Part VI, line 1b			23
Act				n calendar year 2014 (Part V, line 2a)			213
•				necessary)		6	110
			nrelated business revenue from elated business taxable income		7a	128,674 127,674	
	<u> </u>	ivec um	Ciacca basiness taxable income			or Year	Current Year
	8	Cont	ributions and grants (Part VIII,	line 1h)		1,037,464	1,107,524
ele ele	8 9			line 1h)		1,037,464	1,107,524 18,416,467
enue		Progr	ram service revenue (Part VIII,				18,416,467
Rayente	9	Progr Inves	ram service revenue (Part VIII, stment income (Part VIII, colun	line 2g)		16,045,005	18,416,467 1,512,894
Revenue	9 10	Progr Inves Othe Total	ram service revenue (Part VIII, stment income (Part VIII, colun r revenue (Part VIII, column (A revenue—add lines 8 through 1	Inne 2g)		16,045,005 1,277,573 852,390	18,416,467 1,512,894 910,593
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Revenue	9 10 11 12	Progr Inves Othe Total 12)	ram service revenue (Part VIII, stment income (Part VIII, colum r revenue (Part VIII, column (A revenue—add lines 8 through 1 	Inne 2g)	ne	16,045,005 1,277,573 852,390 19,212,432 2,552,561	18,416,467 1,512,894 910,593 21,947,478 2,883,990
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Atlanta, GA 30328

Use Only

✓ Yes ☐ No

Part IV	Checklis	t of Red	uired	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 (see instructions)? $^{\circ}$	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		No
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		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i>	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		No
9	Did the organization report an amount in Part X, line 21 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^{\square}	9		No
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	10	Yes	
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 as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	Yes	
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		No
c	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	11c		No
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 Part X, line 16? If "Yes," complete Schedule D, Part IX.	11d		No
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part χ^{\bullet}	11e	Yes	
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	1 00	No
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	Yes	
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		No
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 or more? If "Yes," complete Schedule F, Parts I and IV	14b	Yes	
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		No
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	Yes	
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 (see instructions)	17		No
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		No
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		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals 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, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J.</i>	23	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 lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a	Yes	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		No
С	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		No
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), 501(c)(4), and 501(c)(29) 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		No
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 "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>	27		No
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 IV			
		28a		No
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		N o
C	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M ${\mathfrak S}$	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		32		No
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? If "Yes," complete Schedule R, Part I	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	Yes	
35a	Did the organization have a controlled entity within the meaning of section $512(b)(13)$?	35a		No
b	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? If "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		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	38	Yes	

Part V Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response or note to any line in this Part V			
4-	Enter the number reported in Box 2 of Form 1006 Enter 0 of not applicable 1.1		Yes	No
	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable 1a 20 Enter the number of Forms W-2G included in line 1a Enter -0 - if not applicable 1b 0			
	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 (see instructions)	2b	Yes	
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За	Yes	
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b	Yes	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		No
b	If "Yes," enter the name of the foreign country ►			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			
6a	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 as charitable contributions?	5c 6a		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	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		No
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Νo
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8		
9a	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	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			
11	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)			
	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			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O	13a		
	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			
С	Enter the amount of reserves on hand			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
ь	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		

Section A. Governing Body and Management

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.

Check if Schedule O contains a response or note to an	/ line in this Part VI

	<u> </u>		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year			
	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			
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		Νo
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? .	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No
6	Did the organization have members or stockholders?	6		No
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	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
Se	ection B. Policies (This Section B requests information about policies not required by the Internal R	evenu	ıe Cod	e.)
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		No
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, 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 body before filing the form?	11a	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes	
13	Did the organization have a written whistleblower policy?	13	Yes	
14	Did the organization have a written document retention and destruction policy?	14		Νo
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 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 arrangement with a taxable entity during the year?	16a		Νo
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		
Se	ection C. Disclosure			

- 17 List the States with which a copy of this Form 990 is required to be filed▶GA
- 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 made these available. Check all that apply

Own website Another's website V Upon request Other (explain in Schedule O)

- 19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year
- 20 State the name, address, and telephone number of the person who possesses the organization's books and records ►Kelly Smith CPA

2001 Riverside Drive Gainesville, GA 30501 (770) 538-2189

Form 990 (2014)	
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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, 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 neither the organization nor any related organization compensated any current officer, director, or trustee

(A) Name and Title	(B) A verage hours per week (list any hours	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)	(D) Reportable compensation from the organization (W-	(E) Reportable compensation from related organizations (W-	(F) Estimated amount of other compensation from the
	for related organizations below dotted line)	Former Highest compensated employee Key employee Officer Institutional Trustee Individual trustee or chiector	2/1099-MISC)	2/1099-MISC)	organization and related organizations

Form **990** (2014)

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and Title	(B) A verage hours per week (list any hours	more t perso	han d n is	ne l both	box, ∣an (heck unless officer stee)	;	(D) Reportable compensation from the organization (W-	(E) Reportable compensation from related organizations (W-	(F) Estimated amount of other compensation from the
	for related organizations below dotted line)	Individual trustiee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1099-MISC)	2/1099-MISC)	organization and related organizations

1b	Sub-Total	►			
c	Total from continuation sheets to Part VII, Section A	٠			
d	Total (add lines 1b and 1c)	▶	547,579	0	49,124

Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization►3

			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		No
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such			
	ındıvıdual	4	Yes	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for			
	services rendered to the organization? If "Yes," complete Schedule I for such person	5		No

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 Report compensation for the calendar year ending with or within the organization's tax year

(A)	(B)	(C)
Name and business address	Description of services	Compensation
Flik Independent School Dining PO Box 50196 Los Angeles, CA 900740196	Food Service	1,824,222
Clark-Maynor LLC 4190 Cleveland Hwy Gainesville, GA 30506	Laundry service	503,924
Classic City Solutions Inc 1487 Dunlap Road Winterville, GA 30683	Cleaning service	245,316
J Geyer Advertising PO Box 5595 Gainesville, GA 30506	Clothing	208,094
Hanover Uniform Company 3501 Marmenco Court Baltimore, MD 21230	Cadet Uniforms	137,830
2 Total number of independent contractors (including but not limited to those listed above	who received more than	

Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ▶5

Part V	4 🛊 🛊 1	Statement o						
		Check If Schedi	ule O contains a respoi	nse or note to any lir	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts	1a b	Federated cam						512-514
Gra not	c	Fundraising eve						
ts, l	_							
Gif ila	d	Related organiz						
ns, Sim	e	Government grants						
ıtio er (f	All other contribution similar amounts no	ons, gifts, grants, and 1f ot included above	1,107,524				
ribi Oth	g	Noncash contribution	ons included in lines	171,236	İ	j		
ont	h	Total. Add lines	s 1a-1f		1,107,524			
C				Business Code				
nue	2a	Tuition		611710	17,723,729	17,723,729		
evel	ь	Auxillary Services		611710	596,293	596,293		
ж В	c	Summer Programs		611710	96,445	96,445		
er vi c	d				23,113			
Program Serwde Revenue	e							
graf	f	All other progra	am service revenue					
Pro	g	Total. Add lines	s 2a-2f		18,416,467			
	3		ome (including dividen					1 075 55
			ar amounts)		1,975,554			1,975,554
	4 5			proceeds				
		Royalties :	(ı) Real	(II) Personal				
	6a	Gross rents	422,797	,				
	ь	Less rental expenses	294,123					
	С	Rental income	128,674					
	d	or (loss) Net rental inco	L me or (loss)		128,674		128,674	
			(ı) Securities	(п) O ther				
	7a	Gross amount from sales of assets other than inventory	35,702,090	1,701				
	b	Less cost or other basis and sales expenses	36,166,451	0				
	С	Gain or (loss)	-464,361	1,701				
	d 8a		ss)		-462,660			-462,660
Other Revenue	, ou	Gross income f events (not inc \$ of contributions See Part IV, lin	luding s reported on line 1c)					
ب رو		misav j iiii	a					
the	ь		penses b					
0	C		(loss) from fundraising	events 🛌				
	9a	Gross income f See Part IV, lin	rom gaming activities ne 19 a					
	ь	Less direct ex	penses b					
			(loss) from gamıng actı	vities				
	10a	Gross sales of returns and allo		1,597,167				
	ь	Less cost of g	oods sold b	815,248				
	С		(loss) from sales of ınv		781,919	781,919		
		Miscellaneous	s Revenue	Business Code				
	11a							
	Ь							
	С	A.II						
	d	All other reven						
	e	Total. Add lines		•				
	12	Total revenue.	See Instructions .	►	21,947,478	19,198,386	128,674	1,512,894

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete col	umn (A)
--	-------	-----

Section	on 501(c)(3) and 501(c)(4) organizations must complete all columns All Check if Schedule O contains a response or note to any line in this				
	ot include amounts reported on lines 6b, p, 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 domestic organizations and domestic governments See Part IV, line 21		enpenede	general expenses	
2	Grants and other assistance to domestic individuals See Part IV, line 22	2,743,131	2,743,131		
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16	140,859	140,859		
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	594,328	488,630	84,295	21,403
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	6,284,419	5,180,175	876,947	227,297
8	Pension plan accruals and contributions (include section $401(k)$ and $403(b)$ employer contributions)	246,910	205,426	26,949	14,535
9	Other employee benefits	590,593	489,613	67,542	33,438
10	Payroll taxes	508,825	421,380	87,445	
11	Fees for services (non-employees)				_
а	Management				
b	Legal	11,137		11,137	
c	Accounting	27,851		27,851	
d	Lobbying				
e	Professional fundraising services See Part IV, line 17				
f	Investment management fees	80,595		80,595	
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	22,900	22,900		
12	Advertising and promotion	209,565		209,565	
13	Office expenses	614,033	375,947	238,086	
14	Information technology				
15	Royalties				
16	Occupancy	1,398,408	1,273,482	115,323	9,603
17	Travel	114,526	83,894	15,836	14,796
18	Payments of travel or entertainment expenses for any federal, state, or local public officials		·		
19	Conferences, conventions, and meetings				
20	Interest	3,451,885	3,268,154	183,731	
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	2,815,341	2,682,281	133,060	
23	Insurance	211,893	190,303	21,590	
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	Dining	1,192,566	1,192,566	0	0
b	Other expense	780,654	722,562	55,614	2,478
c	Library, textbooks, and	577,937	461,878	42,046	74,013
d	Student Activities	406,090	406,090	0	0
e	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	23,024,446	20,349,271	2,277,612	397,563
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

Par	ťΧ	Check if Schedule O contains a response or note to any line in	thıs P	art X			
					(A)		(B)
		Cook was interest became			Beginning of year 466,668	_	End of year 866,642
	1	Cash-non-interest-bearing			7,810,359		6,154,327
	2	Savings and temporary cash investments					<u> </u>
	3	Pledges and grants receivable, net			784,300		585,617
	4	Accounts receivable, net			851,728	4	714,355
	5	Loans and other receivables from current and former officers, cemployees, and highest compensated employees Complete P Schedule L	art II d	of		5	
Assets	6	Loans and other receivables from other disqualified persons (a $4958(f)(1)$), persons described in section $4958(c)(3)(B)$, and and sponsoring organizations of section $501(c)(9)$ voluntary e organizations (see instructions) Complete Part II of Schedule	contril mploy	buting employers		6	
82	7	Notes and loans receivable, net				7	
₹	8	Inventories for sale or use			842,486	8	840,296
	9	Prepaid expenses and deferred charges			5 12, 100	9	3.5,255
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a	 111,840,119			
	ь	Less accumulated depreciation	10b	48,845,405	65,286,406	10c	62,994,714
	11	Investments—publicly traded securities			34,456,677	11	35,091,227
	12	Investments—other securities See Part IV, line 11				12	676,403
	13	Investments—program-related See Part IV, line 11				13	
	14	Intangible assets				14	
	15	Other assets See Part IV, line 11			1,354,363	15	1,014,568
	16	Total assets. Add lines 1 through 15 (must equal line 34) .			111,852,987	16	108,938,149
	17	Accounts payable and accrued expenses			1,547,030		1,751,397
	18	Grants payable			1,5 11,5 55	18	.,,
	19	Deferred revenue			796,270	19	998,287
	20	Tax-exempt bond liabilities		• •	68,660,000	20	66.860.000
_	21	Escrow or custodial account liability Complete Part IV of Sch				21	
Liabilities	22	Loans and other payables to current and former officers, direct key employees, highest compensated employees, and disquali	ors, tr				
죭		persons Complete Part II of Schedule L				22	
	23	Secured mortgages and notes payable to unrelated third partie	es .		1,000,713	23	1,000,308
	24	Unsecured notes and loans payable to unrelated third parties				24	
	25	Other liabilities (including federal income tax, payables to rela and other liabilities not included on lines 17-24) Complete Pa					
		D			2,110,537	25	2,033,428
	26	Total liabilities. Add lines 17 through 25			74,114,550	26	72,643,420
ces		Organizations that follow SFAS 117 (ASC 958), check here ▶ lines 27 through 29, and lines 33 and 34.	⊽ and	l complete			
<u>a</u>	27	Unrestricted net assets			36,036,483	27	34,521,736
ရှိ	28	Temporarily restricted net assets			1,113,492	28	978,986
돧	29	Permanently restricted net assets			588,462	29	794,007
or Fund Balance		Organizations that do not follow SFAS 117 (ASC 958), check he complete lines 30 through 34.	ere 🟲	and			
رة O	30	Capital stock or trust principal, or current funds				30	
Assets	31	Paid-in or capital surplus, or land, building or equipment fund				31	
<u>\$</u>	32	Retained earnings, endowment, accumulated income, or other	funds			32	
_							
Net /	33	Total net assets or fund balances			37,738,437	33	36,294,729

Par	Reconcilliation 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		21,9	947,478
2	Total expenses (must equal Part IX, column (A), line 25)	2		23,0	024,446
3	Revenue less expenses Subtract line 2 from line 1	3		-1,0	076,968
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		37,7	738,437
5	Net unrealized gains (losses) on investments	5		-:	120,407
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9		- 2	246,333
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		36,2	294,729
Par	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				. \sqsubset
				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		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or review a separate basis, consolidated basis, or both	wed on			
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a sepa basis, consolidated basis, or both	rate			
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis				
c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversigh audit, review, or compilation of its financial statements and selection of an independent accountant?	nt of the	2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain it Schedule O	n			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	e	За		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the		3b		

Software ID: **Software Version:**

EIN: 58-0616994

Name: Riverside Military Academy Inc

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest

Form 990, Part VII - Compensation Compensated Employees, and Inde	pendent Cor	tracto	rs			, -	•	. , ., .	1	
(A) Name and Title	(B) Average hours per week (list any hours for related	Position (do not check more than one box, unless person is both an officer and a director/trustee)				inless fficer tee)		(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
	organizations below dotted line)	Individual trustae or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former			related organizations
(1) Lucile Beaver Emerita	1 00	х						0	0	0
(1) Kenneth L McKelvey	1 00	х						0	0	0
Chairman (2) Bernard M Freeman	1 00	х						0	0	0
Vice Chairman (3) Frederick J Kennedy	1 00	Х						0	0	0
Immediate Past Chair (4) S Terry Clontz	1 00							0	0	
Secretary (5) C J Lail Jr	1 00	Х						0	0	0
Treasurer		Х						0	0	0
(6) Ruben A Barahona Trustee	1 00	x						0	0	0
(7) Margaret O Blackstock Trustee	1 00	х						0	0	0
(8) Counte L Cooley	1 00	х						0	0	0
Trustee (9) C Brian Daniel	1 00	X						0	0	0
Trustee (10) Thomas M Finn	1 00	×						0	0	0
Trustee (11) Gregory A Fisher	1 00									
Trustee (12) Felix A Gonzalez-Canto	1 00	X						0	0	0
Trustee	1.00	Х						0	0	0
(13) Anthony M Herdener Trustee	1 00	х						0	0	0
(14) Drew W Horner Trustee	1 00	x						0	0	0
(15) Charles A James	1 00	х						0	0	0
Trustee (16) James D Kalmenson	1 00	Х						0	0	0
Trustee (17) Richard M Nichols	1 00	X						0	0	0
Trustee (18) J Allen Nivens Jr	1 00	^								
Trustee (19) Daniel G Oakey	1 00	Х						0	0	0
Trustee		Х						0	0	0
(20) Andrew W Talkıngton Trustee	1 00	х						0	0	0
(21) James R Van Arsdale	1 00	Х						0	0	0
Trustee (22) Jeffrey S Weiner	1 00	х						0	0	0
Trustee (23) F Chris Whitlock	1 00	X						0	0	0
Trustee (24) James H Benson Sr	70 00									_
President				Х				294,083	0	16,990

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

(A) Name and Title	(B) A verage hours per week (list any hours for related organizations below dotted line)	Pore so a Individual trustae or director	ion (d ian oi n is b dired	ne booth a ctor/	ox, u an of trust	nless ficer	Former	(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
(26) Amanda Griffin Vice President of Advancement	47 00			х				133,699	0	13,923
(1) Kelly M Smith Chief Financial Officer	47 00			Х				119,797	0	18,211

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493109005026

Employer identification number

OMB No 1545-0047

SCHEDULE A (Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

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.

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

Open to Public Inspection

Riversi	de Mili	tary Academy Inc						
		D	- 61 '1 6	U-1 - /AU	1		58-0616994	
Par				tatus (All organiza				ons.
	rganı:	zation is not a private fo		•	= '	•	•	
1	<u> </u>	A church, convention				n section 170(b)(1)(A)(ı).	
2	<u> </u>	A school described in	=					
3		A hospital or a cooper		=				
4	Г	A medical research or		erated in conjunction v	vith a hospital d	escribed in se	ction 170(b)(1)(A)(iii). Enter the
_	_	hospital's name, city,	and state	C) C II				<u> </u>
5	ı	An organization opera			versity owned o	r operated by	a governmental unit d	escribed in
	_	section 170(b)(1)(A)						
6	<u>_</u>	A federal, state, or loc						
7	J	An organization that n	•	•		om a governme	ental unit or from the <u>c</u>	jeneral public
8	_	described in section 1 A community trust des				+ 11 \		
9	<u>'</u>	An organization that n					hutians mambarshin	foos and gross
9	,							
		receipts from activitie its support from gross						
						•	•	i busillesses
40	_	acquired by the organi						
10	<u> </u>	An organization organ	· ·	•	•	•		
11	ı	An organization organ one or more publicly s						
		the box in lines 11a th						
а	Γ	Type I. A supporting o						
		supported organization			-	ty of the dırect	ors or trustees of the	supporting
	_	organization You mus	-	•				
b	ļ	Type II. A supporting	_	Territoria de la companya de la comp			=	=
		management of the su must complete Part IV			same persons c	ilat Colltiol of 1	nanage the supported	organization(s) fou
c	Γ	Type III functionally	•		n operated in c	onnection with	, and functionally integ	grated with, its
	_	supported organization						
d		Type III non-function						
		not functionally integr					ement and an attentiv	eness requirement
e	\vdash	(see instructions) Yo Check this box if the o					saTvnel Tvnell T	vne III functionally
•	•	integrated, or Type III					5 d 1 , pc 1 , 1 , pc 11 , 1	, pe III lanctionan,
f		Enter the number of su						
g		Provide the following i	nformation abo	out the supported orga	ınızatıon(s)			
	(i)Na	ame of supported	(ii) EIN	(iii) Type of	(iv) Is the org	janization	(v) A mount of	(vi) A mount of
		organızatıon		organization	listed in your		monetary support	other support (see
				(described on lines	docume	nt?	(see instructions)	instructions)
				1-9 above or IRC section (see				
				instructions))]	
				,,	Yes	No		
Total								

Sch	edule A (Form 990 or 990-EZ) 2014						Page 2
Pa	Support Schedule for (Complete only if you c	hecked the bo	x on line 5, 7,	or 8 of Part I o	r if the organiza	ation failed	to qualify under
	Part III. If the organiza ection A. Public Support	tion fails to qu	alify under the	tests listed bel	ow, please com	ipiete Part I	11.)
	endar year (or fiscal year beginning	(-) 2010	(1) 2011	(-) 2012	(4) 2012	(-) 201	(6) T. t. l
	in) 🟲	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not include any "unusual						
	grants ")						
2	Tax revenues levied for the						
	organization's benefit and either						
	paid to or expended on its						
3	behalf 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)						
6	Public support. Subtract line 5 from line 4						
S	ection B. Total Support	1	l			1	
	endar year (or fiscal year beginning	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
	in) ►	(a) 2010	(0) 2011	(6) 2012	(d) 2013	(e) 2014	(I) Total
7	A mounts from line 4						
8	Gross income from interest,						
	dividends, payments received on securities loans, rents, royalties						
	and income from similar						
	sources						
9	Net income from unrelated						
	business activities, whether or not the business is regularly carried						
	on						
10	Other income Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI)						
11	Total support Add lines 7 through 10						
12	Gross receipts from related activities	es, etc (see inst	ructions)		•	12	<u> </u>
13	First five years. If the Form 990 is f	or the organizati	on's first, second	l, thırd, fourth, or	fifth tax year as a	section 501	(c)(3)
	organization, check this box and sto					<u> </u>	<u> </u>
	ection C. Computation of Pub			4.4 1 (5)		 	
14	Public support percentage for 2014	· ·		11, column (f))		14	
15	Public support percentage for 2013	•	•			15	
16a	33 1/3% support test—2014. If the				line 14 is 33 1/3%	∕o or more, ch	
h	and stop here. The organization qua 33 1/3% support test—2013. If the				and line 15 is 3	3 1/3% or mo	re check this
	box and stop here. The organization				, and fine 13 is 3.	3 1/3/0 01 1110	re, check this ▶□
17a	10%-facts-and-circumstances test-	-2014. If the org	anızatıon dıd not	check a box on li			,
	is 10% or more, and if the organizat						
	in Part VI how the organization mee	ts the "facts-and	d-circumstances'	test The organi	zation qualifies as	s a publicly s	
h	organization 10%-facts-and-circumstances test-	-2013. If the ora	anization did not	check a hov on li	ne 13 16a 16b	or 17a and b	▶ ┌
	15 is 10% or more, and if the organ						
	Explain in Part VI how the organizat						ublicly
	supported organization				471		▶ ┌
18	Private foundation. If the organization instructions	on ala not check	ca box on line 13	, 16a, 16b, 1/a,	or 1 / b, check this	s pox and see	• ▶ □

Schedule A (Form 990 or 990-EZ) 2014 Page 3 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 qualify under the tests listed below, please complete Part II.) Section A. Public Support Calendar year (or fiscal year beginning (a) 2010 **(b)** 2011 (c) 2012 (d) 2013 (e) 2014 (f) Total in) 🟲 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose Gross receipts from activities that are not an unrelated trade or business under section 513 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 5 7a 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 c Add lines 7a and 7b Public support (Subtract line 7c from line 6) Section B. Total Support Calendar year (or fiscal year beginning (a) 2010 **(b)** 2011 (c) 2012 (d) 2013 (e) 2014 (f) Total in) 🟲 Amounts from line 6 Gross income from interest, 10a dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b C Net income from unrelated 11 business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include 12 gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c, 11. and 12) First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage Public support percentage for 2014 (line 8, column (f) divided by line 13, column (f)) 15

15 Public support percentage for 2014 (line 8, column (f) divided by line 13, column (f))

16 Public support percentage from 2013 Schedule A, Part III, line 15

Section D. Computation of Investment Income Percentage

17 Investment income percentage from 2014 (line 10c, column (f) divided by line 13, column (f))

18 Investment income percentage from 2013 Schedule A, Part III, line 17

18

19a 33 1/3% support tests—2014. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

b 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

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 Supporting Organizations

(Complete only if you checked a box on line 11 of Part I If you checked 11a of Part I, complete Sections A and B If you checked 11b of Part I, complete Sections A and C If you checked 11c of Part I, complete Sections A, D, and E If you checked 11d of Part I, complete Sections A and D, and complete Part V $\,)$

Section A. All Supporting Organizations

Se	ection A. All Supporting Organizations			
			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section $509(a)(1)$ or (2) ? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section $509(a)(1)$ or (2) .	2		
За	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.	За		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.	3b		
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.	3с		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked 11a or 11b in Part I, answer (b) and (c) below.	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.	4b		
c	Did the organization support any foreign supported organization that does not have an IRS determination under sections $501(c)(3)$ and $509(a)(1)$ or $(2)^7$ If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section $170(c)(2)(B)$ purposes.	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document).	5a		
b	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b		
c	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations, (b) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (c) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI .	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part II of Schedule L (Form 990).	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509 (a)(1) or (2))? If "Yes," provide detail in Part VI .	9a		
b	Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If</i> "Yes," provide detail in Part VI .	9b		
c	Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI .	9c		
L0a	Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer b below.	10a		
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings).	10b		
l1	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below,			
	the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		

c A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.

11c

Pa	rt IV Supporting Organizations (continued)			
S	ection B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization.	2		
S	ection C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).	1		
S	ection D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (1) a written notice describing the type and amount of support provided during the prior tax year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.	3		
S	ection E. Type III Functionally-Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see The organization satisfied the Activities Test Complete line 2 below The organization is the parent of each of its supported organizations. Complete line 3 below The organization supported a governmental entity. Describe in Part VI how you supported a government entity instructions.			
2	Activities Test Answer (a) and (b) below.		Yes	No
	a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.	2a		
	b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.	2b		
3				
	a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in Part VI.	3a		
	b Did the organization exercise a substantial degree of direction over the policies, programs and activities of each		1 1	

of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.

3b

Part V - Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

1	_	Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov 20, 1970 See instructions. All other
ype	[]	II non-functionally integrated supporting organizations must complete Sections A through E

	Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		

	Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)	1		
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
c	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
e	Discount claimed for blockage or other factors (explain in detail in Part VI)			
2	Acquisition indebtedness applicable to non-exempt use assets	2		
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions)	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 035	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		

Section C - Distributable Amount

- **1** Adjusted net income for prior year (from Section A, line 8, Column A)
- 2 Enter 85% of line 1
- 3 Minimum asset amount for prior year (from Section B, line 8, Column A)
- 4 Enter greater of line 2 or line 3
- 5 Income tax imposed in prior year
- **6 Distributable Amount.** Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)
- 7 Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions)

	Current Year
1	
2	
3	
4	
5	
6	

Section D - Distributions	Current Year		
1 Amounts paid to supported organizations to accom	plish exempt purposes		
2 Amounts paid to perform activity that directly furthexcess of income from activity	ers exempt purposes of supp	ported organizations, in	
3 Administrative expenses paid to accomplish exemp	ot purposes of supported org	anızatıons	
4 Amounts paid to acquire exempt-use assets			
5 Qualified set-aside amounts (prior IRS approval rec	nured)		
6 Other distributions (describe in Part VI) See instru	JCTIONS		
7 Total annual distributions. Add lines 1 through 6			
8 Distributions to attentive supported organizations t details in Part VI) See instructions	o which the organization is r	esponsive (provide	
9 Distributable amount for 2014 from Section C, line	6		
10 Line 8 amount divided by Line 9 amount			
		(::)	(:::)
Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2014	(iii) Distributable Amount for 2014
1 Distributable amount for 2014 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2014 (reasonable cause requiredsee instructions)			
3 Excess distributions carryover, if any, to 2014			
a From 2009			
b From 2010			
c From 2011			
d From 2012			
e From 2013			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2014 distributable amount i Carryover from 2009 not applied (see instructions)			
j Remainder Subtract lines 3g, 3h, and 3i from 3f			
4 Distributions for 2014 from Section D, line 7 \$			
A pplied to underdistributions of prior years			
b Applied to 2014 distributable amount			
c Remainder Subtract lines 4a and 4b from 4			
5 Remaining underdistributions for years prior to 2014, if any Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions)			
6 Remaining underdistributions for 2014 Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions)			
7 Excess distributions carryover to 2015. Add lines 3j and 4c			
8 Breakdown of line 7			
a From 2010			
b From 2011			
c From 2012			
d From 2013			

Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V, Section B, line 1e; Part V Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions).

Facts And Circumstances Test

Return Reference	Explanation

Schedule A (Form 990 or 990-EZ) 2014

DLN: 93493109005026

OMB No 1545-0047

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ► Attach to Form 990.

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

Open to Public Inspection

	me of the organization		Employer identification number
KIV	erside Military Academy Inc		58-0616994
Pa	organizations Maintaining Donor Advorganization answered "Yes" to Form 990		
		(a) Donor advised funds	(b) Funds and other accounts
	Total number at end of year		
	Aggregate value of contributions to (during year)		
;	Aggregate value of grants from (during year)		
ļ	Aggregate value at end of year		
;	Did the organization inform all donors and donor advisor funds are the organization's property, subject to the or		nor advised Yes No
•	Did the organization inform all grantees, donors, and doused only for charitable purposes and not for the benef conferring impermissible private benefit?		
a	rt III Conservation Easements. Complete if	the organization answered "Yes" t	to Form 990, Part IV, line 7.
	Purpose(s) of conservation easements held by the organized Preservation of land for public use (e.g., recreation Protection of natural habitat Preservation of open space	or education) Preservation of ar Preservation of a	n historically important land area certified historic structure
	Complete lines 2a through 2d if the organization held a	qualified conservation contribution in t	the form of a conservation
	easement on the last day of the tax year		Held at the End of the Year
a	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
c	Number of conservation easements on a certified histo	ric structure included in (a)	2c 2c
d	Number of conservation easements included in (c) acq historic structure listed in the National Register	• •	2d
	Number of conservation easements modified, transferr	ed, released, extinguished, or terminate	ed by the organization during
	the tax year ►		
	Number of states where property subject to conservati	on encoment is located .	
	• • • • •		dina et weletiene en d
	Does the organization have a written policy regarding t enforcement of the conservation easements it holds?		☐ Yes ☐ No
	Staff and volunteer hours devoted to monitoring, inspec	cting, and enforcing conservation easer	ments during the year
	-		
	Amount of expenses incurred in monitoring, inspecting	, and enforcing conservation easement	s during the year
	▶ \$		
	Does each conservation easement reported on line 2(c and section $170(h)(4)(B)(II)$?	l) above satisfy the requirements of sec	ction 170(h)(4)(B)(i) Yes No
	In Part XIII, describe how the organization reports cor balance sheet, and include, if applicable, the text of the the organization's accounting for conservation easeme	e footnote to the organization's financia	
ar	t III Organizations Maintaining Collection Complete if the organization answered "Y		or Other Similar Assets.
а	If the organization elected, as permitted under SFAS 1 works of art, historical treasures, or other similar asse service, provide, in Part XIII, the text of the footnote t	ts held for public exhibition, education,	or research in furtherance of public
b	If the organization elected, as permitted under SFAS 1 works of art, historical treasures, or other similar asseservice, provide the following amounts relating to these	16 (ASC 958), to report in its revenue ts held for public exhibition, education,	statement and balance sheet
	(i) Revenue included in Form 990, Part VIII, line 1		► \$
	(ii) Assets included in Form 990, Part X		
	If the organization received or held works of art, historical following amounts required to be reported under SFAS		or financial gain, provide the
a	Revenue included in Form 990, Part VIII, line 1		▶ \$
	Assets included in Form 990. Part X		· +
_	ASSELS INCLUDED IN FORM 990. PART X		₽ 35

Part	•••• Organizations Maintaining Co	llections of Art, I	Histor	<u>ical Trea</u>	sures, or Ot	<u>her Similar As</u>	sets (continued)
3	Using the organization's acquisition, access collection items (check all that apply)	ion, and other records	, check	any of the	following that ar	e a significant use	e of its
а	Public exhibition		d ┌	Loan or e	exchange progra	ms	
b	Scholarly research		е Г	Other			
C	Preservation for future generations						
4	Provide a description of the organization's co	ollections and explain	how the	ey further th	ne organization's	s exempt purpose	ın
5	During the year, did the organization solicit						F F
Day	assets to be sold to raise funds rather than to the sold to raise funds rather than to the sold at the sold to the	· ·					Yes No
Pal	Part IV, line 9, or reported an an					res to roini s	790,
1a	Is the organization an agent, trustee, custoc included on Form 990, Part X?						┌ Yes ┌ No
b	If "Yes," explain the arrangement in Part XII	I and complete the fo	llowing	table	_	-	
						An	nount
c	Beginning balance					lc	
d	Additions during the year				<u> </u>	ld	
e •	Distributions during the year				<u> </u>	le	
f	Ending balance				_	lf	
2a	Did the organization include an amount on Fo	orm 990, Part X, line 2	21, for 6	escrow or cu	ustodial accoun	t liability?	「Yes
ь	If "Yes," explain the arrangement in Part XII						<u>'</u>
Pa	rt V Endowment Funds. Complete		answe (b)Prior			Part IV, line 10. (d)Three years back	(e)Four years back
1a	Beginning of year balance	36,018,667		,388,896	41,444,792	48,235,698	49,404,722
ь	Contributions	208,767		6,672	145,282	90,680	<u> </u>
c	Net investment earnings, gains, and losses						
4	Crants or scholarships	1,306,966	1	,930,193	3,589,384	-1,104,231	8,681,959
d e	Grants or scholarships Other expenditures for facilities						
-	and programs	1,281,731	3	,307,094	7,790,562	5,777,355	9,850,983
f	Administrative expenses						
g	End of year balance	36,252,669	36	,018,667	37,388,896	41,444,792	48,235,698
2	Provide the estimated percentage of the cur	rent year end balance	(line 1	g, column (a	a)) held as		
а	Board designated or quasi-endowment ►	97 910 %					
b	Permanent endowment ► 2 020 %						
c	Temporarily restricted endowment ► 0 0	70 %					
	The percentages in lines 2a, 2b, and 2c sho	uld equal 100%					
3a	Are there endowment funds not in the posse	ssion of the organizati	on that	are held an	nd administered	for the	
	organization by (i) unrelated organizations					3a(Yes No
	(ii) related organizations					3a(
Ь	If "Yes" to 3a(II), are the related organization		n Sche	dule R? .		31	
4	Describe in Part XIII the intended uses of the	ne organızatıon's endo	wment	funds			
Par	t VI Land, Buildings, and Equipme		e orga	nızatıon aı	nswered 'Yes'	to Form 990, Pa	art IV, line
	11a. See Form 990, Part X, line Description of property	10.) Cost or othe			(d) Book value
	Land		+		762,5	559	762,559
	Buildings		\vdash		94,755,5		 -
	Leasehold improvements		. ⊢		5,461,8	- 	
	Equipment		.		10,860,1	· · ·	
	Other				. ,		
	I. Add lines 1a through 1e <i>(Column (d) must e</i>	equal Form 990, Part X, o	column	(B), line 10(c).)	🕨	62,994,714
						Schedule [) (Form 990) 2014

Part VII Investments—Other Securities. Com	plete if the organization	answered 'Yes' to For	m 990, Part IV, line 11b.
See Form 990, Part X, line 12. (a) Description of security or category	(b)Book value	(c) Method of va	
(including name of security)		Cost or end-of-year	market value
(1) Financial derivatives			
(2)Closely-held equity interests Other			
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	•		
Part VIII Investments—Program Related. Co	mplete if the organization	n answered 'Yes' to Fo	orm 990, Part IV, line 11c.
See Form 990, Part X, line 13. (a) Description of investment	(b) Book value	(c) Method of va	aluation
	(-,	Cost or end-of-year	
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)			
Part IX Other Assets. Complete if the organization), Part IV, line 11d See F	
(a) Descrip	ocion		(b) Book value
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15	(.)		
Part X Other Liabilities. Complete if the organ			ıne 11e or 11f. See
Form 990, Part X, line 25.		. ,	
1 (a) Description of liability	(b) Book value		
Federal income taxes			
Bond Premium	1,178,645		
Accrued bond interest payable	854,783		
Total. (Column (b) must equal Form 990, Part X, col (B) line 25) ▶	2,033,428		
2 Liability for uncertain tay positions. In Bart VIII. provide			1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -

Part XII, Line 4b - Other

A djustments

Par		evenue per Audited Financial Sta wered 'Yes' to Form 990, Part IV, line		nts Wi	th Revenue	per F	leturn Complete If
1		er support per audited financial statements				1	19,968,635
2	Amounts included on line 1 bu	it not on Form 990, Part VIII, line 12					
а	Net unrealized gains (losses)	on investments	2a		-120,407		
b	Donated services and use of f	acılıtıes	2b			1	
c	Recoveries of prior year grant	s	2c			1	
d	Other (Describe in Part XIII)		2d		-3,222	1	
e	Add lines 2a through 2d .		·			2e	-123,629
3	Subtract line ${f 2e}$ from line ${f 1}$.					3	20,092,264
4	Amounts included on Form 99	0, Part VIII, line 12, but not on line 1					
а	Investment expenses not incl	uded on Form 990, Part VIII, line 7b .	4a		80,595		
b	Other (Describe in Part XIII)		4b		1,774,619		
C	Add lines 4a and 4b		· · ·			4c	1,855,214
5		d 4c. (This must equal Form 990, Part I, line	-			5	21,947,478
Part		xpenses per Audited Financial Stasswered 'Yes' to Form 990, Part IV, line			ith Expense	s per	Return. Complete
1		r audited financial statements				1	21,412,343
2	Amounts included on line 1 bu	t not on Form 990, Part IX, line 25					
а	Donated services and use of fa	acılıtıes	2a				
b	Prior year adjustments		2b				
C	Otherlosses		2c				
d	Other (Describe in Part XIII)		2d		1,352,482		
e	Add lines 2a through 2d					2e	1,352,482
3	Subtract line ${f 2e}$ from line ${f 1}$.					3	20,059,861
4	Amounts included on Form 99	0, Part IX, line 25, but not on line 1:					
а	Investment expenses not incl	uded on Form 990, Part VIII, line 7b	4a		80,595	5	
b	Other (Describe in Part XIII)		4b		2,883,990		
c	Add lines 4a and 4b					4c	2,964,585
5	Total expenses Add lines 3 a	nd 4c. (This must equal Form 990, Part I, lir	ne 18)			5	23,024,446
Par	Supplemental Int	formation					
Part		Part II, lines 3, 5, and 9, Part III, lines 1a , lines 2d and 4b, and Part XII, lines 2d and					ide any additional
	Return Reference	Explanation					
Part \	/, Line 4	The Academy's endowment consists of th including both donor-restricted endowment endowments					
	(I, Line 2d - Other tments	Loss on beneficial interest in perpetual tru	ıst -3,2	222			
	(I, Line 4b - Other tments	Financial aid 2,883,990 Direct rental exp	enses	-294,1	23 Cadet Store	cost	of good sold -815,248
	(II, Line 2d - Other	Cadet store cost of goods sold 815,248	Direct	rental e	xpenses 294,12	3 Inc	rease in allowance for

Financial aid 2,883,990

Jenedale 2 (1 31111 33 3) 23 13		age 💆
Part XIII Supplemental Information	on (continued)	
Return Reference	Explanation	
l		
-		

Schedule D (Form 990) 2014

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493109005026

OMB No 1545-0047

SCHEDULE E

Department of the Treasury

Internal Revenue Service

(Form 990 or 990-EZ)

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.

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

Open to Public Inspection

Name of the organization Riverside Military Academy Inc **Employer identification number**

58-0616994

Pa	rt I		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 If you need more space use Part II	3		No
				NO
4 a	Does the organization maintain the following? Records indicating the racial composition of the student body, faculty, and administrative staff?	4a	Yes	
	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 Part II	-		
5 a	Does the organization discriminate by race in any way with respect to Students' rights or privileges?	5a		No
b	Admissions policies?	5b		No
c	Employment of faculty or administrative staff?	5c		No
d	Scholarships or other financial assistance?	5d		No
	Educational policies?	5e		No
	Use of facilities?	5f		No
g	Athletic programs?	5g		No
h	Other extracurricular activities? If you answered "Yes" to any of the above, please explain If you need more space, use Part II	5h		No
		-		
	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 Part II 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 Part II	7	Yes	

Part II Supplemental Information. Provide the explanations required by Part I, lines 3, 4d, 5h, 6b, and 7, as applicable Also provide any other additional information (see instructions)

Return Reference	Explanation
Schedule E, Part I, Line 3	The Admissions Application booklet contains the policy and two public communications are made each year in educational publications Additionally,the policy is on the Academy's website at www riversidemilitary com/NetCommunity/RequestInfo_Apply

Schedule E (Form 990 or 990-EZ) (2014)

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As Filed Data -

DLN: 93493109005026

Employer identification number

SCHEDULE F (Form 990)

Statement of Activities Outside the United States

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

► Attach to Form 990.

2014

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

Name of the organization

Riverside Military Academy Inc

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

Open to Public Inspection

					58-0616994	
Pa	rt I General Information "Yes" to Form 990, Pai	n on Activition rt IV, line 14b	es Outside tl	ne United States. C	omplete if the organiza	ation answered
1	For grantmakers. Does the of and other assistance, the grants or a used to award the grants or a	ntees' eligibili	ty for the grar	nts or assistance, and	the selection criteria	┌ Yes ┌ No
2	For grantmakers. Describe in assistance outside the United		ganızatıon's p	rocedures for monitor	ing the use of its grant	s and other
3	Activites per Region (The follow	ing Part I, line 3	B table can be d	uplicated if additional sp	ace is needed)	
	(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e g , fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
(1)	North America	0	0	Program services	Cadet Thanksgıvıng Cruise	26,348
(2)	North America	0	0	Program services	Mexico recruiting trip, Mexico alumni reception	10,884
(3)	Russia and Neighboring States	0	0	Program services	Recruiting trip	1,668
(4)	East Asia and the Pacific - Australia, Brunei, Burma, Cambodia,	0	0	Program services	Recruiting trip	8,874
(5)						
3a	Sub-total	0	0			47,774
b	Total from continuation sheets to Part I	0	0			0
	Totals (add lines 3a and 3b)	0	0			47,774

Schedule F (Form 990) 2014

Pa				i zations or Entitie ived more than \$5,0		•	9		to Form 990,
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 non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)								
(2)								
(3)								
(4)								
2				ed above that are ro or counsel has pro					
3	Enter total num	nber of other or	ganizations or ent	ities					

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.

Part III can be duplicated if additional space is needed.							
(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) A mount of cash grant	(e) Manner of cash disbursement	(f) A mount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1) Financial aid	Central America and the Caribbean - Antigua & Barbuda, Aruba, Bahamas,	3	17,625				
(2) Financial aid	East Asia and the Pacific - Australia, Brunei, Burma, Cambodia,	4	37,005				
(3) Financial aid	Europe (Including Iceland & Greenland) - Albania, Andorra, Austria, Belgiu	1	4,971				
(4) Financial aid	Middle East and North Africa	3	13,522				
(5) Financial aid	North America - Canada and Mexico, but but not the United States	7	67,736				
(6)							
(7)	1						
(8)	1				<u> </u>		
(9)							
(10)							
(11)	1				†		
(12)	<u> </u>						
(13)	1						
(14)	1						
(15)							
(16)							
(17)	1			_			
(18)	1			_			
							COO) 2014

Part IV Foreign Forms

1	organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	Γ	Yes	[~	Νo
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; do not file with Form 990)	Г	Yes	▽	No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with Respect to Certain Foreign Corporations. (see Instructions for Form 5471)	Г	Yes	্	Νo
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)	Г	Yes	~	No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with Respect to Certain Foreign Partnerships. (see Instructions for Form 8865)	Γ	Yes	V	No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713; do not file with Form 990)	Г	Yes	্ন	Νo

Schedule F (Form 990) 2014

Schedule F (Form 990) 2014 Page 5

Part V Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions).

990 Schedule F, Supplemental Information

Return Reference	Explanation
Part I, Line 2	The financial aid department maintains records to substantiate all amounts given in financial aid. Parents complete an application with financial information on a FACTS Tuition Man agement form that provides "Expected Family Contribution (EFC)" data. The Director of Admissions reviews the gap between the cost to attend and the EFC. If significant aid is indicated, the question of how much is presented to the CFO and finally to the President for resolution.

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -DLN: 93493109005026 OMB No 1545-0047 Schedule I Grants and Other Assistance to Organizations, (Form 990) 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 Department of the Treasury **Inspection** Internal Revenue Service Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990. Name of the organization Employer identification number Riverside Military Academy Inc 58-0616994 Part I **General Information on Grants and Assistance** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. (c) IRC section (a) Name and address of **(b)** EIN (d) Amount of cash (e) A mount of non-(f) Method of (g) Description of (h) Purpose of grant organization ıf applıcable valuation non-cash assistance or assistance grant cash or government assistance (book, FMV, appraisal, other)

Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

Enter total number of other organizations listed in the line 1 table

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Part III can be duplicated 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
(1) Financial aid	260	2,743,131			Need-based reduction in tuition costs

Part IV Supplemental I	Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.										
Return Reference	Explanation										
,	The financial aid department maintains records to substantiate all amounts given in financial Parents complete an application with financial information on a FACTS Tuition Management form that provides "Expected Family Contribution (EFC)" data The Director of Admissions reviews the gap between the cost to attend and the EFC If significant aid is indicated, the question of how much is presented to the CFO and finally to the President for resolution										

Schedule I (Form 990) 2014

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DLN: 93493109005026

OMB No 1545-0047

58-0616994

Department of the Treasury Internal Revenue Service

Schedule J (Form 990)

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

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

Compensation Information

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

Open to Public Inspection

Name of the organization Riverside Military Academy Inc **Employer identification number**

Pa	irt I Ques	tions Regarding Compensation	n				
						Yes	No
la				ny of the following to or for a person listed in Form ide any relevant information regarding these items			
	First-cla	ss or charter travel	<u> </u>	Housing allowance or residence for personal use			
	Travel fo	r companions	Г	Payments for business use of personal residence			
	Tax idem	nnıficatıon and gross-up payments	굣	Health or social club dues or initiation fees			
	☐ Discretion	onary spending account	Γ	Personal services (e g , maid, chauffeur, chef)			
b				on follow a written policy regarding payment or above? If "No," complete Part III to explain	1b	Yes	
2				ing or allowing expenses incurred by all irector, regarding the items checked in line 1a?	2		No
3	organızatıon':	s CEO/Executive Director Check all t	that apply	used to establish the compensation of the y Do not check any boxes for methods the CEO/Executive Director, but explain in Part III			
	Compens	sation committee	굣	Written employment contract			
	□ Independ	dent compensation consultant	Γ	Compensation survey or study			
	Form 99	0 of other organizations	굣	Approval by the board or compensation committee			
4	During the ye or a related o		, Part VII	, Section A , line 1a with respect to the filing organization			
а		verance payment or change-of-contro			4a		No
b	Participate in	n, or receive payment from, a suppleme	ental non	qualified retirement plan?	4b		Νo
C	Participate in	ı, or receive payment from, an equity-l	based coi	mpensation arrangement?	4 c		Νo
	If "Yes" to ar	ny of lines 4a-c, list the persons and p	rovide th	e applicable amounts for each item in Part III			
	Only 501(c)(3), 501(c)(4), and 501(c)(29) organiza	ations mu	ust complete lines 5-9.			
5		isted in Form 990, Part VII, Section And contingent on the revenues of	A, line 1a	, did the organization pay or accrue any			
а	The organizat	tion?			5a		Νo
b	Any related o	organization?			5b		Νo
	If "Yes," to lı	ne 5a or 5b, describe in Part III					
5		isted in Form 990, Part VII, Section A n contingent on the net earnings of	A, line 1a	, did the organization pay or accrue any			
а	The organizat	tion?			6a		Νo
b	Any related o	organization?			6b		Νo
	If "Yes," to li	ne 6a or 6b, describe in Part III					
7		ısted ın Form 990, Part VII, Section A t described ın lines 5 and 6? If "Yes,"		, dıd the organızatıon provide any non-fixed ın Part III	7		No
3	Were any am	ounts reported in Form 990, Part VII,	paid or a	ccured pursuant to a contract that was			
		e initial contract exception described	ın Regula	tions section 53 4958-4(a)(3)? If "Yes," describe			
	ın Part III				8		Νo
9	If "Yes" to lir section 53 49		ne rebutta	able presumption procedure described in Regulations	9		

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

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

Note. The sum of columns (B)(I)-(III) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual

(A) Name and Title		(B) Breakdown of	f W-2 and/or 1099-MIS	C compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation in
		(i) Base compensation	(ii) Bonus & (iii) Other reportable compensation compensation		other deferred compensation	benefits	(B)(ı)-(D)	column(B) reported as deferred in prior Form 990
1 James H Benson Sr, President	(i) (ii)	282,083 0	12,000 0	0	15,490 0	1,500 0	311,073 0	0

Schedule J (Form 990) 2014

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II

Also complete this part for any additional information

Return Reference	Explanation
•	The President is provided an on-campus residence for the convenience of the Academy Additionally, the Academy paid dues totaling \$4,342 to the Chattahoochee Country Club and the Kiwanis Club of Gainesville for the President

Schedule J (Form 990) 2014

Department of the Treasury

Internal Revenue Service

DLN: 93493109005026

Open to Public

OMB No 1545-0047

Schedule K **Supplemental Information on Tax Exempt Bonds** (Form 990) ► Complete if the organization answered "Yes" to Form 990, Part IV, line 24a. Provide descriptions,

explanations, and any additional information in Part VI. ► Attach to Form 990.

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

Inspection

									Em	Employer identification number				
Riv	erside Military Academy Inc								58	58-0616994				
Р	art I Bond Issues													
	(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue	price	(f) Descript	ion of purpose	(g) De	feased	beh	On alf of uer		Pool incing
									Yes	No	Yes	No	Yes	No
A	Gainesville Redevelopment Authority	58-1520209	362896AN2	01-23-2007	43,37	70,000	Refinance reve 1999 and 200	nue bonds from 0		Х		×		Х
В	Gainesville Redevelopment Authority	58-1520209	362896AM4	01-23-2007	24,22	25,000	Refinance reve 1999 and 200	nue bonds from O		Х		Х		Х
c ⁻	Gainesville Redevelopment Authority	58-1520209	362896AF9	01-23-2007	1,40	00,000	Refinance reve 1999 and 200	nue bonds from 0		Х		X		Х
D ⁻	Gainesville Redevelopment Authority	58-1520209	362896AG7	01-23-2007	1,55	55,000		Refinance revenue bonds from 1999 and 2000		Х		Х		Х
Pa	art III Proceeds			l										
					А			В	С				D	
1								2,300,000		1,40	0,000		1	,555,000
_2	A mount of bonds legally defeas	sed												
3	Total proceeds of issue													
4	Gross proceeds in reserve fund													
5	Capitalized interest from proce													
6	Proceeds in refunding escrows													
7	Issuance costs from proceeds													
8	Credit enhancement from proce													
9	Working capital expenditures fi	rom proceeds												
10	Capital expenditures from proc	eeds												
11	O ther spent proceeds													
12	O ther unspent proceeds													
13	Year of substantial completion				200	7	20	007	2	007			2007	
					Yes	No	Yes	No	Yes	<u> </u>	ło	Yes		No
14	Were the bonds issued as part	of a current refundir	ng issue?		Х		X		Χ			Х		
15	Were the bonds issued as part	of an advance refun	ding issue?			Χ		×		,	×			X
16	Has the final allocation of proc	eeds been made?			Х		×		Х			Х		
17	Does the organization maintain adequate books and records to support the final allocation of proceeds?			ort the final	Х		Х		Х			Х		
Pa	rt IIII Private Business U	se												
					Ves	No.	Voc	B No	Vec	C No		D Ves No		

property financed by tax-exempt bonds?

financed property?

Was the organization a partner in a partnership, or a member of an LLC, which owned

Are there any lease arrangements that may result in private business use of bond-

No

Χ

Yes

No

Χ

Χ

Yes

No

Χ

Χ

Yes

Yes

No

Χ

Χ

Schedule K (Form 990) 2014 Page **2** Part Private Business Use (Continued) C D В Α Yes No Yes No Yes No Yes No Are there any management or service contracts that may result in private business use За Χ Х Χ Х of bond-financed property? If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts relating to the financed property? Are there any research agreements that may result in private business use of bondc Χ Χ Χ Χ financed property? If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside counsel to review any research agreements relating to the financed property? Enter the percentage of financed property used in a private business use by entities 4 other than a section 501(c)(3) organization or a state or local government Enter the percentage of financed property used in a private business use as a result of 5 unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government Total of lines 4 and 5 6 Does the bond issue meet the private security or payment test? 7 Χ Χ Х Χ Has there been a sale or disposition of any of the bond-financed property to a 8a nongovernmental person other than a 501(c)(3) organization since the bonds were Χ Χ Χ Χ issued? If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of b If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections c 1 141-12 and 1 145-2? Has the organization established written procedures to ensure that all nonqualified bonds of the issue are remediated in accordance with the requirements under Χ Χ Χ Χ Regulations sections 1 141-12 and 1 145-2? Part IV Arbitrage Α В C Yes No Yes No Yes No Yes No Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield 1 Х Х Χ Χ Reduction and Penalty in Lieu of Arbitrage Rebate? If "No" to line 1, did the following apply? 2 Rebate not due vet? а Χ Χ Χ Χ Exception to rebate? Χ b Χ Χ Χ No rebate due? Х Х c Χ If "Yes" to line 2c, provide in Part VI the date the rebate computation was performed Is the bond issue a variable rate issue? 3 Χ Χ Χ Χ Has the organization or the governmental issuer entered 4a Χ Χ Χ Χ into a qualified hedge with respect to the bond issue? Name of provider Term of hedge C Was the hedge superintegrated? d Was the hedge terminated?

Part IV Arbitrage (Conti	inued)
--------------------------	--------

Return Reference

	Albitage (continued)											
		А	·	В		С		D				
		Yes	No	Yes	No	Yes	No	Yes	No			
5a	Were gross proceeds invested in a guaranteed investment contract (GIC)?		Х		X		X		×			
ь	Name of provider											
С	Term of GIC											
d	Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?											
6	Were any gross proceeds invested beyond an available temporary period?		х		X		х		x			
7	Has the organization established written procedures to monitor the requirements of section 148?		X		X		X		x			

Part V Procedures To Undertake Corrective Action

	Α		В		С		D	
	Yes	No	Yes	No	Yes	No	Yes	No
Has the organization established written procedures to ensure that violations of federal tax requirements are timely identified and corrected through the voluntary closing agreement program if self-remediation is not available under applicable regulations?		X		Х		Х		x

Part VI	Supplemental Info	ormation. Provide additional	information for responses to	questions on Schedule K	(see instructions).

	On January 23, 2007, the Gainesville Redevelopment Authority issued "Gainesville Redevelopment Authority Educational Facilities Refunding Revenue
Schedule K Supplental Information	Bonds (Riverside Military Academy, Inc Project) Series 2007" to the Academy The proceeds from this bond issue were used to refinance revenue bonds
	issued by the Gainesville Redevelopment Authority in 1999 and 2000

Explanation

DLN: 93493109005026

Open to Public

Inspection

OMB No 1545-0047

Schedule K (Form 990)

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 Part VI. ► Attach to Form 990.

Department of the Treasury ▶Information about Schedule K (Form 990) and its instructions is at www.irs.gov/form990. Internal Revenue Service

								Lem				CUIOII		
ne of the organization verside Military Academy Inc											ation nur	nber		
·								58	-06169	94				
	(b) Issuer FIN	(c) CUSIP #	(d) Date issued	(e) Issue	price	(f) Descripti	on of nurpose	I(a) De	feased	(h)	On I	(i)	Pool	
(a) 155del Hame	(5) 13345. 21	(6) 5551	(4) 5466 155464	(0) 10011	piico	(1) 5 55 51. [51.	on or parpose	(9) -	.icasca	beh	alfof		ncing	
		1					<u> </u>				issuer		/aa Na	
Gainesville Redevelopment	58-1520209	362896AH5	01-23-2007	1.63	30.000	Refinance rever	nue bonds from	Yes	X	Yes	NO X	Yes	No X	
Authority														
Gainesville Redevelopment Authority	58-1520209	362896AJ1	01-23-2007	1,71	15,000				Х		×		Х	
Gainesville Redevelopment Authority	58-1520209	362896AK8	01-23-2007	1,80	00,000				Х		×		Х	
Gainesville Redevelopment Authority	58-1520209	362896AL6	01-23-2007	5,95	55,000				Х		×		Х	
art III Proceeds						<u> </u>		1	_		<u> </u>			
A mount of hands retired				A			_			2 200	_			
					1,630,	000	1,/15,000		1,80	0,000		Э	,955,000	
<u> </u>	nds													
<u> </u>														
<u> </u>														
Credit enhancement from proc	ceeds													
Working capital expenditures	from proceeds													
Capital expenditures from pro	ceeds									f				
Other spent proceeds														
O ther unspent proceeds														
Year of substantial completion	n			201	0 7	20	007	2	007			2007		
				Yes	No	Yes	No	Yes	N	lo	Yes		No	
Were the bonds issued as part	t of a current refundir	ng issue?		Х		Х		Х		_ [Х		_	
Were the bonds issued as part	t of an advance refun	iding issue?			Х		Х		\	×			Х	
Has the final allocation of proc	ceeds been made?			Х		Х		Х			Х			
Does the organization maintai	ın adequate books an	ıd records to suppo	ort the final	Х		х		Х			Х			
rt IIII Private Business U	Jse											•		
			l	Α	٠.		В		C			D		
	Gainesville Redevelopment Authority Gainesville	Gainesville Redevelopment Authority S8-1520209 art I Bond Issues (a) Issuer name (b) Issuer EIN (c) CUSIP # Gainesville Redevelopment Authority Froceeds Amount of bonds retired Amount of bonds legally defeased Total proceeds of issue Gross proceeds in reserve funds Capitalized interest from proceeds Proceeds in refunding escrows Issuance costs from proceeds Credit enhancement from proceeds Working capital expenditures from proceeds Other spent proceeds Other spent proceeds Year of substantial completion Were the bonds issued as part of a current refunding issue? Were the bonds issued as part of an advance refunding issue? Does the organization maintain adequate books and records to supposallocation of proceeds?	art I Bond Issues (a) Issuer name (b) Issuer EIN (c) CUSIP # (d) Date Issued Gainesville Redevelopment Authority Gainesville Redevelopment 58-1520209 362896AH5 01-23-2007 Authority Gainesville Redevelopment 58-1520209 362896AJ1 01-23-2007 Authority Gainesville Redevelopment 58-1520209 362896AK8 01-23-2007 Authority Gainesville Redevelopment 58-1520209 362896AL6 01-23-2007 Authority Gainesville Redevelopment 58-1520209 362896AL6 01-23-2007 Authority The Proceeds Amount of bonds retired Amount of bonds legally defeased Total proceeds of Issue Gross proceeds in reserve funds Capitalized interest from proceeds Proceeds in refunding escrows Issuance costs from proceeds Credit enhancement from proceeds Working capital expenditures from proceeds Capital expenditures from proceeds Other spent proceeds Other unspent proceeds Year of substantial completion Were the bonds issued as part of an advance refunding issue? Were the bonds issued as part of an advance refunding issue? Has the final allocation of proceeds been made? Does the organization maintain adequate books and records to support the final allocation of proceeds?	Gainesville Redevelopment S8-1520209 362896AH5 01-23-2007 1,6: Authority S6-1520209 362896AH5 01-23-2007 1,7: Authority S8-1520209 362896AH5 01-23-2007 1,7: Gainesville Redevelopment S8-1520209 362896AH3 01-23-2007 1,7: Authority S7-1520209 362896AH8 01-23-2007 1,8: Authority S8-1520209 362896AH8 01-23-2007 1,8: Authority S8-1520209 362896AH8 01-23-2007 5,9: Authority S8-1520209 362896AH8 01-23-2007 5,9: Amount of bonds retired S8-1520209 362896AH8 01-23-2007 5,9: Amount of bonds retired S7-1520209 362896AH8 01-23-2007 5,9: Amount of bonds legally defeased Total proceeds In reserve funds Capitalized interest from proceeds Proceeds in refunding escrows Issuance costs from proceeds Working capital expenditures from proceeds Capital expenditures from proceeds Other spent proceeds Other spent proceeds Year of substantial completion 20 Yes Were the bonds issued as part of a current refunding issue? X Were the bonds issued as part of an advance refunding issue? X Were the bonds issued as part of an advance refunding issue? X Does the organization maintain adequate books and records to support the final allocation of proceeds? X TILL Private Business Use	Amount of bonds retired Amount of bonds legally defeased Total proceeds in reserve funds Capitalized interest from proceeds Credit enhancement from proceeds Credit enhancement from proceeds Credit enhancement from proceeds Capital expenditures from proceeds Capital expe	Amount of bonds retired Capitalized interest from proceeds Proceeds in reserve funds Capitalized interest from proceeds Working capital expenditures from proceeds Other unspent proceeds Year of substantial completion Were the bonds issued as part of an advance refunding issue? Were the bonds issued as part of an advance refunding issue? Were the bonds issued as part of an advance refunding issue? Were the bonds issued as part of an advance refunding issue? Were the bonds issued as part of an advance refunding issue? Were the bonds issued as part of an advance refunding issue? Were the bonds issued as part of an advance refunding issue? Were the bonds issued as part of an advance refunding issue? Were the bonds issued as part of an advance refunding issue? Were the bonds issued as part of an advance refunding issue? Were the bonds issued as part of an advance refunding issue? Were the ponds issued as part of an advance refunding issue? Were the ponds issued as part of an advance refunding issue? Were the ponds issued as part of an advance refunding issue? Were the ponds issued as part of an advance refunding issue? X X X X X X X X X X X X X	Series S	Sesting Section Sect	Sale Sale	SR-D616994 SR-	State Stat	Second State Seco		

property financed by tax-exempt bonds?

financed property?

Was the organization a partner in a partnership, or a member of an LLC, which owned

Are there any lease arrangements that may result in private business use of bond-

No

Χ

Х

Yes

No

Χ

Χ

Yes

No

Χ

Χ

Yes

No

Χ

Χ

Yes

Schedule K (Form 990) 2014 Page **2** Part Private Business Use (Continued) C D В Α Yes No Yes No Yes No Yes No Are there any management or service contracts that may result in private business use За Χ Х Χ Χ of bond-financed property? If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts relating to the financed property? Are there any research agreements that may result in private business use of bond-С Χ Χ Χ Χ financed property? If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside counsel to review any research agreements relating to the financed property? Enter the percentage of financed property used in a private business use by entities 4 other than a section 501(c)(3) organization or a state or local government Enter the percentage of financed property used in a private business use as a result of 5 unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government Total of lines 4 and 5 6 Does the bond issue meet the private security or payment test? 7 Χ Χ Х Χ Has there been a sale or disposition of any of the bond-financed property to a 8a nongovernmental person other than a 501(c)(3) organization since the bonds were Χ Χ Χ Χ issued? If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of b If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections c 1 141-12 and 1 145-2? Has the organization established written procedures to ensure that all nonqualified bonds of the issue are remediated in accordance with the requirements under Χ Χ Χ Χ Regulations sections 1 141-12 and 1 145-2? Part IV Arbitrage Α В C Yes No Yes No Yes No Yes No Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield 1 Х Χ Χ Χ Reduction and Penalty in Lieu of Arbitrage Rebate? If "No" to line 1, did the following apply? 2 Rebate not due vet? а Χ Χ Χ Χ Exception to rebate? Χ b Χ Χ Χ No rebate due? Х Х c Χ If "Yes" to line 2c, provide in Part VI the date the rebate computation was performed Is the bond issue a variable rate issue? 3 Χ Χ Χ Χ Has the organization or the governmental issuer entered 4a Χ Χ Χ Χ into a qualified hedge with respect to the bond issue? Name of provider Term of hedge C Was the hedge superintegrated? d Was the hedge terminated?

Pai	Part IV Arbitrage (Continued)										
		А		В		С		D			
		Yes	No	Yes	No	Yes	No	Yes	No		
5a	Were gross proceeds invested in a guaranteed investment contract (GIC)?		Х		X		X		X		
Ь	Name of provider										
С	Term of GIC										
d	Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?										
6	Were any gross proceeds invested beyond an available temporary period?		Х		X		Х		x		
7	Has the organization established written procedures to monitor the requirements of section 148?		Х		X		X		x		

Part V Procedures To Undertake Corrective Action

	Α		В		С		D		
	Yes	No	Yes	No	Yes	No	Yes	No	
Has the organization established written procedures to ensure that violations of federal tax requirements are timely identified and corrected through the voluntary closing agreement program if self-remediation is not available under applicable regulations?		×		×		×		x	

Part VI Supplemental Information. Provide additional information for responses to questions on Schedule K (see instructions).

Schedule K (Form 990) 2014

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DLN: 93493109005026

OMB No 1545-0047

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

Name of the organization

Employer identification number Riverside Military Academy Inc 58-0616994 Part I Types of Property (a) (b) (c) (d) Check Number of contributions Noncash contribution Method of determining amounts reported on noncash contribution amounts ıf or items contributed applicable Form 990, Part VIII, line 1 g 1 Art-Works of art 2 Art—Historical treasures Art—Fractional interests Books and publications Χ 954 FMV Clothing and household Cars and other vehicles Boats and planes 8 Intellectual property . . . Securities—Publicly traded . 10 Securities—Closely held stock . Securities—Partnership, LLC, or trust interests 12 Securities—Miscellaneous . . 13 Qualified conservation contribution—Historic structures . . . Qualified conservation contribution-Other . . . Real estate—Residential . 16 Real estate—Commercial . . 17 Real estate—Other . . Collectibles 18 Food inventory . . . 19 20 Drugs and medical supplies . **21** Taxidermy 22 Historical artifacts Scientific specimens . . 24 Archeological artifacts . . . 115,000 FMV Χ 25 Other ▶ (Paving) Χ 59 27,843 FMV 26 Other ► (Other goods) Χ 39 9,524 FMV **27** Other ▶ (Meals & Entertainment) 5 Χ 6,540 FMV 28 Other ► (Travel & Lodging) Χ 5.800 FMV Other ► (1 Sewing Machine Χ 3,073 FMV Other►(20 Student supplies) 2,502 FMV Other►(Sports Memoribilia) Number of Forms 8283 received by the organization during the tax year for contributions 29 for which the organization completed Form 8283, Part IV, Donee Acknowledgement . Yes No 30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which is not required to be used 30a Νo **b** If "Yes," describe the arrangement in Part II 31 Νo 31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions? 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions? . . . 32a Νo **b** If "Yes," describe in Part II

describe in Part II

33 If the organization did not report an amount in column (c) for a type of property for which column (a) is checked,

Page 2

Schedule M (Form 990) (2014)

Part II Supplemental Information. Provide the information required by Part I, lines 30b,

32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

Return Reference Explanation

Schedule M (Form 990) (2014)

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DLN: 93493109005026

OMB No 1545-0047

2014

Open to Public Inspection

SCHEDULE O (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.

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

Name of the organization Riverside Military Academy Inc	Employer identification number
	58-0616994

990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990, Part VI, Section B, line 11	
Form 990, Part VI, Section B, line 12c	Employees must disclose any conflicts on an annual basis
Form 990, Part VI, Section B, line 15a	The board reviews and approves compensation for the President
Form 990, Part VI, Section C, line 18	All information returns are available upon request
Form 990, Part VI, Section C, line 19	All governing documents are available from the organization upon request
Form 990, Part XI, line 9	Unrealized loss on beneficial interest in perpetual trust -3,222 Increase in allowance for bad debt expense -243,111

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DLN: 93493109005026

2014

OMB No 1545-0047

Open to Public Inspection

Related Organizations and Unrelated Partnerships

SCHEDULE R (Form 990)

Department of the Treasury Internal Revenue Service

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37. ► Attach to Form 990.

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

Name of the organization Riverside Military Academy Inc **Employer identification number**

58-0616994

Part I Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

(a) Name, address, and EIN (ıf applıcable) of dısregarded entıty	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
					_

Identification of Related Tax-Exempt Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one Part II or more related tax-exempt organizations during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b) (13) controlled entity?	
						Yes	No
2001 Riverside Drive	Raise and receive funds for the support of Riverside Military Academy	GA	501(c)(3)	Line 11a, I			No

Yes No

Yes

No

Part III	Identification of Related Organizations Taxable a because it had one or more related organizations treated.				atıon ansv	vered "Yes	s" on Form	990, Part I	V, line 34	4
	(a) Name, address, and EIN of related organization	(c) Legal domicile (state or foreign country)	,	(e) Predominant income(related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income		allocations?	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	I	(k) Percentage ownership
				,						

Part IV	Identification of Related Organizations Taxable as a Corporation or Trust Complete if the organization answered "Yes" on Form 990, Part IV,
	line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)	(i)	
Name, address, and EIN of	Primary activity	Legal	Direct controlling	Type of entity	Share of total	Share of end-	Percentage	Section 512	
related organization		domicile	entity	(C corp, S	ıncome	of-year	ownership	(b)(13)	
		(state or foreign		corp,		assets		controlled	
		country)		or trust)				entity?	
								Yes	No

Part V Transactions With Related Organizations Complete if the organization answer	red "Yes" on Forn	n 990, Part IV, line	e 34, 35b, or 36.	1 4	ge 3
Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule				Yes	No
1 During the tax year, did the organization engage in any of the following transactions with one or more rel	ated organizations li	sted in Parts II-IV?			
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity			1a		No
b Gift, grant, or capital contribution to related organization(s)			1b		No
c Gift, grant, or capital contribution from related organization(s)			1c		No
d Loans or loan guarantees to or for related organization(s)			1d		No
e Loans or loan guarantees by related organization(s)			1e		No
f Dividends from related organization(s)			1f		No
g Sale of assets to related organization(s)			1 g		No
h Purchase of assets from related organization(s)			1h		No
i Exchange of assets with related organization(s)			1i		No
j Lease of facilities, equipment, or other assets to related organization(s)			<u>1j</u>		No
k Lease of facilities, equipment, or other assets from related organization(s)			1k		No
l Performance of services or membership or fundraising solicitations for related organization(s)			11		No
$m{m}$ Performance of services or membership or fundraising solicitations by related organization(s)			1m	1	No
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)			1n	1	No
Sharing of paid employees with related organization(s)			10		No
p Reimbursement paid to related organization(s) for expenses			1p		No
q Reimbursement paid by related organization(s) for expenses			1q		No
r Other transfer of cash or property to related organization(s)			1r		No
s Other transfer of cash or property from related organization(s)			1s		No
2 If the answer to any of the above is "Yes," see the instructions for information on who must complete	this line, including co	overed relationships	and transaction thresholds		
(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount	involved	i

Part VI Unrelated Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships

1 <u> </u>													
(a) Name, address, and EIN of entity	(b) Primary activity	domicile (state or foreign	(d) Predominant income (related, unrelated, excluded from tax under sections 512-	so 50 organ	(e) all partners section 01(c)(3) anizations?	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtionat allocations?	7	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
	<u> </u>	<u> </u>	514)	Yes	No	1	<u> </u>	Yes	No		Yes	No	
								<u>, </u>	\Box	1			

Part VII Supplemental Information

Provide additional information for responses to questions on Schedule R (see instructions)

Return Reference Explanation

Schedule R (Form 990) 2014

Page **5**