Form 8879-TF

IRS E-file Signature Authorization for a Tax Exempt Entity

For calendar year 2023, or fiscal year beginning	, 2023, and ending	, 20

OMB No. 1545-0047

Do not send to the IRS. Keep for your records. Department of the Treasury Go to www.irs.gov/Form8879TE for the latest information. Internal Revenue Service EIN or SSN Name of filer FRIENDS OF THE RIVER FOUNDATION 94-2400210 JOHN YOST Name and title of officer or person subject to tax TREASURER Type of Return and Return Information Part I Check the box for the return for which you are using this Form 8879-TE and enter the applicable amount, if any, from the return. Form 8038-CP and Form 5330 filers may enter dollars and cents. For all other forms, enter whole dollars only. If you check the box on line 1a, 2a, 3a, 4a, 5a, 6a, 7a, 8a, 9a, or 10a below, and the amount on that line for the return being filed with this form was blank, then leave line 1b, 2b, 3b, 4b, 5b, 6b, 7b, 8b, 9b, or 10b, whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. Do not complete more than one line in Part I. Form 990 check here b Total revenue, if any (Form 990, Part VIII, column (A), line 12) _____ 1b ___ 1a **b Total revenue,** if any (Form 990-EZ, line 9) _______ **2b** 2a Form 990-EZ check here Form 1120-POL check here b Total tax (Form 1120-POL, line 22) 3a **b Tax based on investment income** (Form 990-PF, Part V, line 5) 4a Form 990-PF check here b Balance due (Form 8868, line 3c) 5b Form 8868 check here 5a Form 990-T check here 6a b Total tax (Form 990-T, Part III, line 4) 6b 7a Form 4720 check here Form 5227 check here b FMV of assets at end of tax year (Form 5227, Item D) 8b 8a Form 5330 check here **b Tax due** (Form 5330, Part II, line 19) 9a 10a Form 8038-CP check here b Amount of credit payment requested (Form 8038-CP, Part III, line 22) Declaration and Signature Authorization of Officer or Person Subject to Tax Under penalties of perjury, I declare that X I am an officer of the above entity or I I am a person subject to tax with respect to (name , (EIN) and that I have examined a copy of the 2023 electronic return and accompanying schedules and statements, and, to the best of my knowledge and belief, they are true, correct, and 2023 electronic return and accompanying schedules and statements, and, to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the electronic return and, if applicable, the consent to electronic funds withdrawal. PIN: check one box only X Lauthorize PUZDRAK AND STORTZ LLC 11754 to enter my PIN Enter five numbers, but ERO firm name do not enter all zeros as my signature on the tax year 2023 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen. As an officer or person subject to tax with respect to the entity, I will enter my PIN as my signature on the tax year 2023 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program. I will enter my PIN on the return's disclosure consent screen. John Gost 11/11/2024 Signature of officer or person subject to tax Certification and Authentication ERO's EFIN/PIN. Enter your six-digit electronic filing identification 74429011754 number (EFIN) followed by your five-digit self-selected PIN. Do not enter all zeros I certify that the above numeric entry is my PIN, which is my signature on the 2023 electronically filed return indicated above. I confirm that I am submitting this return in accordance with the requirements of Pub. 4163, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns. PUZDRAK CPA LLC 11/05/24 ERO's signature Date **ERO Must Retain This Form - See Instructions** Do Not Submit This Form to the IRS Unless Requested To Do So Form **8879-TE** (2023) For Privacy Act and Paperwork Reduction Act Notice, see instructions.

LHA 302521 01-05-24

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) Do not enter social security numbers on this form as it may be made public.

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection

A I	or the	e 2023 calendar year, or tax year beginning and	enaing		
B	Check if applicabl	C Name of organization		D Employer identifi	cation number
	Addre	FRIENDS OF THE RIVER FOUNDATION			
	Name chang	Doing business as		94-24002	10
	Initial return Final return	3336 RRANCHAW ROAD CUITTE 335	Room/suite	E Telephone numbe 916-442-	
	termin		G Gross receipts \$	794,214.	
	Amen		H(a) Is this a group re		
	Application	F Name and address of principal officer: JOHN YOST		for subordinates	
	pendi	SAME AS C ABOVE		H(b) Are all subordinates in	
T 1	Tax-ex	empt status: X 501(c)(3) D 501(c) () (insert no.) D 4947(a)(1) of	or 527	If "No," attach a	list. See instructions
J١	Websi	te: WWW.FRIENDSOFTHERIVER.ORG		H(c) Group exemption	n number
		organization: X Corporation Trust Association Other	L Year	of formation: 1976	M State of legal domicile; CA
Pa	art I	Summary			
Φ	1	Briefly describe the organization's mission or most significant activities: $FRIEI$			
Activities & Governance		AND RESTORES CALIFORNIA RIVERS BY INFLUEN	CING E	PUBLIC POLIC	Y AND
ir.	2	Check this box if the organization discontinued its operations or dispos	sed of more	1	1
80	3			3	11
<u>«</u>	4	Number of independent voting members of the governing body (Part VI, line 1b)			11
ies	5	Total number of individuals employed in calendar year 2023 (Part V, line 2a)			40
ij	6	Total number of volunteers (estimate if necessary)			0.
Act	7 a	Total unrelated business revenue from Part VIII, column (C), line 12			0.
	D	Net unrelated business taxable income from Form 990-T, Part I, line 11		7b Prior Year	Current Year
Revenue	8	Contributions and grants (Part VIII, line 1h)		408,542.	614,587.
	9	D		525.	15,774.
	10	Program service revenue (Part VIII, line 2g) Investment income (Part VIII, column (A), lines 3, 4, and 7d)		2,701.	3,639.
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		197,390.	116,578.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		609,158.	750,578.
	_	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0.	0.
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.
S	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		277,831.	294,811.
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.
be	b	Total fundraising expenses (Part IX, column (D), line 25) 74,56	56.		
Ш	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		131,627.	240,971.
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		409,458.	535,782.
_	19	Revenue less expenses. Subtract line 18 from line 12		199,700.	214,796.
Net Assets or	3		Ве	ginning of Current Year	End of Year
Sset	20	Total assets (Part X, line 16)		946,154.	1,163,555.
et A	21	Total liabilities (Part X, line 26)		223,549. 722,605.	226,156.
2 ₋	22 art II	Net assets or fund balances. Subtract line 21 from line 20		122,005.	937,399.
		Ities of perjury, I declare that I have examined this return, including accompanying schedules	and etateme	ante and to the heet of m	v knowledge and helief it is
		it, and complete. Declaration of preparer (other than officer) is based on all information of wh			y kilowieuge allu bellel, it is
uuu	, 601166	Lohn Clost	non proparor	ilas ally kilowicage.	
Sig	n	Signature of officer		Date	
Her		JOHN YOST, TREASURER		11/1	1/2024
		Type or print name and title			
		Print/Type preparer's name Preparer's signature	[Date Check	X PTIN
Paid	i	MARK PUZDRAK, CPA MARK PUZDRAK, CE	PA 1	.1/05/24 if self-employ	
	parer	Firm's name PUZDRAK AND STORTZ LLC			5-3893874
	Only	Firm's address 11754 JOLLYVILLE RD STE. 102			
		AUSTIN, TX 78759		Phone no. (5	12) 827-2900
May	y the II	RS discuss this return with the preparer shown above? See instructions			X Yes No
	·	Denominado Deduction Act Nation and the compute instructions			Farm 990 (2022)

Page 2

	Check if Schedule O contains a response or note to any line in this Part III	X
1	Briefly describe the organization's mission:	
•	FRIENDS OF THE RIVER PROTECTS AND RESTORES CALIFORNIA RIVERS BY	
	INFLUENCING PUBLIC POLICY AND INSPIRING CITIZEN ACTION.	
2	Did the organization undertake any significant program services during the year which were not listed on the	
	prior Form 990 or 990-EZ?	No 🖸
	If "Yes," describe these new services on Schedule O.	
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	ON 🖸
	If "Yes," describe these changes on Schedule O.	
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.	
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and	
	revenue, if any, for each program service reported.	
4a	(Code:) (Expenses \$356,876 •including grants of \$) (Revenue \$)	
	FRIENDS OF THE RIVER'S (FOR) PROGRAM WORK SEEKS TO PROTECT AND RESTORE	i .
	CALIFORNIA RIVERS THROUGH HYDROPOWER REFORM, RESTORING FLOWS,	
	ADVOCATING FOR SUSTAINABLE WATER STORAGE, FLOOD MANAGEMENT, LEGAL	
	PROTECTION, AND PUBLIC ENGAGEMENT. IN 2023, THE ORGANIZATIONAL PROGRAM	<u> </u>
	WORK FOCUSED ON THE FOLLOWING AREAS:	
	PROTECTING RIVERS FROM COSTLY AND ENVIRONMENTALLY DESTRUCTIVE DAMS,	
	RESERVOIRS, AND DIVERSIONS.	
	FRIENDS OF THE RIVER CONTINUED TO LEAD A COALITION OF CONSERVATION	_
	ORGANIZATIONS' RESPONSE TO PROPOSED SURFACE WATER RESERVOIR PROJECTS.	
	CRITICAL PART OF THAT WORK INCLUDES MANAGING THE STORAGE RESPONSE GROU	
4b	(Code:) (Expenses \$)
4c	(Code:) (Expenses \$ including grants of \$) (Revenue \$	
4d	Other program services (Describe on Schedule O.)	
	(Expenses \$ including grants of \$) (Revenue \$)	
4e	Total program service expenses 356,876.	

Part IV | Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1_	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4	X	
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 Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	<u> </u>		
'	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		x
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If</i> "Yes," <i>complete</i>	- '-		- 25
0	, ,			x
_	Schedule D, Part III	8		
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			 ₩
	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments		37	
	or in quasi-endowments? If "Yes," complete Schedule D, Part V	10	X	
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	X	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
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	X	
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	X	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	X	
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		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
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		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		х
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	Х	
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		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		<u></u>
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
-1	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		x
	democre government on traiting columnity, mile it is restricted scriedule it Parts i and is a management and the			

Form	1 990 (2023) FRIENDS OF THE RIVER FOUNDATION 94-2	400210	Р	age 4
Pai	rt IV Checklist of Required Schedules (continued)			
			Yes	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		Х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		Х
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		Х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	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		x
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes." complete			
	Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		x
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlle	_{be}		
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	I		x
28	Was the organization a party to a business transaction with one of the following parties? (See the Schedule L, Part IV,			
20	instructions for applicable filing thresholds, conditions, and exceptions):			
•	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If</i>			
u	"Yes," complete Schedule L, Part IV	28a	Х	
h	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV			Х
	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If			
C		28c		x
29	"Yes," complete Schedule L, Part IV Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M		Х	- 25
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation		21	
30		30		x
31	contributions? If "Yes," complete Schedule M Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	20		x
22	Schedule N, Part II Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	32		
33		22		X
24	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		- 25
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and	24		X
25-	Part V, line 1 Did the organization have a controlled entity within the meaning of section 512(b)(13)?			X
		35a		
D	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	254		
00	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2			
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization	I .		х
	If "Yes," complete Schedule R, Part V, line 2	36		
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		X
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?		v	
Day	Note: All Form 990 filers are required to complete Schedule O rt V Statements Regarding Other IRS Filings and Tax Compliance	38	X	
ral				
	Check if Schedule O contains a response or note to any line in this Part V	<u></u>		
		F	Yes	No
	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable	5		
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable			

332004 12-21-23

c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming

(gambling) winnings to prize winners?

023) FRIENDS OF THE RIVER FOUNDATION

Statements Regarding Other IRS Filings and Tax Compliance (continued) Part V

				Yes	No					
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,									
	filed for the calendar year ending with or within the year covered by this return	2a 4								
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns	?	2b	Х						
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?		За		X					
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O		3b							
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other aut	hority over, a								
	financial account in a foreign country (such as a bank account, securities account, or other financial account	count)?	4a		X					
b	If "Yes," enter the name of the foreign country									
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Acc									
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5a		X					
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction		5b 5c		X					
	, , , , , , , , , , , , , , , , , , , ,									
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	-	_	37						
	any contributions that were not tax deductible as charitable contributions?		6a	X						
b	If "Yes," did the organization include with every solicitation an express statement that such contribution	-		v						
_	were not tax deductible?		6b	Х						
7	Organizations that may receive deductible contributions under section 170(c).	and provided to the power	7-	X						
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and service.		7a	X						
b		roquirod	7b	Λ						
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	•	7-		x					
ام	to file Form 8282?	7d	7c							
d	If "Yes," indicate the number of Forms 8282 filed during the year Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit con	·	7e							
e f			7f							
g	f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?									
9 h										
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained b		7h							
	sponsoring organization have excess business holdings at any time during the year?									
9										
a Did the sponsoring organization make any taxable distributions under section 4966?										
b	Did the constraint and the contract of the con		9b							
10	Section 501(c)(7) organizations. Enter:									
а	Initiation fees and capital contributions included on Part VIII, line 12	10a								
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b								
11	Section 501(c)(12) organizations. Enter:									
а	Gross income from members or shareholders	l1a								
	Gross income from other sources. (Do not net amounts due or paid to other sources against									
	/	I1b								
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1	041? I	12a							
b	,	12b								
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?		13a							
	Note: See the instructions for additional information the organization must report on Schedule O.									
b	Enter the amount of reserves the organization is required to maintain by the states in which the	101-								
_		13b								
	Did the constitution and the constitution of t	13c	14a		Х					
14a	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule	······	14b		- 23					
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remunerations.		טדו							
	excess parachute payment(s) during the year?		15		х					
	If "Yes," see the instructions and file Form 4720, Schedule N.		13							
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment in	ncome?	16		Х					
. •	If "Yes," complete Form 4720, Schedule O.									
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activ	ities								
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?		17							
	If "Yes," complete Form 6069.		-							

332005 12-21-23

FRIENDS OF THE RIVER FOUNDATION 94-2400210 Form 990 (2023) Part VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions. X Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management No Yes 11 **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 on Schedule O. 11 **b** Enter the number of voting members included on line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other X officer, director, trustee, or key employee? 2 Did the organization delegate control over management duties customarily performed by or under the direct supervision 3 Х of officers, directors, trustees, or key employees to a management company or other person? 3 X Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 X 5 Did the organization become aware during the year of a significant diversion of the organization's assets? Did the organization have members or stockholders? 6 Х 6 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? Х 7a b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? X 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: Х a The governing body? 8a **b** Each committee with authority to act on behalf of the governing body? Х 8b 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 on Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes Nο 10a Did the organization have local chapters, branches, or affiliates? 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? X 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a b Describe on Schedule O the process, if any, used by the organization to review this Form 990. X 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12a Х b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes." describe Х 12c on Schedule O how this was done Did the organization have a written whistleblower policy? Х 13 13 Did the organization have a written document retention and destruction policy? 14 X 14 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? Х The organization's CEO, Executive Director, or top management official 15a X 15b Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions. 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a X taxable entity during the year? 16a 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 Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed CA Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. X Own website Another's website X Upon request Uther (explain on Schedule O) Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial

Form **990** (2023)

statements available to the public during the tax year.

AMY COTTRELL - 9164423155

State the name, address, and telephone number of the person who possesses the organization's books and records

332006 12-21-23

95827

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

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See the 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, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.

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

- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. See the instructions for the order in which to list the persons above.

(A)	(B)						<u>lour</u>	(D)	(E)	(F)
Name and title	Average hours per week	box	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)				n an	Reportable compensation from	Reportable compensation from related	Estimated amount of other
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC/ 1099-NEC)	organizations (W-2/1099-MISC/ 1099-NEC)	compensation from the organization and related organizations
(1) JANN DORMAN	3.00	ļ								
CHAIRMAN	40.00	Х		X				0.	0.	0.
(2) JANN DORMAN	40.00	ł								•
EXECUTIVE DIR.		Х			_			0.	0.	0.
(3) RICHARD WEIS	2.00									_
SECRETARY		Х		X	_			0.	0.	0.
(4) JOHN YOST	2.00									_
TREASURER	1 00	Х		X				0.	0.	0.
(5) SCOTT ARMSTRONG	1.00	-							_	•
DIRECTOR	1 00	Х			_			0.	0.	0.
(6) SHON BOLLOCK	1.00	-							_	0
OIRECTOR (7) ASHLEY OVERHOUSE	1.00	Х						0.	0.	0.
(7) ASHLEY OVERHOUSE DIRECTOR	1.00	х						0.	0.	0
(8) GARRICK CHANG	1.00	^						0.	0.	0.
DIRECTOR	1.00	x						0.	0.	0.
(9) CHARLIE CENTER	1.00	Δ.							0.	0 •
DIRECTOR	1.00	Х						0.	0.	0.
(10) MARK DUBOIS	1.00	22							0.	0.
DIRECTOR	1.00	Х						0.	0.	0.
(11) AUSTIN ROBBS	1.00								•	•
DIRECTOR		X						0.	0.	0.
(12) THERESA LOREJO-SIMSIMAN	1.00	 								
DIRECTOR		Х						0.	0.	0.
(13) DOUG MANER	1.00									
DIRECTOR		Х						0.	0.	0.
										-
		1								
]								

Section A. Officers, Directors, Trust	tees, Key Emp	ploy	ees,	and	l Hiç	ghes	t C	ompensated Employee	s (continued)				
(A)	(B)			(0	C)			(D)	(E)			(F)	
Name and title	Average	Position					Reportable	Reportable	,	Es	stimate	ed	
	hours per		(do not check more than one box, unless person is both an					compensation compensati			ar	nount	of
	week	offic	cer an	id a di	irecto	r/trus	tee)	from	from related	l t		other	
	(list any	ctor						the	organization	ıs	com	pensa	tion
	hours for	r dire				pe		organization	(W-2/1099-MIS	3C/	fr	om th	е
	related	stee o	nste			eusa		(W-2/1099-MISC/	1099-NEC)	·	org	anizat	ion
	organizations	altrus	nal tr		oyee	omp.		1099-NEC)				d relat	
	below	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former				orga	anizati	ons
	line)	pul	Inst	0ŧŧi	Key	문발	For						
										\neg			
										\neg			
										\rightarrow			
45 0-14-4-1		<u> </u>						0.		0.			0.
1b Subtotal								0.		0.			0.
c Total from continuation sheets to Part VII								0.		0.			
d Total (add lines 1b and 1c)													0.
2 Total number of individuals (including but no	ot limited to th	ose	liste	d ab	ove) wh	o re	ceived more than \$100,	000 of reportable	Э			_
compensation from the organization													0
										1		Yes	No
3 Did the organization list any former officer,	director, truste	ee, k	сеу е	empl	oye	e, or	hig	hest compensated emp	loyee on				
line 1a? If "Yes," complete Schedule J for so	uch individual										3		X
4 For any individual listed on line 1a, is the su	•							•	•				
and related organizations greater than \$150	0,000? If "Yes,	" co	mple	ete S	Sche	edule	J f	or such individual			4		X
5 Did any person listed on line 1a receive or a													
rendered to the organization? If "Yes." com	plete Schedule	J fo	or su	ıch r	oers	on .					5		X
Section B. Independent Contractors													
1 Complete this table for your five highest cor	mpensated ind	lepe	nder	nt cc	ontra	actor	s th	at received more than \$	100,000 of com	pensat	ion fro	om	
the organization. Report compensation for t	he calendar ye	ear e	ndir	ng w	ith c	or wi	thin	the organization's tax y	ear.				
(A)								(B)			(0	C)	
Name and business	address	NO	ONE	C				Description of s	ervices	С	ompe	nsatio	n
							\dashv						
							\dashv						
2 Total number of independent control of	adudina but	S# 15	nit c -	1+- 1	the	no 11:-	to cl	abaya) who received	aro then				
2 Total number of independent contractors (in		υτ IIN	ıııtec	ı 10 1	_		rea	above) who received mo	ore than				
\$100,000 of compensation from the organiz	zation				(,							

Form 990 (2023) FRIENDS
Part VIII Statement of Revenue

		Check if Schedule O contains a response of	or note to any lin	e in this Part VIII			
		Oncon in Contragno C Contagno a response		(A)	(B)	(C)	(D)
				Total revenue	Related or exempt	Unrelated	Revenue excluded
					function revenue	business revenue	from tax under sections 512 - 514
							30000013 3 12 3 14
nts nts		Federated campaigns 1a					
ira oui		Membership dues 1b					
s, (Am	(Fundraising events 1c					
ar ar	(Related organizations 1d					
Contributions, Gifts, Grants and Other Similar Amounts	6	Government grants (contributions) 1e					
io Sign	f	All other contributions, gifts, grants, and					
out the		similar amounts not included above 1f	614,587.				
Ē		Noncash contributions included in lines 1a-1f	38,309.				
Social		Total. Add lines 1a-1f		614,587.			
			Business Code	, , ,			
	2 .	TRAINING INCOME	611600	15,774.	15,774.		
ice			011000	13,114.	13,774		
Program Service Revenue	k						
n S	(
Jrar Se	(
Š.	•						
Ф		All other program service revenue					
	Ç	Total. Add lines 2a-2f		15,774.			
	3	Investment income (including dividends, interes	st, and				
		other similar amounts)		3,639.			3,639.
	4	Income from investment of tax-exempt bond pr					
	5	Royalties					
		(i) Real	(ii) Personal				
	6 a	Gross rents 6a					
		Less: rental expenses 6b					
		Rental income or (loss) 6c					
		I Not rental income or (loss)					
		Gross amount from sales of (i) Securities	(ii) Other				
	7 6		(ii) Oti ioi				
		assets other than inventory 7a					
	K	Less: cost or other basis					
ng		and sales expenses 7b					
ève	(Gain or (loss) 7c					
her Revenue		Net gain or (loss)					
her	8 8	Gross income from fundraising events (not					
ŏ		including \$ of					
		contributions reported on line 1c). See					
			150,999.				
	k	Less: direct expenses 8b	43,636.				
	(Net income or (loss) from fundraising events		107,363.			107,363.
		Gross income from gaming activities. See					
		Part IV, line 19 9a					
	ŀ	Less: direct expenses 9b					
		Net income or (loss) from gaming activities					
		Gross sales of inventory, less returns					
	10 6	and allowances10a					
\rightarrow		Net income or (loss) from sales of inventory	Business Code				
S	44	CAIN FROM ENDOWNER	611600	9,215.	9,215.		
Miscellaneous Revenue	11 6	GAIN FROM ENDOWMENT	011000	9,410.	3,413.		
llan	k						
Se.	(
Mis	(All other revenue		0 015			
\perp	6	Total. Add lines 11a-11d		9,215.	04.000		444 000
	12	Total revenue. See instructions		750,578.	24,989.	0.	111,002.

Form 990 (2023) FRIENDS OF TH

	on 501(c)(3) and 501(c)(4) organizations must complete Check if Schedule O contains a respons			nplete column (A).	X
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations		Охреново	general expenses	скрепосо
	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees				
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	249,470.	185,887.	40,891.	22,692.
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	04 700	40.000	0.500	4 00-
9	Other employee benefits	24,703.	19,930.	2,788.	1,985. 1,852.
10	Payroll taxes	20,638.	15,094.	3,692.	1,852.
11	Fees for services (nonemployees):				
а	Management				
b	Legal	40.700		10.700	
С	Accounting	12,720.		12,720.	
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25,	440 455	25 246	04.40	0= 04.4
	column (A), amount, list line 11g expenses on Sch 0.)	148,157.	87,016.	24,127.	37,014. 110.
12	Advertising and promotion	1,085.	975.		110.
13	Office expenses				
14	Information technology				
15	Royalties	10 000	14 004	1 555	1 550
16	Occupancy	18,023.	14,894.	1,577.	1,552.
17	Travel				
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	4 01 4		A 01 A	
20	Interest	4,014.		4,014.	
21	Payments to affiliates	1 110	071	115	100
22	Depreciation, depletion, and amortization	1,116. 7,465.	871. 6,324.	145.	100. 467.
23	Insurance	7,400.	0,324.	0/4.	40/.
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A),				
а	amount, list line 24e expenses on Schedule 0.) SUPPLIES	9,107.	5,511.	2,221.	1,375.
a b	MISCELLANEOUS	9,050.	J, J11.	9,050.	±,5/5•
C	BOOKS & SUBSCRIPTIONS	6,635.	5,141.	794.	700.
d	TELEPHONE/INTERNET	6,015.	4,726.	744.	545.
	All other expenses	17,584.	10,507.	903.	6,174.
25	Total functional expenses. Add lines 1 through 24e	535,782.	356,876.	104,340.	74,566.
26	Joint costs. Complete this line only if the organization	200,7024			, = 0
	reported in column (B) joint costs from a combined		I	l	
	reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				

Form 990 (2023)

Part X | Balance Sheet

Par	t X	Balance Sheet					
		Check if Schedule O contains a response or no	ote to an	y line in this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			671,273.	1	692,591
	2	Savings and temporary cash investments			8,640.	2	305,089
	3	Pledges and grants receivable, net		119,473.	3	41,403	
	4	Accounts receivable, net			995.	4	
	5	Loans and other receivables from any current of					
		trustee, key employee, creator or founder, sub-	stantial c	contributor, or 35%			
		controlled entity or family member of any of the	ese pers	ons		5	
	6	Loans and other receivables from other disqua					
		under section 4958(f)(1)), and persons describe	ed in sec	tion 4958(c)(3)(B)		6	
ts	7	Notes and loans receivable, net				7	
Assets	8	Inventories for sale or use				8	
₹	9	Prepaid expenses and deferred charges			11,612.	9	1,830
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D					
	b	Less: accumulated depreciation			36,194.	10c	22,641
	11	Investments - publicly traded securities				11	
	12	Investments - other securities. See Part IV, line				12	
	13	Investments - program-related. See Part IV, line				13	
	14	Intangible assets	8,000.	14	100 001		
	15	Other assets. See Part IV, line 11			89,967.	15	100,001
	16	Total assets. Add lines 1 through 15 (must eq			946,154.	16	1,163,555
	17	Accounts payable and accrued expenses	2,561.	17	4,896		
	18	Grants payable		18			
	19	Deferred revenue				19	
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complete				21	
es	22	Loans and other payables to any current or for					
Liabilities		trustee, key employee, creator or founder, sub-					
jaj		controlled entity or family member of any of the				22	
_	23	Secured mortgages and notes payable to unre				23	
	24	Unsecured notes and loans payable to unrelate		Г		24	
	25	Other liabilities (including federal income tax, p					
		parties, and other liabilities not included on line	-		220,988.	0.5	221,260
	06	of Schedule D Total liabilities. Add lines 17 through 25			223,549.		226,156
\dashv	26	Organizations that follow FASB ASC 958, ch		e X	223,343.	20	220,130
Sé		and complete lines 27, 28, 32, and 33.	IECK HEI				
u C	27	Net assets without donor restrictions			594,318.	27	791,511
Sala	28	Net assets with donor restrictions			128,287.	28	145,888
힐	20	Organizations that do not follow FASB ASC			220,20,1	20	210,000
필		and complete lines 29 through 33.	500, cric	SOK HOLE			
ō	29	Capital stock or trust principal, or current fund	s			29	
ets	30	Paid-in or capital surplus, or land, building, or e				30	
Ass	31	Retained earnings, endowment, accumulated i				31	
Net Assets or Fund Balances	32	Total net assets or fund balances			722,605.	32	937,399
Z					946,154.	33	1,163,555
ļ	33	Total liabilities and net assets/fund balances			J40,134.	33	Form 990

Pa	rt XI Reconciliation of Net Assets						
	Check if Schedule O contains a response or note to any line in this Part XI						
1	Total revenue (must equal Part VIII, column (A), line 12)	1			78.		
2	Total expenses (must equal Part IX, column (A), line 25)	2	5	35,7	782.		
3	Revenue less expenses. Subtract line 2 from line 1	3			<u> 196.</u>		
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	7	22,6	05.		
5	Net unrealized gains (losses) on investments	5					
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 on Schedule O)	9			0.		
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,						
	column (B))	10	9	37,4	101.		
Pa	rt XII Financial Statements and Reporting						
	Check if Schedule O contains a response or note to any line in this Part XII				X		
				Yes	No		
1	Accounting method used to prepare the Form 990: Cash X Accrual Other						
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.						
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2	1	X		
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a					
	separate basis, consolidated basis, or both:						
	Separate basis Consolidated basis Both consolidated and separate basis						
b	Were the organization's financial statements audited by an independent accountant?		2i	X			
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,					
	consolidated basis, or both:						
	X Separate basis Consolidated basis Both consolidated and separate basis						
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	audit,					
	review, or compilation of its financial statements and selection of an independent accountant?		20	: X			
	If the organization changed either its oversight process or selection process during the tax year, explain on Sche	edule O.					
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the						
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		3	ı	X		
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	ed audit					
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		31				

SCHEDULE A

(Form 990)

Total

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.

Open to Public

Employer identification number

Go to www.irs.gov/Form990 for instructions and the latest information.

Inspection

OMB No. 1545-0047

FRIENDS OF THE RIVER FOUNDATION 94-2400210 Part I Reason for Public Charity Status. (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or X An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations Provide the following information about the supported organization(s). (iv) Is the organization listed (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other in your governing document? (described on lines 1-10 organization support (see instructions) support (see instructions) Yes above (see instructions))

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

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

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3						
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)						
	Public support. Subtract line 5 from line 4.						
	ction B. Total Support	1	Γ		T	1	
	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
7	Amounts from line 4						
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources						
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)						
	Total support. Add lines 7 through 10						
	Gross receipts from related activities,	•	,			12	
13	First 5 years. If the Form 990 is for the	-			-		
804	organization, check this box and stop ction C. Computation of Publi						
				l (f))		44	0/
	Public support percentage for 2023 (I					15	<u>%</u> %
	Public support percentage from 2022 33 1/3% support test - 2023. If the						
100	stop here. The organization qualifies	•		•		•	
h	33 1/3% support test - 2022. If the		-		l line 15 is 33 1/3%		
	and stop here. The organization qual						
172	10% -facts-and-circumstances test				e 13 162 or 16b s		
110	and if the organization meets the fact						
	meets the facts-and-circumstances te				•	viriow the organiz	
h	10% -facts-and-circumstances test	-			•		
~	more, and if the organization meets the						. 570 01
	organization meets the facts-and-circle						
18	Private foundation. If the organization		-				s
			-, 10	. , , ,			(Form 990) 2023

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

(Complete only if you checked the box on line 10 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.)

Sed	ction A. Public Support	ciow, picase comp	icic i ait ii.j				
	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
	Gifts, grants, contributions, and membership fees received. (Do not	(0) = 0.10	(12)	(5) = = = :	(3) = 1 = 1	(5) ====	(0)
	include any "unusual grants.")	656,518.	392,924.	486,571.	533,869.	630,361.	2700243.
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose			4,738.	525.	15,774.	21,037.
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organ- ization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
	Total. Add lines 1 through 5	656,518.	392,924.	491,309.	534,394.	646,135.	2721280.
	Amounts included on lines 1, 2, and 3 received from disqualified persons	45,000.	39,600.	32,007.	34,241.	22,135.	172,983.
i.	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						0.
c	Add lines 7a and 7b	45,000.	39,600.	32,007.	34,241.	22,135.	
	Public support. (Subtract line 7c from line 6.)						2548297.
	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
	Amounts from line 6	656,518.	392,924.	491,309.	534,394.	646,135.	2721280.
10a	dross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	2,144.	7,726.	13,010.	2,702.	4,212.	29,794.
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c	Add lines 10a and 10b	2,144.	7,726.	13,010.	2,702.	4,212.	29,794.
11	Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	11,044.	15,946.	F04 210	72,062.	10,023.	109,075.
	Total support. (Add lines 9, 10c, 11, and 12.)	669,706.	416,596.	504,319.	609,158.	660,370.	2860149.
14	First 5 years. If the Form 990 is for the	· ·		•		. , . ,	on,
Sec	check this box and stop here ction C. Computation of Publi	c Support Per					
	Public support percentage for 2023 (li			column (fl)		15	89.10 %
	Public support percentage from 2022		- ·			16	88.12 %
	ction D. Computation of Inves		•				
	Investment income percentage for 20			ne 13, column (f))		17	1.04 %
	Investment income percentage from 2					18	1.09 %
	33 1/3% support tests - 2023. If the				·	3 1/3%, and line 17	
	more than 33 1/3%, check this box ar	nd stop here. The	organization qualif	ies as a publicly su	upported organizat	ion	X
b	33 1/3% support tests - 2022. If the	•				•	
	line 18 is not more than 33 1/3%, che						
20	Private foundation. If the organization	n did not check a b	oox on line 14, 19a	a, or 19b, check th	is hox and see inst	ructions	1 1

Part IV | Supporting Organizations

(Complete only if you checked a box on line 12 of Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

- 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.
- 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).
- **3a** Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.
- **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.
- 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.
- **4a** Was any supported organization not organized in the United States ("foreign supported organization")? *If* "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.
- **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.
- 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)? 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.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c 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).
- 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?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) 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.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If "Yes," complete Part I of Schedule L (Form 990).
- 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.
- **b** Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in **Part VI.**
- c Did a disqualified person (as defined on line 9a) 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.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 10b below.
 - **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.)

		Yes	No
	1		
	2		
	_		
	3a		
	2h		
	3b		
	3с		
	4a		
	4b		
	4c		
	5a		
	5b		
	5c		
	6		
	7		
	8		
	9a		
	9b		
	9c		
	10-		
	10a		
	10b		
_	A (Farm	~ 000	2002

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rai	LIV	Supporting Organizations (continued)			
				Yes	No
11	Has t	the organization accepted a gift or contribution from any of the following persons?			
а	A per	rson who directly or indirectly controls, either alone or together with persons described on lines 11b and			
	11c b	pelow, the governing body of a supported organization?	11a		
b	A fam	nily member of a person described on line 11a above?	11b		
С	A 35%	% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
	detail	in Part VI.	11c		
Sect	tion I	B. Type I Supporting Organizations			
				Yes	No
1	Did th	he governing body, members of the governing body, officers acting in their official capacity, or membership of one or			
	more	supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers,			
		tors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s)			
		tively operated, supervised, or controlled the organization's activities. If the organization had more than one supported			
		nization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the orted organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
		he organization operate for the benefit of any supported organization other than the supported			
		nization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
		VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
		rvised, or controlled the supporting organization.	2		
Sect	tion (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		100	110
		istees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
		anagement of the supporting organization was vested in the same persons that controlled or managed			
			1		
Sect	ion l	upported organization(s). D. All Type III Supporting Organizations	•		
		<i>y</i> 11 0 0		Yes	No
1	Did th	he organization provide to each of its supported organizations, by the last day of the fifth month of the		103	140
		nization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
		(ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
		nization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
	-	any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
		nization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
		· '	2		
		rganization maintained a close and continuous working relationship with the supported organization(s). Pason of the relationship described on line 2, above, did the organization's supported organizations have a			
		ficant voice in the organization's investment policies and in directing the use of the organization's			
		ne or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
		· · · · · · · · · · · · · · · · · · ·	3		
Sect	suppo tion l	orted organizations played in this regard. E. Type III Functionally Integrated Supporting Organizations	3		
1					
' a	Crieci	the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions). The organization satisfied the Activities Test. Complete line 2 below.			
b	H	The organization is the parent of each of its supported organizations. Complete line 3 below.			
c	H	The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see ins	truction	اه.	
2	Δctivi	ities Test. Answer lines 2a and 2b below.	uction	Yes	No
		substantially all of the organization's activities during the tax year directly further the exempt purposes of		103	140
		upported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
		e supported organizations and explain how these activities directly furthered their exempt purposes,			
		the organization was responsive to those supported organizations, and how the organization determined	2a		
h		these activities constituted substantially all of its activities. The activities described on line 2a, above, constitute activities that, but for the organization's involvement,	2.0		
b					
		or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in			
		VI the reasons for the organization's position that its supported organization(s) would have engaged in	2b		
2		e activities but for the organization's involvement.	ZU		
		nt of Supported Organizations. Answer lines 3a and 3b below.			
		he organization have the power to regularly appoint or elect a majority of the officers, directors, or	20		
		ees of each of the supported organizations? If "Yes" or "No" provide details in Part VI.	3a		
O		he organization exercise a substantial degree of direction over the policies, programs, and activities of each	2h		
	UI ITS	supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		

1	Check here if the organization satisfied the Integral Part Test as a qualifying		Nov. 20. 1970 (explain in F	Part VI). See instructions.
•	All other Type III non-functionally integrated supporting organizations must of		·	
Sect	ion 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		
Sect	ion 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):			
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		
е	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 0.015 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 0.035.	6		
_7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions).	6		
7	Check here if the current year is the organization's first as a non-functionally	integra	ted Type III supporting orgar	nization (see
	instructions).			

Schedule A (Form 990) 2023

Schedule A (Form 990) 2023

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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.)	
SCHEDULE A, PART III, LINE 12, EXPLANATION FOR OTHER INCOME:	
OTHER INCOME	
2019 AMOUNT: \$ 11,044.	
2020 AMOUNT: \$ 15,946.	
2023 AMOUNT: \$ 10,023.	
PPP FORGIVENESS	
2022 AMOUNT: \$ 72,062.	

SCHEDULE C (Form 990)

Political Campaign and Lobbying Activities

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

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Complete if the organization is described below. Attach to Form 990 or Form 990-EZ. Go to www.irs.gov/Form990 for instructions and the latest information.

If the organization answered "Yes" on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then:

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes" on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then:

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes" on Form 990, Part IV, line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then:

• Section 501(c)(4), (5), or (6) organization	tions: Complete Part III.		1_	
Name of organization			E	nployer identification number
FRIENDS	OF THE RIVER FOU	INDATION		94-2400210
Part I-A Complete if the org	ganization is exempt unde	er section 501(c) (or is a section 527	organization.
 Provide a description of the organiz Political campaign activity expendit Volunteer hours for political campain 	tures			
Part I-B Complete if the org	ganization is exempt unde	er section 501(c)(3	3).	
1 Enter the amount of any excise tax	incurred by the organization unde	er section 4955		\$
2 Enter the amount of any excise tax				
3 If the organization incurred a section				
4a Was a correction made?				
b If "Yes," describe in Part IV.				
Part I-C Complete if the org	ganization is exempt unde	er section 501(c),	except section 50 ⁻	I(c)(3).
1 Enter the amount directly expended	d by the filing organization for sec	tion 527 exempt funct	ion activities	\$
2 Enter the amount of the filing organ		· ·		
exempt function activities				\$
3 Total exempt function expenditures		·		
line 17b				
4 Did the filing organization file Form				
5 Enter the names, addresses, and el				
made payments. For each organiza contributions received that were pro-				·
political action committee (PAC). If				rate segregated fund of a
(a) Name	(b) Address	(c) EIN	(d) Amount paid from	m (e) Amount of political
(a) Name	(b) Address	(C) LIN	filing organization's	1 ' '
			funds. If none, enter	0 promptly and directly
				delivered to a separate political organization.
				If none, enter -0

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

Schedule C (Form 990) 2023

			THE RIVER FO			400210 Page 2
Part II-A Complete if the org	anizatio	n is exen	npt under section	501(c)(3) and file	d Form 5768 (ele	ction under
section 501(h)).						
A Check if the filing organiza	tion belon	gs to an affil	iated group (and list in	Part IV each affiliated	group member's name	e, address, EIN,
expenses, and shar		, ,	. ,			
B Check if the filing organiza	tion check	ed box A ar	d "limited control" pro	visions apply.		Г
Limit	s on Lobi	oying Exper	nditures		(a) Filing	(b) Affiliated group
			nts paid or incurred.)		organization's totals	totals
1a Total lobbying expenditures to influ					0.	
b Total lobbying expenditures to influ					7,461.	
c Total lobbying expenditures (add lin		d 1b)			7,461.	
d Other exempt purpose expenditure					528,321.	
e Total exempt purpose expenditures	•	•		ſ	535,782.	
f Lobbying nontaxable amount. Ente					105,367.	
If the amount on line 1e, column (a) o	r (b) is:		bying nontaxable amo	ount is:		
not over \$500,000,			the amount on line 1e.			
over \$500,000 but not over \$1,000			0 plus 15% of the exce			
over \$1,000,000 but not over \$1,50			0 plus 10% of the exce	<u> </u>		
over \$1,500,000 but not over \$17,0	000,000,		0 plus 5% of the exces	ss over \$1,500,000.		
over \$17,000,000,		\$1,000,0	000.		06 240	
g Grassroots nontaxable amount (en					26,342.	
h Subtract line 1g from line 1a. If zero	,				0.	
i Subtract line 1f from line 1c. If zero	-				0.	
j If there is an amount other than zer			· · ·		_	
reporting section 4911 tax for this	year?					Yes No
(O			raging Period Under	` '	e de la Cara de la comuna de la	Laure
(Some organizations th			on election do not rate instructions for lin	•	t the five columns be	low.
1	LODI	bying Exper	nditures During 4-Yea	r Averaging Period		
Calendar year	(a)	2020	(b) 2021	(c) 2022	(d) 2023	(e) Total
(or fiscal year beginning in)	(a)	2020	(b) 2021	(6) 2022	(u) 2023	(e) Total
On takin in a satawaki sasawa			110 443	81,892.	105,367.	207 702
2a Lobbying nontaxable amount			110,443.	01,092.	103,307.	297,702.
b Lobbying ceiling amount						446,553.
(150% of line 2a, column(e))						440,333.
Total India to day on a constant difference			5,176.	3,218.	7,461.	15,855.
c Total lobbying expenditures			3,170.	3,210.	7,401.	13,033.
d Grassroots pontovable amount			27,611.	20,473.	26,342.	74,426.
d Grassroots nontaxable amount e Grassroots ceiling amount			2/,011.	20,473.	40,544.	/4,420•
(150% of line 2d, column (e))						111,639.
(15070 51 1115 24, 66141111 (6))						
f Grassroots lobbying expenditures				144.		144.

Schedule C (Form 990) 2023

f Grassroots lobbying expenditures

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

answered "Yes."	In git he year, did the filing organization attempt to influence foreign, national, state, or legislation, including any attempt to influence public opinion on a legislative matter ferendum, through the use of: nteers? staff or management (include compensation in expenses reported on lines 1c through 1i)? ia advertisements? ings to members, legislators, or the public? ications, or published or broadcast statements? its to other organizations for lobbying purposes? it contact with legislators, their staffs, government officials, or a legislative body? se, demonstrations, seminars, conventions, speeches, lectures, or any similar means? ir activities? I. Add lines 1c through 1i the activities in line 1 cause the organization to not be described in section 501(c)(3)? ses," enter the amount of any tax incurred under section 4912 ses," enter the amount of any tax incurred by organization managers under section 4912 selfling organization incurred a section 4912 tax, did it file Form 4720 for this year? A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6). Yes substantially all (90% or more) dues received nondeductible by members? the organization make only in-house lobbying expenditures of \$2,000 or less? a substantially all (90% or more) dues received nondeductible by members? the organization make only in-house lobbying and political campaign activity expenditures from the prior year? 2 he organization agree to carry over lobbying and political campaign activity expenditures from the prior year? 3 Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, in answered "Yes." 5, assessments and similar amounts from members ion 162(e) nondeductible lobbying and political expenditures (do not include amounts of political ences for which the section 527(f) tax was paid). entry over from last year	or each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description	(a)		(I	o)
local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of: a Volunteers? b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? c Media advertisements? d Mailings to members, legislators, or the public? e Publications, or published or broadcast statements? f Grants to other organizations for lobbying purposes? g Direct contact with legislators, their staffs, government officials, or a legislative body? h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? i Other activities? j Total. Add lines 1c through 1i 2a Did the activities in line 1 cause the organization to not be described in section 501(c)(3)? b If "Yes," enter the amount of any tax incurred under section 4912 c If "Yes," enter the amount of any tax incurred by organization managers under section 4912 d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or se 501(c)(6). 1 Were substantially all (90% or more) dues received nondeductible by members? 2 Did the organization make only in-house lobbying expenditures of \$2,000 or less? 3 Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year? 3 Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or se 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part answered "Yes."	legislation, including any attempt to influence public opinion on a legislative matter ferendum, through the use of: interest? staff or management (include compensation in expenses reported on lines 1c through 1i)? is advertisements? ings to members, legislators, or the public? ications, or published or broadcast statements? its to other organizations for lobbying purposes? ict contact with legislators, their staffs, government officials, or a legislative body? iss, demonstrations, seminars, conventions, speeches, lectures, or any similar means? ict contact with legislators, their staffs, government officials, or a legislative body? iss, demonstrations, seminars, conventions, speeches, lectures, or any similar means? ict contact with legislators, their staffs, government officials, or a legislative body? iss, demonstrations, seminars, conventions, speeches, lectures, or any similar means? ict contact with legislators are seminars, conventions, speeches, lectures, or any similar means? ict contact with legislators are staffs, government officials, or a legislative body? iss, demonstrations, seminars, conventions, speeches, lectures, or any similar means? ict contact with legislators, their staffs, government officials, or a legislative body? iss, demonstrations, seminars, conventions, speeches, lectures, or any similar means? In the activities in line 1 cause the organization to not be described in section 501(c)(3)? In the activities in line 1 cause the organization to not be described in section 501(c)(3)? In the activities in line 1 cause the organization to not be described in section 501(c)(3)? In the activities in line 1 cause the organization to not be described in section 501(c)(4), section 501(c)(5), or section 501(c)(6). In the activities in line 1 cause the organization to not be described in section 501(c)(4), section 501(c)(5), or section 501(c)(6). In the activities in line 1 cause the organization to not be described in section 501(c)(4), section 501(c)(5), or section 501(c)(6). In the act	the lobbying activity.	Yes	No	Amo	ount
local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of: a Volunteers? b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? c Media advertisements? d Mailings to members, legislators, or the public? e Publications, or published or broadcast statements? f Grants to other organizations for lobbying purposes? g Direct contact with legislators, their staffs, government officials, or a legislative body? h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? i Other activities? j Total. Add lines 1c through 1i 2a Did the activities in line 1 cause the organization to not be described in section 501(c)(3)? b If "Yes," enter the amount of any tax incurred under section 4912 c If "Yes," enter the amount of any tax incurred by organization managers under section 4912 d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or se 501(c)(6). 1 Were substantially all (90% or more) dues received nondeductible by members? 2 Did the organization make only in-house lobbying expenditures of \$2,000 or less? 3 Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year? 3 Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or se 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part answered "Yes."	legislation, including any attempt to influence public opinion on a legislative matter ferendum, through the use of: interest? staff or management (include compensation in expenses reported on lines 1c through 1i)? is advertisements? ings to members, legislators, or the public? ications, or published or broadcast statements? its to other organizations for lobbying purposes? ict contact with legislators, their staffs, government officials, or a legislative body? iss, demonstrations, seminars, conventions, speeches, lectures, or any similar means? ict contact with legislators, their staffs, government officials, or a legislative body? iss, demonstrations, seminars, conventions, speeches, lectures, or any similar means? ict contact with legislators, their staffs, government officials, or a legislative body? iss, demonstrations, seminars, conventions, speeches, lectures, or any similar means? ict contact with legislators are seminars, conventions, speeches, lectures, or any similar means? ict contact with legislators are staffs, government officials, or a legislative body? iss, demonstrations, seminars, conventions, speeches, lectures, or any similar means? ict contact with legislators, their staffs, government officials, or a legislative body? iss, demonstrations, seminars, conventions, speeches, lectures, or any similar means? In the activities in line 1 cause the organization to not be described in section 501(c)(3)? In the activities in line 1 cause the organization to not be described in section 501(c)(3)? In the activities in line 1 cause the organization to not be described in section 501(c)(3)? In the activities in line 1 cause the organization to not be described in section 501(c)(4), section 501(c)(5), or section 501(c)(6). In the activities in line 1 cause the organization to not be described in section 501(c)(4), section 501(c)(5), or section 501(c)(6). In the activities in line 1 cause the organization to not be described in section 501(c)(4), section 501(c)(5), or section 501(c)(6). In the act	1 During the year, did the filing organization attempt to influence foreign, national, state, or				
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SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

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

Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047 Inspection

Name of the organization

FRIENDS OF THE RIVER FOUNDATION

Employer identification number 94-2400210

Par			or Accounts. Complete if the
	organization answered "Yes" on Form 990, Part IV, lin	e 6. (a) Donor advised funds	(b) Funds and other accounts
_	Total growth or at an dieform	(a) Donor advised lunds	(b) Funds and other accounts
1	Total number at end of year		
2 3	Aggregate value of contributions to (during year) Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in v	writing that the assets held in donor advis	eed funds
J	are the organization's property, subject to the organization's	-	
6	Did the organization inform all grantees, donors, and donor a		
	for charitable purposes and not for the benefit of the donor o		•
Par			
1	Purpose(s) of conservation easements held by the organization	on (check all that apply).	
	Preservation of land for public use (for example, recrea	tion or education) Preservation o	f a historically important land area
	Protection of natural habitat	Preservation o	f a certified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualif	fied conservation contribution in the form	
	day of the tax year.		Held at the End of the Tax Year
	Total number of conservation easements		
	, , , , , , , , , , , , , , , , , , , ,		
	Number of conservation easements on a certified historic stru		2c
d	Number of conservation easements included on line 2c acqu		
2	on a historic structure listed in the National Register		
3		eased, extinguished, or terminated by the	e organization during the tax
4	year Number of states where property subject to conservation eas	sement is located	
5	Does the organization have a written policy regarding the per		
	violations, and enforcement of the conservation easements it		Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,		
7	Amount of expenses incurred in monitoring, inspecting, hand	lling of violations, and enforcing conserva	tion easements during the year
8	Does each conservation easement reported on line 2d above	satisfy the requirements of section 170(h	n)(4)(B)(i)
	and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIII, describe how the organization reports conservation	on easements in its revenue and expense	statement and
	balance sheet, and include, if applicable, the text of the footn	note to the organization's financial statem	ents that describes the
Do	organization's accounting for conservation easements. t III Organizations Maintaining Collections of	Art Historical Tracquires or Of	thar Similar Assats
Pai			iller Sillillar Assets.
	Complete if the organization answered "Yes" on Form		and below as also at according
па	If the organization elected, as permitted under FASB ASC 95	, I	
	of art, historical treasures, or other similar assets held for pub	, ,	· ·
h	service, provide in Part XIII the text of the footnote to its finar If the organization elected, as permitted under FASB ASC 95		
b	art, historical treasures, or other similar assets held for public		
	provide the following amounts relating to these items.	exhibition, education, or research in full	lerance of public service,
	(i) Revenue included on Form 990, Part VIII, line 1		\$
			_
2	If the organization received or held works of art, historical treations		Il gain, provide
_	the following amounts required to be reported under FASB A		J , F
а	Revenue included on Form 990, Part VIII, line 1		\$
	Assets included in Form 990, Part X		
	For Paperwork Reduction Act Notice, see the Instructions		Schedule D (Form 990) 2023

Par	t III Organizations Maintaining Co	llections of Art	, Historical Tre	asures, or Oth	er Si	mılar	Assets	(contin	ued)	
3	Using the organization's acquisition, accession							,		
	collection items (check all that apply).									
а	Public exhibition	d	Loan or excl	hange program						
b	Scholarly research	е								
С	Preservation for future generations									
4	Provide a description of the organization's colle	ections and explain	how they further th	e organization's exe	empt	purpos	e in Part	XIII.		
5	During the year, did the organization solicit or r									
	to be sold to raise funds rather than to be mair							Yes		No
Par	t IV Escrow and Custodial Arrange							ne 9, or		
	reported an amount on Form 990, Part		· ·							
1a	Is the organization an agent, trustee, custodiar	n, or other intermed	iary for contribution	s or other assets no	ot incl	uded				
	on Form 990, Part X?							Yes		No
b	If "Yes," explain the arrangement in Part XIII ar	nd complete the follo	owing table:							
		·			ſ			Amount		
С	Beginning balance				Ì	1c				
	Additions during the year					1d				
	Distributions during the year					1e				
f	Ending balance					1f				
	Did the organization include an amount on For							Yes		No
	If "Yes," explain the arrangement in Part XIII. C				-			_]
Par										
		(a) Current year	(b) Prior year	(c) Two years back		Three ye	ears back	(e) Four	years	back
1a	Beginning of year balance	87,870.	104,641.	95,143,		8	33,850.		65,	992.
b	Contributions	1,928.	100.	2,600.	.		4,600.			953.
c	Net investment earnings, gains, and losses	9,007.	-15,498.	8,394.	+		7,950.			042.
d	Grants or scholarships	, -	,	,			, -			
	Other expenditures for facilities									
·										
f	Administrative expenses		1,373.	1,496.			1,257.		1	137.
	End of year balance	98,805.	87,870.	104,641.	_	9	5,143.			850.
g 2	Provide the estimated percentage of the currer	, ,	•	-	<u>' </u>		,			
		•	%) Held as.						
a b	Board designated or quasi-endowment Permanent endowment	%	_70							
C	Term endowment %									
C	The percentages on lines 2a, 2b, and 2c should									
22	Are there endowment funds not in the possess	•	ion that are hold an	d administered for	tho					
Sa	organization by:	non or the organizat	ion that are new an	iu auministereu ior	uie			Г	Yes	No
	· ,							3a(i)		X
	(III) D. I.							3a(ii)		X
L	If "Yes" on line 3a(ii), are the related organization		d on Cohodula D2						-	
۵ م								3b		
Par	Describe in Part XIII the intended uses of the o		iment iunas.							
ı uı	Complete if the organization answered		Part IV line 11a S	ee Form 000 Part \	(line	10				
	-	1	1	T T				(-I) D1	1	
	Description of property	(a) Cost or ot basis (investm		' '		mulated ciation		(d) Book	value	е
_	Land	 `	Dasis i	(Other)	ehi ec	natiOH				
	Land									
	Buildings						-+			
	Leasehold improvements		2	5 176	2.	1,98	1	2	1 1	0.5
	Equipment			5,476. 0,745.		1,90				95. 46.
	Other				۷.	1,59	3.	7.7 T.2	, <u>1</u>	± U •

Schedule D (Form 990) 2023

Schedule D (Form 990) 2023 FRIENDS O	OF THE RIVER FOUR	NDATION	94-2400210 Page 3
Part VII Investments - Other Securities			<u>u</u>
Complete if the organization answered "\	es" on Form 990, Part IV, line	11b. See Form 990, Part X, line 12.	
(a) Description of security or category (including name of security	rity) (b) Book value	(c) Method of valuation: Cost or	r end-of-year market value
(1) Financial derivatives			
(2) Closely held equity interests			
(3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
Total. (Col. (b) must equal Form 990, Part X, line 12, col. (B))		
Part VIII Investments - Program Related	á.		
Complete if the organization answered "\		11c. See Form 990, Part X, line 13.	
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or	r end-of-year market value
(1)			,
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, line 13, col. (B))		
Part IX Other Assets	<i>)</i>		
Complete if the organization answered "\	es" on Form 990. Part IV. line	11d. See Form 990. Part X. line 15.	
	(a) Description		(b) Book value
(1) BENEFICIAL INT PLACER C			98,805.
(2) SECURITY DEPOSITS	OMIT I DIN		1,196.
(3)			1,1500
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, line 15	5 and (P))		100,001.
Part X Other Liabilities	<u>5, COI. (B))</u>		100,001.
Complete if the organization answered "\	Yes" on Form 990 Part IV line	11e or 11f See Form 990 Part X line	e 25
(a) Description of liability		110 01 1111 000 10111 000, 1 0117, 1110	(b) Book value
11 7			(b) Book value
(1) Federal income taxes (2) ACCRUED VACATION PAYABL			14,413.
(3) CREDIT CARD PAYABLE	11		551.
(4) EIDL / SBA LOAN			144,380.
(5) PASS THROUGH FUNDS			40,406.
			21,510.
			41,510.
(7)			
(8)			

Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII

Schedule D (Form 990) 2023

221,260.

(9)

Total. (Column (b) must equal Form 990, Part X, line 25, col. (B))

4c

535,782

	dule D (Form 990) 2023 FRIENDS OF THE RIVER FOUNI	DATION	94-2	400210 Page
Paı	t XI Reconciliation of Revenue per Audited Financial Statem	ents With Revenue p	er Return	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12	a.		
1	Total revenue, gains, and other support per audited financial statements		1	750,578
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
а	Net unrealized gains (losses) on investments	2a		
b	Donated services and use of facilities	2b		
С	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII.)	2d		
е	Add lines 2a through 2d		2e	0
3	Subtract line 2e from line 1		3	750,578
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		
С	Add lines 4a and 4b		4c	0
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990. Part I, line 12.)		5	750,578
Pa	t XII Reconciliation of Expenses per Audited Financial Staten	nents With Expenses	per Return	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12	a.		
1	Total expenses and losses per audited financial statements		1	535,782
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
а	Donated services and use of facilities	2a		
b	Prior year adjustments	2b		
С	Other losses	2c		
d	Other (Describe in Part XIII.)	2d		
е	Add lines 2a through 2d		2e	0
3	Subtract line 2e from line 1		3	535,782
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	1 1		
а	Investment expenses not included on Form 900, Part VIII, line 7h	4a		

Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) | Part XIII | Supplemental Information

b Other (Describe in Part XIII.) c Add lines 4a and 4b

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

PART X, LINE 2:

THE PREPARATION OF FINANCIAL STATEMENTS IN CONFORMITY WITH ACCOUNTING PRINCIPLES GENERALLY ACCEPTED IN THE UNITED STATES OF AMERICA REQUIRES THE FRIENDS OF THE RIVER TO REPORT INFORMATION REGARDING ITS EXPOSURE TO THE FRIENDS OF VARIOUS TAX POSITIONS TAKEN BY THE FRIENDS OF THE RIVER. THE RIVER HAS DETERMINED WHETHER ANY TAX POSITIONS HAVE MET THE RECOGNITION THRESHOLD AND HAVE MEASURED THE EXPOSURE TO THOSE TAX POSITIONS. MANAGEMENT BELIEVES THAT THE FRIENDS OF THE RIVER HAS ADEQUATELY ADDRESSED ALL RELEVANT TAX POSITIONS AND THAT THERE ARE NO UNRECORDED TAX LIABILITIES. FEDERAL AND STATE TAX AUTHORITIES GENERALLY HAVE THE RIGHT TO EXAMINE THE PREVIOUS THREE YEARS OF TAX RETURNS FILED.

ANY INTEREST OR PENALTIES ASSESSED TO THE FRIENDS OF THE RIVER ARE

SCHEDULE G (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

Attach to Form 990 or Form 990-EZ.

Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2023

Open to Public Inspection

Name of the organization							Employer identification number			
FRIENDS		94-2400210								
Part I Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.										
1 Indicate whether the organization raised funds through any of the following activities. Check all that apply. a										
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) fundr have c or con contribu	ustody itrol of	(iv) Gross receipts from activity	to (d	Amount paid or retained by) fundraiser ted in col. (i)	(vi) Amount paid to (or retained by) organization			
		Yes	No							
Total										
3 List all states in which the organization or licensing.	on is registered or licensed to solicit o	ontrib	utions	or has been notified	it is	exempt from re	gistration			

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

Schedule G (Form 990) 2023

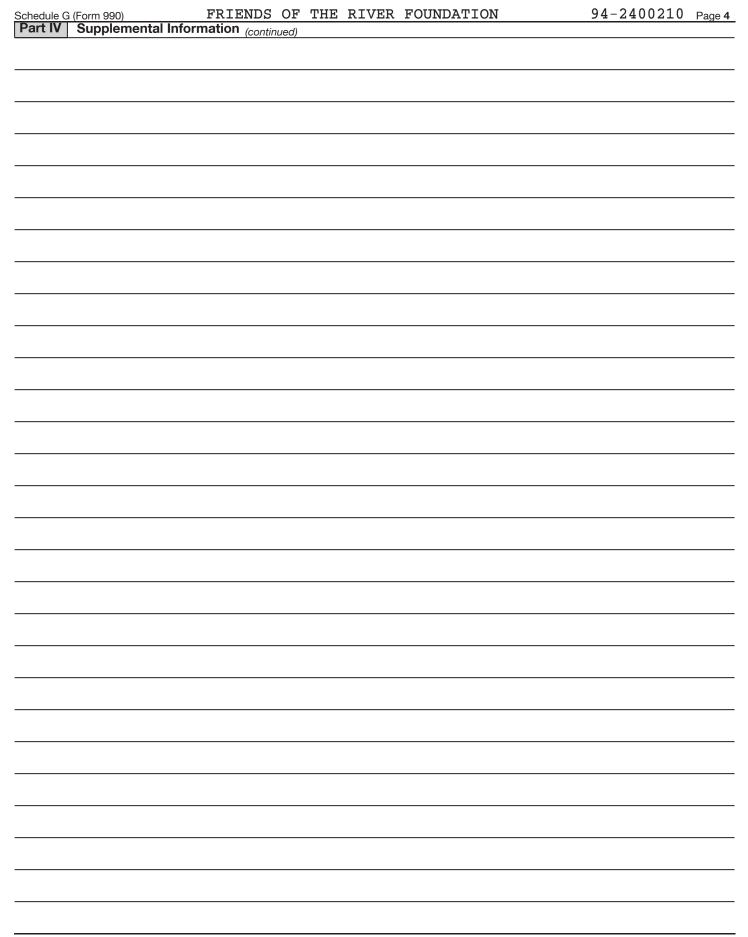
Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b.

	of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.								
			(a) Event #1	(b) Event #2	(c) Other events	(d) Total events			
					NONE	(add col. (a) through			
			RIVER AWARDS			col. (c))			
ē			(event type)	(event type)	(total number)				
Revenue			06 256	E 4 7 4 2		150 000			
Rev	1	Gross receipts	96,256.	54,743.		150,999.			
		Lance Cantributions							
	2	Less: Contributions							
	3	Gross income (line 1 minus line 2)	96,256.	54,743.		150,999.			
		Gross moonic (inte i minus inte 2)	3072300	31//130		130/3331			
	4	Cash prizes							
	5	Noncash prizes							
ses									
Sens	6	Rent/facility costs	6,343.	3,607.		9,950.			
Direct Expenses			15.000	10 111		0.5.050			
rect	7	Food and beverages	17,832.	10,141.		27,973.			
Ö									
	8	Entertainment Other direct expenses		2,071.		5,713.			
	10	Direct expense summary. Add lines 4 through		2,071.	•	43,636.			
		Net income summary. Subtract line 10 from I				107,363.			
Pa	rt I	II Gaming. Complete if the organization		990, Part IV, line 19, or	reported more than	•			
		\$15,000 on Form 990-EZ, line 6a.							
Φ			(a) Bingo	(b) Pull tabs/instant	(c) Other gaming	(d) Total gaming (add			
eun			(-,3-	bingo/progressive bingo	(-, gg	col. (a) through col. (c))			
Revenue									
	1	Gross revenue							
	2	Cach prizes							
ses		Cash prizes							
Direct Expenses	3	Noncash prizes							
É									
rec	4	Rent/facility costs							
	5	Other direct expenses							
			Yes %	Yes %	Yes %				
	6	Volunteer labor	No	No No	No				
	_	Divert company of the control of the	la F in a a lumana (al)						
	′	Direct expense summary. Add lines 2 through	n 5 in column (a)						
	8	Net gaming income summary. Subtract line 7	from line 1, column (d)						
		The garming meeting carring process and the control of the control				,			
9	9 Enter the state(s) in which the organization conducts gaming activities:								
a Is the organization licensed to conduct gaming activities in each of these states?									
b	b If "No," explain:								
		and the same of th	and the state of t	made at a district of the state					
		ere any of the organization's gaming licenses re				Yes No			
O	b If "Yes," explain:								
	_								

Schedule G (Form 990) 2023

332082 09-13-23

Sch	edule G (Form 990) 2023 FRIENDS OF THE RIVER FOUNDATION 94	-2400210	Page 3
11	Does the organization conduct gaming activities with nonmembers?	Yes	☐ No
	Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed		
	to administer charitable gaming?	Yes	☐ No
13	Indicate the percentage of gaming activity conducted in:		
	The organization's facility	13a	%
	An outside facility		%
	Enter the name and address of the person who prepares the organization's gaming/special events books and records:		
	Name		
	Address		
	Address		
150	Does the organization have a contract with a third party from whom the organization receives gaming revenue?	Yes	No
IJa	Does the organization have a contract with a tillid party from whom the organization receives gaming revenue?	163	110
L	of "Yes," enter the amount of gaming revenue received by the organization \$ and the amount		
L			
	of gaming revenue retained by the third party \$		
С	If "Yes," enter name and address of the third party:		
	Name		
	Address		
16	Gaming manager information:		
	Name		
	Gaming manager compensation \$		
	Description of services provided		
	Director/officer Employee Independent contractor		
17	Mandatory distributions:		
	Is the organization required under state law to make charitable distributions from the gaming proceeds to		
	retain the state gaming license?	Yes	☐ No
b	• Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the		
	organization's own exempt activities during the tax year \$		
Pa	rt IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and	Part III. lines 9. 9	9b. 10b.
	15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.	a ,	, ,
	, . ee, . e, and e, an approximation for provide any additional information, does not decident.		



SCHEDULE L

Department of the Treasury Internal Revenue Service

(Form 990)

Transactions With Interested Persons

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c; or Form 990-EZ, Part V, line 38a or 40b.

Attach to Form 990 or Form 990-EZ.

Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

			F THE RI								002	10		
Part I Excess B	enefit Trans	sactio	ons (section 50)1(c)(3), secti	on 501(c)(4), and sec	ction	n 501(c)(29) orgar	nizatio	ns on	y)			
Complete if	the organization					urt IV, line 25a or 25b	; or	Form 990-EZ, Pa	art V, I	ne 40	b.			
(a) Name of disqualified person			(b) Relationship between disqualified person and organization			ified (c	:) De	escription of trans	sactio	n		(d) Corrected		
(1)			,	J								1	28	No
(2)													\neg	
(3)													\neg	
(4)														
(5)														
(6)														
2 Enter the amount of section 4958	-		-	-		ualified persons duri	-	-		\$				
3 Enter the amount of														
	, , ,	, -		,		,				т				
Part II Loans to	and/or Fron	n Inte	erested Pers	ons										
Complete if	the organization	n answ	ered "Yes" on F	orm 9	990-EZ,	Part V, line 38a, or l	Forn	n 990, Part IV, lin	e 26;	or if th	ie orga	nizatio	on	
reported an	amount on For	m 990,	Part X, line 5, 6	, or 2	2.									
(a) Name of interested person	(b) Relation		(c) Purpose of loan	fror	oan to or n the ization?	(e) Original principal amount	(f	i) Balance due	(g) defa	In ult?	(h) Ap by bo comm	ard or	I (') **	ritten ment?
				То	From				Yes	No	Yes	No	Yes	No
(1)														
(2)														
(3)														
(4)														
(5)														
_(6)														
(7)				_										_
(8)				-										_
(9)														-
(10) Tabal						Φ.								
Total Grants or	Assistance	Ben	efiting Inter	este	d Per	\$ sons								
			ered "Yes" on F											
(a) Name of interes			b) Relationship interested pers the organiza	betwe	en	(c) Amount of assistance		(d) Type assistand			•) Purp assista		F
(1)														
(2)														
(3)														
(4)														
(5)														
(6)		+								\perp				
(7)		+								_				
(8)		+								_				
(9)		+								_				
(10)	m Aat Natia		a luadou ratione d	0 F	000) or 000 E7				Cala -	dulo I	/F	- 000	1 0000

Schedule L (Form 990) 2023

Complete if the organization answerd Yest on Form 930, Part IV, Ine 28a, 28b, or 28c. (a) Name of interested person (b) Relationship between interested (c) Amount of transaction transaction organization person and the organization transaction transaction transaction organization transaction organization transaction organization organization transaction organization organization transaction organization o	Part IV Business Transactions Involv					
(a) revenues? (b) retransaction person and the organization transaction transaction transaction transaction organization's revenues? (c) reson and the organization transaction transaction transaction transaction organization's revenues? (d) revenues? (e) revenues? (f) revenues? (f) revenues? (g) revenues? (h) RENTAL OF S				Т	(a) Cha	vina of
(1)CHARLIE CENTER DIRECTOR 4,024.RENTAL OF S X (2) (3) (4) (5) (6) (7) (8) (9) (10) Part V Supplemental Information Provide additional information for responses to questions on Schedule L. See instructions. SCH L, PART IV, BUSINESS TRANSACTIONS INVOLVING INTERESTED PERSONS: (A) NAME OF PERSON: CHARLIE CENTER	(a) Name of interested person			(d) Description of transaction	organiz	ation's
(2) (3) (4) (5) (6) (7) (8) (9) (10) Part V Supplemental Information Provide additional information for responses to questions on Schedule L. See instructions. SCH L, PART IV, BUSINESS TRANSACTIONS INVOLVING INTERESTED PERSONS: (A) NAME OF PERSON: CHARLIE CENTER					Yes	
(3) (4) (5) (6) (7) (8) (9) (10) Part V Supplemental Information Provide additional information for responses to questions on Schedule L. See instructions. SCH L, PART IV, BUSINESS TRANSACTIONS INVOLVING INTERESTED PERSONS: (A) NAME OF PERSON: CHARLIE CENTER		DIRECTOR	4,024.	RENTAL OF S		X
(4) (5) (6) (7) (8) (9) (10) Part V Supplemental Information Provide additional information for responses to questions on Schedule L. See instructions. SCH L, PART IV, BUSINESS TRANSACTIONS INVOLVING INTERESTED PERSONS: (A) NAME OF PERSON: CHARLIE CENTER						
(5) (6) (7) (8) (9) (10) Part V Supplemental Information Provide additional information for responses to questions on Schedule L. See instructions. SCH L, PART IV, BUSINESS TRANSACTIONS INVOLVING INTERESTED PERSONS: (A) NAME OF PERSON: CHARLIE CENTER						
(6) (7) (8) (9) (10) Part V Supplemental Information Provide additional information for responses to questions on Schedule L. See instructions. SCH L, PART IV, BUSINESS TRANSACTIONS INVOLVING INTERESTED PERSONS: (A) NAME OF PERSON: CHARLIE CENTER						
(7) (8) (9) (10) Part V Supplemental Information Provide additional information for responses to questions on Schedule L. See instructions. SCH L, PART IV, BUSINESS TRANSACTIONS INVOLVING INTERESTED PERSONS: (A) NAME OF PERSON: CHARLIE CENTER						
(8) (9) (10) Part V Supplemental Information Provide additional information for responses to questions on Schedule L. See instructions. SCH L, PART IV, BUSINESS TRANSACTIONS INVOLVING INTERESTED PERSONS: (A) NAME OF PERSON: CHARLIE CENTER						
(9) (10) Part V Supplemental Information Provide additional information for responses to questions on Schedule L. See instructions. SCH L, PART IV, BUSINESS TRANSACTIONS INVOLVING INTERESTED PERSONS: (A) NAME OF PERSON: CHARLIE CENTER						
Part V Supplemental Information Provide additional information for responses to questions on Schedule L. See instructions. SCH L, PART IV, BUSINESS TRANSACTIONS INVOLVING INTERESTED PERSONS: (A) NAME OF PERSON: CHARLIE CENTER						
Provide additional information for responses to questions on Schedule L. See instructions. SCH L, PART IV, BUSINESS TRANSACTIONS INVOLVING INTERESTED PERSONS: (A) NAME OF PERSON: CHARLIE CENTER	(10)					
SCH L, PART IV, BUSINESS TRANSACTIONS INVOLVING INTERESTED PERSONS: (A) NAME OF PERSON: CHARLIE CENTER						
(A) NAME OF PERSON: CHARLIE CENTER	Provide additional information for response	onses to questions on Schedule L. See i	nstructions.			
(A) NAME OF PERSON: CHARLIE CENTER	SCH L, PART IV, BUSINESS T	RANSACTIONS INVOLVIN	G INTERESTE	D PERSONS:		
(D) DESCRIPTION OF TRANSACTION: RENTAL OF STORAGE SHED AND EVENT SPACE					~=	
	(D) DESCRIPTION OF TRANSACT	TION: RENTAL OF STOR.	AGE SHED AN	D EVENT SPA	CE	

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047

Open to Public

Department of the Treasury Internal Revenue Service

Name of the organization

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

Go to www.irs.gov/Form990 for instructions and the latest information.

Inspection **Employer identification number**

	FRIENDS OF T	HE KIV	ER FOUNDA:	LION	94-2	4002	7 T U	
Pa	rt I Types of Property				·			
		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of de noncash contribu	etermini	•	3
1	Art - Works of art							
2	Art - Historical treasures							
3	Art - Fractional interests							
4	Books and publications							
5	Clothing and household goods							
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property							
9	Securities - Publicly traded	X	1	4,073.	FM7/			
10	Securities - Closely held stock		_	2/0/00				
11	Securities - Closely field stock Securities - Partnership, LLC, or							
"								
40	trust interests							
12 13	Securities - Miscellaneous Qualified conservation contribution -							
13								
44	Historic structures Qualified conservation contribution - Other							
14								
15	Real estate - Residential							
16	Real estate - Commercial							
17	Real estate - Other							
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies							
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts	<u> </u>		24 225				
25	Other (<u>VARIOUS ITEMS</u>)	X	61	34,236.	F'M∨			
26	Other ()							
27	Other ()							
28	Other (
29	Number of Forms 8283 received by the organization	•	•					
	for which the organization completed Form 82	83, Part V, D	onee Acknowledg	ement 29				
						\Box	Yes	No
30a	During the year, did the organization receive by	y contributio	n any property rep	orted in Part I, lines 1 throug	h 28, that it			
	must hold for at least 3 years from the date of	the initial co	ntribution, and whi	ch isn't required to be used	for			
	exempt purposes for the entire holding period?	?				30a		X
b	If "Yes," describe the arrangement in Part II.							
31	Does the organization have a gift acceptance p	policy that re	quires the review o	of any nonstandard contribut	ions?	31		X
32a	Does the organization hire or use third parties	or related or	ganizations to solid	cit, process, or sell noncash				
	contributions?					32a		Х
b	If "Yes," describe in Part II.							
33	If the organization didn't report an amount in c	olumn (c) for	a type of property	for which column (a) is chec	cked,			
	describe in Part II.		•					

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule M (Form 990) 2023

332142 09-11-23

SCHEDULE O (Form 990)

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 Form 990-EZ.

Go to www.irs.gov/Form990 for the latest information.

2023
Open to Public Inspection

Name of the organization

FRIENDS OF THE RIVER FOUNDATION

Employer identification number 94-2400210

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
INSPIRING CITIZEN ACTION.
FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:
(SRG), WHICH IS A MULTI-STAKEHOLDER COALITION THAT WORKS ON RESERVOIR
PROJECTS. FRIENDS OF THE RIVER LED COORDINATION OF A COALITION OF
ENVIRONMENTAL NON-PROFIT ORGANIZATIONS AND CALIFORNIA TRIBES IN THE
SITES RESERVOIR WATER RIGHTS PROCEEDINGS. OTHER NOTABLE PROJECTS
INCLUDE THE PROPOSED DEL PUERTO CANYON DAM, AND THE SHASTA DAM RAISE.
FRIENDS OF THE RIVER ORGANIZED ALLIED ORGANIZATIONS, ENGAGED IN
CONSTRUCTIVE COMMENTING AND FEEDBACK TO THE ACCOUNTABLE REGULATORY
AGENCIES, AND GENERATED EARNED MEDIA TO EDUCATE THE PUBLIC. FOR ALSO
SUBMITTED FORMAL WATER RIGHTS PROTESTS FOR THE PROPOSED DELTA TUNNEL,
WHICH WOULD FACILITATE MORE WATER EXPORTS FROM THE CRASHING DELTA
ECOSYSTEM.
PROMOTING HYDROPOWER POLICY AND OPERATIONAL REFORM.
DAMS WITH HYDROPOWER PROJECTS CAN HAVE A TREMENDOUS NEGATIVE
ENVIRONMENTAL IMPACT ON RIVERS. THESE HYDROPOWER PROJECTS ARE
RELICENSED ONCE A GENERATION, EVERY 30 TO 50 YEARS. FRIENDS OF THE
RIVER WORKED ON A NUMBER OF RELEVANT HYDROPOWER AND PUMPED STORAGE
HYDROPOWER PROJECT RELICENSING PROCEEDINGS, AS WELL AS HYDROPOWER
POLICY AND LEGAL ISSUES TO PROTECT, ENHANCE, AND RESTORE CALIFORNIA'S
RIVERS, WATERSHEDS, AND COMMUNITIES AFFECTED BY HYDROPOWER OPERATIONS.
MUCH OF THE WORK IN 2023 WAS DEDICATED TO TRACKING AND CONTRIBUTING TO

Schedule O (Form 990) 2023

332211 11-14-23

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

Schedule O (Form 990) 2023 Page 2

Name of the organization FRIENDS OF THE RIVER FOUNDATION Employer identification number 94-2400210

THE RESPONSE TO THE INTENSIFYING CLEAN WATER ACT SECTION 401 WAIVER

ISSUE THROUGHOUT CALIFORNIA, INCLUDING CONTINUING LITIGATION

CHALLENGING THE FEDERAL ENERGY REGULATORY COMMISSION'S WAIVER OF

SECTION 401 ON HYDROPOWER PROJECTS IN THE YUBA AND MERCED RIVER

WATERSHEDS. FRIENDS OF THE RIVER ALSO PROVIDED LEADERSHIP ON PRIORITY

PROJECTS SUCH AS OROVILLE DAM OPERATIONS AND FLOOD SAFETY ON THE

FEATHER RIVER AND NARROWS 1 ON THE YUBA RIVER.

PROMOTING SUSTAINABLE WATER SOLUTIONS FOR CLIMATE CHANGE.

HEALTHY RIVERS ARE CRITICAL FOR CLIMATE RESILIENCE. CLIMATE CHANGE IS BRINGING INCREASED DROUGHT AND FLOOD TO CALIFORNIA. HEALTHY RIVERS, WITH NATURE-BASED MULTI-BENEFIT FLOOD PLAINS CAN PROVIDE BENEFITS FOR BOTH DROUGHT AND FLOOD, BY STORING FLOOD WATERS AND RECHARGING GROUNDWATER. NATURAL RIVER FLOWS SUPPORT THE MOVEMENT OF PLANTS AND ANIMALS UP AND DOWN THE WATERSHED, PROVIDING RELIEF FROM DROUGHT, FLOOD, DISEASE, AND INVASIVE SPECIES, AS WELL AS PROMOTING A RIPARIAN ENVIRONMENT TO PROVIDE REFUGE FROM EXTREME HEAT AND COMBAT WILDFIRE RISK. FOR DEVOTES SIGNIFICANT TIME AND EFFORT TO (1) EDUCATING THE PUBLIC ABOUT THE IMPORTANCE OF HEALTHY RIVERS, (2) POLICY ANALYSIS, AND (3) ENGAGING IN CONSTRUCTIVE PUBLIC COMMENTING TO RESTORE ENVIRONMENTAL FLOWS TO CALIFORNIA RIVERS. WINTER 2023 WAS UNUSUALLY WET FOR CALIFORNIA, SO FOR FOCUSED SOME OF ITS COMMUNICATION AND EDUCATION EFFORTS ON THE IMPORTANCE OF NATURE-BASED FLOOD MANAGEMENT AND GIVING RIVERS ROOM. FOR ALSO INFORMED THE PUBLIC ABOUT DRY RIVERS LIKE THE SCOTT AND SHASTA RIVERS.

BUILDING PUBLIC SUPPORT FOR RIVERS.

Schedule O (Form 990) 2023 Page 2

Name of the organization FRIENDS OF THE RIVER FOUNDATION

Employer identification number 94-2400210

CANOE PROGRAMS. THESE PROGRAMS WERE DRASTICALLY REDUCED DUE TO SAFETY

CONCERNS FROM THE COVID-19 PANDEMIC. IN LATE 2022, FOR BEGAN TO REBUILD

ITS RAFTING PROGRAM. IN 2023, FOR HOSTED A GUIDE-ACTIVIST TRAINING, IN

WHICH PARTICIPANTS LEARNED TO GUIDE WHITEWATER RAFTS AS WELL AS RIVER

ACTIVISM SKILLS. THE TRAINING IS INTENDED TO BUILD THE NEXT GENERATION

OF RIVER ADVOCATES. FOR PROVIDED DEI SCHOLARSHIPS TO REMOVE BARRIERS

FOR SOME PARTICIPANTS. ADDITIONALLY, FOR HOSTED RIVER TRIPS TO SUPPORT

LOCAL NATIVE TRIBES IN RECONNECTING TRIBAL MEMBERS AND YOUTH TO THEIR

ANCESTRAL WATERS. FOR ALSO HOSTED TRIPS FOR OTHER NONPROFIT

ORGANIZATIONS TO FURTHER REDUCE BARRIERS TO OUTDOOR RIVER RECREATION.

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

THE FORM 990 IS REVIEWED BY BOARD OF DIRECTORS' FINANCE COMMITTEE AND EXECUTIVE DIRECTOR. THE FILING IS SIGNED BY THE BOARD TREASURER.

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

PRIOR TO APPROVING THE TRANSACTIONS, THE BOARD CONSIDERS AND IN GOOD FAITH

DETERMINES AFTER REASONABLE INVESTIGATION UNDER THE CIRCUMSTANCES THAT THE

CORPORATION COULD NOT OBTAIN A MORE ADVANTAGEOUS ARRANGEMENT WITH

REASONABLE EFFORT UNDER THE CIRCUMSTANCES, AND THIS CORPORATION ENTERS INTO

THE TRANSACTION FOR ITS OWN BENEFIT AND THE TRANSACTION IS FAIR AND

REASONABLE TO THE CORPORATION AT THE TIME THE TRANSACTIONS IS ENTERED INTO.

FORM 990, PART VI, SECTION B, LINE 15:

COMPENSATION IS APPROVED BY THE EXECUTIVE DIRECTOR AND CONFIRMED BY THE BOARD OF DIRECTORS.

Schedule O (Form 990) 2023 Page **2**

Schedule O (Form 990) 2023	Page 2
Name of the organization FRIENDS OF THE RIVER FOUNDATION	Employer identification number 94-2400210
FORM 990, PART VI, SECTION C, LINE 19:	
OUR AUDITED FINANCIALS ARE ALSO AVAILABLE ON THE WEBSITE.	
FORM 990, PART IX, LINE 11G, OTHER FEES:	
CONTRACT SERVICES:	
PROGRAM SERVICE EXPENSES	84,839.
MANAGEMENT AND GENERAL EXPENSES	23,154.
FUNDRAISING EXPENSES	25,604.
TOTAL EXPENSES	133,597.
PAYROLL FEES:	
PROGRAM SERVICE EXPENSES	2,177.
MANAGEMENT AND GENERAL EXPENSES	973.
FUNDRAISING EXPENSES	11,410.
TOTAL EXPENSES	14,560.
TOTAL OTHER FEES ON FORM 990, PART IX, LINE 11G, COL A	148,157.
FORM 990, PART XII, LINE 2C:	
THE FINANCE COMMITTEE REVIEWS THE AUDIT BUT DOES NOT CHOSE	THE
ACCOUNTANT.	