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Form 990  Department of the Treasury Internal Revenue Service	Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation) ▶ The organization may have to use a copy of this return to satisfy state reporting requirements	OMB No 1545-0047
		2010
		Open to Public Inspection

A For the 2010 calendar year, or tax year beginning 10-01-2010 and ending 09-30-2011		
B Check if applicable <input checked="" type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization READING IS FUNDAMENTAL INC	D Employer identification number 52-0976257
	Doing Business As	E Telephone number (202) 536-3400
	Number and street (or P O box if mail is not delivered to street address) 1730 RHODE ISLAND AVE NW 11TH FL	Room/suite
	City or town, state or country, and ZIP + 4 WASHINGTON, DC 20036	
	F Name and address of principal officer CAROL HAMPTON RASCO 1730 RHODE ISLAND AVE NW 11TH FL WASHINGTON,DC 20036	
H(a) Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
H(b) Are all affiliates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list (see instructions)		
H(c) Group exemption number ▶		
I Tax-exempt status <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () ◀ (Insert no) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		
J Website: ▶ WWW.RIF.ORG		
K Form of organization <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶		L Year of formation 1973
		M State of legal domicile DC

Part I	Summary
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Activities & Governance	1 Briefly describe the organization's mission or most significant activities MOTIVATING CHILDREN TO READ BY MAKING READING A FUN AND BENEFICIAL PART OF EVERYDAY LIFE		
	2 Check this box <input checked="" type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets		
	3 Number of voting members of the governing body (Part VI, line 1a)	3	27
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	27
	5 Total number of individuals employed in calendar year 2010 (Part V, line 2a)	5	86
6 Total number of volunteers (estimate if necessary)	6	450,027	
	7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	113,928
	b Net unrelated business taxable income from Form 990-T, line 34	7b	13,217
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	9 Program service revenue (Part VIII, line 2g)	30,961,457	35,834,041
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	3,567	2,436
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	456,981	425,831
	12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	199,317	233,530
		31,621,322	36,495,838
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1–3)	0	514,326
	14 Benefits paid to or for members (Part IX, column (A), line 4)	0	0
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	5,471,889	4,658,804
	16a Professional fundraising fees (Part IX, column (A), line 11e)	55,408	61,763
	b Total fundraising expenses (Part IX, column (D), line 25) ▶1,146,096		
	17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24f)	26,728,839	28,705,579
	18 Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	32,256,136	33,940,472
	19 Revenue less expenses Subtract line 18 from line 12	-634,814	2,555,366
Net Assets or Fund Balances		Beginning of Current Year	End of Year
	20 Total assets (Part X, line 16)	15,756,184	21,215,983
	21 Total liabilities (Part X, line 26)	3,436,360	6,340,793
	22 Net assets or fund balances Subtract line 21 from line 20	12,319,824	14,875,190

Part II	Signature Block
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Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here	*****	2012-08-14	
	Signature of officer	Date	
Paid Preparer Use Only	CAROL HAMPTON RASCO PRESIDENT AND CEO		
	Type or print name and title		
	Print/Type preparer's name FRANK H SMITH	Preparer's signature FRANK H SMITH	Date 2012-08-14
Paid Preparer Use Only	Firm's name ▶ RAFFA PC	Check if self-employed <input type="checkbox"/>	PTIN
	Firm's address ▶ 1899 STREET NW SUITE 900		Firm's EIN ▶
	WASHINGTON, DC 20009		Phone no ▶ (202) 822-5000

May the IRS discuss this return with the preparer shown above? (see instructions) ☒ Yes ☐ No

Part III

Statement of Program Service Accomplishments

Check if Schedule O contains a response to any question in this Part III

☐

☒

1

Briefly describe the organization's mission

THE VISION OF READING IS FUNDAMENTAL, INC (RIF) IS A LITERATE AMERICA IN WHICH ALL CHILDREN HAVE ACCESS TO BOOKS AND DISCOVER THE JOYS AND VALUE OF READING FOUNDED IN 1966, RIF MOTIVATES CHILDREN TO READ BY WORKING WITH THEM, THEIR PARENTS, AND COMMUNITY MEMBERS TO MAKE READING A FUN AND BENEFICIAL PART OF EVERYDAY LIFE RIF'S HIGHEST PRIORITY IS REACHING UNDERSERVED CHILDREN FROM BIRTH TO AGE 8 THROUGH COMMUNITY VOLUNTEERS IN EVERY STATE AND U S TERRITORY, RIF PROVIDES 4 3 MILLION CHILDREN WITH 15 3 MILLION NEW, FREE BOOKS AND LITERACY RESOURCES EACH YEAR

2

Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?

☐ Yes ☒ No

If "Yes," describe these new services on Schedule O

3

Did the organization cease conducting, or make significant changes in how it conducts, any program services?

☐ Yes ☒ No

If "Yes," describe these changes on Schedule O

4

Describe the exempt purpose achievements for each of the organization's three largest program services by expenses

Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts 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 \$ 27,136,596 including grants of \$ 514,326) (Revenue \$)
	BOOKS FOR OWNERSHIP RIF'S LARGEST PROGRAM SERVICE IS BOOKS FOR OWNERSHIP (BFO) A "LOCAL RIF PROGRAM" THAT OPERATES THE BFO SERVICE CONDUCTS BETWEEN TWO AND FIVE BOOK DISTRIBUTIONS PER YEAR WHERE THE PARTICIPATING CHILDREN EACH SELECT A BOOK TO KEEP EACH BOOK DISTRIBUTION ALSO INCLUDES MOTIVATIONAL ACTIVITIES DESIGNED TO ENCOURAGE THE PARTICIPATING CHILDREN TO READ FOR PLEASURE MOST "LOCAL RIF PROGRAMS" THAT CONDUCT THE BFO SERVICE RECEIVE FUNDS FROM RIF'S "INEXPENSIVE BOOK DISTRIBUTION PROGRAM (IBDP)" CONTRACT WITH THE U S DEPARTMENT OF EDUCATION (EDUCATION) RIF HAS CONTRACTED WITH EDUCATION TO OPERATE THE IBDP SINCE 1976 UNDER THE IBDP, INDIVIDUAL LOCAL RIF PROGRAMS ORDER INEXPENSIVE BOOKS FROM A LIST OF APPROXIMATELY 140 APPROVED BOOK SUPPLIERS THE LOCAL PROGRAM SUBMITS A CONTRACTUALLY SPECIFIED AMOUNT OF LOCALLY RAISED FUNDS DIRECTLY TO THE BOOK SUPPLIERS AND THEN SUBMITS THE INVOICE TO RIF AFTER RIF CONFIRMS WITH THE BOOK SUPPLIERS THAT THE LOCAL FUNDS HAVE BEEN PAID, RIF THEN REMITS THE BALANCE OF THE INVOICE TO THE BOOK SUPPLIERS FORM FEDERAL FUNDS IT HAS DRAWN DOWN RIF ALSO RECEIVES CONTRIBUTIONS FROM NON-GOVERNMENT DONORS TO FUND THE BFO SERVICE AT LOCAL RIF PROGRAMS

4b	(Code) (Expenses \$ 1,474,020 including grants of \$) (Revenue \$)
	CORPORATE PROJECTS RIF CONDUCTS MULTI DISCIPLINARY MAJOR PROJECTS THAT ARE TAILORED TO THE SPECIFIC NEEDS OF INDIVIDUAL COMMUNITIES THESE PROJECTS COMBINE DISTRIBUTION OF BOOKS TO CHILDREN SIMILAR TO THE BFO SERVICE ALONG WITH ELEMENTS OF OTHER RIF PROGRAM SERVICES A MULTI-DISCIPLINARY PROJECT IS USUALLY FUNDED BY A SINGLE DONOR



















4c	(Code) (Expenses \$ 311,383 including grants of \$) (Revenue \$ 2,462)
	LITERACY SERVICES RIF'S LITERACY SERVICES INCLUDE BOTH FAMILY LITERACY AND COMMUNITY EDUCATION FAMILY LITERACY ACTIVITIES ARE DESIGNED TO HELP PARENTS TAKE A LEADING ROLE IN ENCOURAGING THEIR CHILDREN'S LITERACY DEVELOPMENT WITH THE GUIDANCE OF RIF VOLUNTEERS, PARENTS PARTICIPATE IN WORKSHOPS, CREATE AND IMPLEMENT ACTIVITIES TO ENHANCE LITERACY DEVELOPMENT, AND ATTEND FAMILY LITERACY NIGHTS CERTAIN FAMILY LITERACY PROGRAMS AND ACTIVITIES SPECIFICALLY TARGET TEENAGE PARENTS RIF CONDUCTS COMMUNITY TRAINING PROGRAMS FOR PROFESSIONALS IN THE EARLY CHILDHOOD COMMUNITY THIS TRAINING IS DESIGNED TO SUPPORT CHILDREN'S EMERGENT LITERACY SKILLS THE TRAINING IS DONE THROUGH A "TRAIN THE TRAINER" MODEL THAT PREPARES PARTICIPANTS TO RETURN TO THEIR COMMUNITIES AND DELIVER THE TRAINING TO THEIR COLLEAGUES AND COMMUNITIES

4d	Other program services (Describe in Schedule O) See also Additional Data for Description
	(Expenses \$ 320,438 including grants of \$) (Revenue \$)

4e	Total program service expenses \$ 29,242,437
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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)? <i>If "Yes," complete Schedule A.</i> 	1	Yes
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instruction)? 	2	Yes
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I.</i>	3	No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II.</i>	4	No
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III.</i>	5	No
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I.</i> 	6	No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? <i>If "Yes," complete Schedule D, Part II.</i> 	7	No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III.</i> 	8	No
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV.</i> 	9	No
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V.</i> 	10	Yes
11	If the organization's answer to any of the following questions is 'Yes,' then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable		
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI.</i> 	11a	Yes
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII.</i> 	11b	No
c	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII.</i> 	11c	No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX.</i> 	11d	No
e	Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X.</i> 	11e	Yes
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X.</i> 	11f	Yes
12a	Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI, XII, and XIII.</i> 	12a	Yes
b	Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional.</i> 	12b	No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E.</i>	13	No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? <i>If "Yes," complete Schedule F, Parts I and IV.</i>	14b	No
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the U S ? <i>If "Yes," complete Schedule F, Parts II and IV.</i>	15	No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the U S ? <i>If "Yes," complete Schedule F, Parts III and IV.</i>	16	No
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? <i>If "Yes," complete Schedule G, Part I (see instructions).</i> 	17	Yes
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II.</i> 	18	Yes
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III.</i> 	19	No
20a	Did the organization operate one or more hospitals? <i>If "Yes," complete Schedule H.</i>	20a	No
b	If "Yes" to line 20a, did the organization attach its audited financial statement to this return? Note. Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)	20b	

Part IV

Checklist of Required Schedules (continued)

21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	21	Yes	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>	22		No
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b–24d and complete Schedule K. If "No," go to line 25</i>	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>	25b		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? <i>If "Yes," complete Schedule L, Part II</i>	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? <i>If "Yes," complete Schedule L, Part III</i>	27		No
28	Was the organization a party to a business transaction with one of the following parties? (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
a	A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28b		No
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33		No
34	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1</i>	34		No
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	35		No
a	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	

<div>Part V</div>			Statements Regarding Other IRS Filings and Tax Compliance		
Check if Schedule O contains a response to any question in this Part V					
			Yes	No	
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable.		1a	41	
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.		1b	0	
c. Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?			1c	Yes	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements filed for the calendar year ending with or within the year covered by this return.		2a	86	
b. If at least one is reported on line 2a, did the organization file all required federal employment tax returns?			2b	Yes	
Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions).					
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?		3a	Yes	
b. If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O.			3b	Yes	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?		4a		No
b. If "Yes," enter the name of the foreign country: See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.					
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5a		No
b. Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			5b		No
c. If "Yes" to line 5a or 5b, did the organization file Form 8886-T?			5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?		6a		No
b. If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?			6b		
7. Organizations that may receive deductible contributions under section 170(c).					
a. Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?			7a	Yes	
b. If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b	Yes	
c. Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?			7c		No
d. If "Yes," indicate the number of Forms 8282 filed during the year.			7d		
e. Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?			7e		No
f. Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?			7f		No
g. If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?			7g		
h. If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?			7h		
8. Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?			8		
9. Sponsoring organizations maintaining donor advised funds.					
a. Did the organization make any taxable distributions under section 4966?			9a		
b. Did the organization make a distribution to a donor, donor advisor, or related person?			9b		
10. Section 501(c)(7) organizations. Enter					
a. 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					
a. Gross income from members or shareholders.			11a		
b. Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them).			11b		
12a. Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?			12a		
b. If "Yes," enter the amount of tax-exempt interest received or accrued during the year.			12b		
13. Section 501(c)(29) qualified nonprofit health insurance issuers.					
a. Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O.			13a		
b. Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans.			13b		
c. Enter the amount of reserves on hand.			13c		
14a. Did the organization receive any payments for indoor tanning services during the tax year?			14a		No
b. If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.			14b		

Part VI

Governance, Management, and Disclosure

For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.
Check if Schedule O contains a response to any question in this Part VI

Section A. Governing Body and Management

		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year		
1b	Enter the number of voting members included in line 1a, above, who are independent		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		No
6	Does the organization have members or stockholders?		No
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?		No
7b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following		
8a	The governing body?	Yes	
8b	Each committee with authority to act on behalf of the governing body?	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O		No

Section B. Policies

(This Section B requests information about policies not required by the Internal Revenue Code.)

		Yes	No
10a	Does the organization have local chapters, branches, or affiliates?		No
10b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?		
11a	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	Yes	
11b	Describe in Schedule O the process, if any, used by the organization to review this Form 990		
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	Yes	
12b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	Yes	
12c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	Yes	
13	Does the organization have a written whistleblower policy?	Yes	
14	Does the organization have a written document retention and destruction policy?	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
15a	The organization's CEO, Executive Director, or top management official	Yes	
15b	Other officers or key employees of the organization	Yes	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (See instructions)		
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		No
16b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?		

Section C. Disclosure

17	List the States with which a copy of this Form 990 is required to be filed	AL, AK, AR, CA, CT, FL, GA, HI, IL, IN, KS, KY, ME, MD, MA, MI, MN, MS, NH, NJ, NM, NY, NC, ND, OH, OK, OR, PA, RI, SC, TN, UT, VA, WA, WI
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply. <input checked="" type="checkbox"/> Own website <input type="checkbox"/> Another's website <input checked="" type="checkbox"/> Upon request	
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public. See Additional Data Table.	
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization.	ROMEO FERRUFINO 1255 23RD STREET NW SUITE 300 WASHINGTON, DC 20037 (202) 536-3400

Check if Schedule O contains a response to any question in this Part VII ☐

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

Form **990** (2010)

Part VII

(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
See Additional Data Table										
1b Sub-Total										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)								818,138	0	68,598

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization: 5

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

Section B. Independent Contractors

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

(A)	(B)	(C)
Name and business address	Description of services	Compensation

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization ►0

Part VIII

Statement of Revenue

					(A)	(B)	(C)	(D)
					Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts	1a Federated campaigns 1a							
	b Membership dues 1b							
	c Fundraising events 1c				427,750			
	d Related organizations 1d							
	e Government grants (contributions) 1e				28,236,639			
	f All other contributions, gifts, grants, and similar amounts not included above 1f				7,169,652			
	g Noncash contributions included in lines 1a-1f \$				4,403			
	h Total. Add lines 1a-1f ▶				35,834,041			
	Program Service Revenue					Business Code		
2a TRAINING PROGRAMS				900099	2,436	2,436		
b								
c								
d								
e								
f All other program service revenue								
g Total. Add lines 2a-2f ▶				2,436				
Other Revenue		3 Investment income (including dividends, interest and other similar amounts) ▶					115,252	
	4 Income from investment of tax-exempt bond proceeds . . ▶							
	5 Royalties ▶					172,315		172,315
					(i) Real	(ii) Personal		
	6a Gross Rents							
	b Less rental expenses							
	c Rental income or (loss)							
	d Net rental income or (loss) ▶							
					(i) Securities	(ii) Other		
	7a Gross amount from sales of assets other than inventory				13,956,921			
	b Less cost or other basis and sales expenses				13,646,342			
	c Gain or (loss)				310,579			
	d Net gain or (loss) ▶					310,579		310,579
	8a Gross income from fundraising events (not including \$ 427,750 of contributions reported on line 1c) See Part IV, line 18 a				41,250			
	b Less direct expenses b				93,989			
	c Net income or (loss) from fundraising events . . ▶					-52,739		-52,739
	9a Gross income from gaming activities See Part IV, line 19 . . a							
	b Less direct expenses b							
	c Net income or (loss) from gaming activities . . ▶							
	10a Gross sales of inventory, less returns and allowances a							
b Less cost of goods sold b								
c Net income or (loss) from sales of inventory . . ▶								
Miscellaneous Revenue				Business Code				
11a PROMOTIONAL REVENUE				900099	110,000		110,000	
b ON-LINE STORE				454110	3,928		3,928	
c OTHER REVENUE				900099	26		26	
d All other revenue								
e Total. Add lines 11a-11d ▶					113,954			
12 Total revenue. See Instructions ▶					36,495,838	2,436	113,928	545,433

Part IX

Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.		(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the U S See Part IV, line 21	514,326	514,326		
2	Grants and other assistance to individuals in the U S See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the U S See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	553,116	59,026	300,169	193,921
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	3,408,824	2,017,653	1,038,180	352,991
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	136,631	80,752	43,364	12,515
9	Other employee benefits	239,987	142,087	73,131	24,769
10	Payroll taxes	320,246	169,737	107,387	43,122
a	Fees for services (non-employees)				
	Management				
b	Legal	50,842		50,842	
c	Accounting	60,042		60,042	
d	Lobbying				
e	Professional fundraising services See Part IV, line 17	61,763			61,763
f	Investment management fees	13,769		13,769	
g	Other	1,440,866	773,231	389,638	277,997
12	Advertising and promotion	18,135		18,135	
13	Office expenses	291,639	177,392	44,281	69,966
14	Information technology	61,990		61,990	
15	Royalties				
16	Occupancy	799,539		799,539	
17	Travel	367,210	309,801	36,257	21,152
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	495,611	45,101	450,510	
23	Insurance	35,034		35,034	
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24f If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O)				
a	BOOKS-LOCAL RIF PRGMS	24,837,130	24,837,130		
b	PRINTING & REPRODUCTION	223,772	116,201	19,671	87,900
c	BAD DEBT EXPENSE	10,000		10,000	
d					
e					
f	All other expenses				
25	Total functional expenses. Add lines 1 through 24f	33,940,472	29,242,437	3,551,939	1,146,096
26	Joint costs. Check here <input checked="" type="checkbox"/> if following SOP 98-2 (ASC 958-720) Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X

Balance Sheet

					(A)		(B)
					Beginning of year		End of year
Assets	1	Cash—non-interest-bearing			10,169	1	22,191
	2	Savings and temporary cash investments			7,342,086	2	13,499,360
	3	Pledges and grants receivable, net			1,486,036	3	5,972,505
	4	Accounts receivable, net			38,709	4	15
	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L				5	
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers, and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Schedule L				6	
	7	Notes and loans receivable, net				7	
	8	Inventories for sale or use				8	
	9	Prepaid expenses and deferred charges			93,042	9	234,012
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a	3,673,758			
	b	Less: accumulated depreciation	10b	2,188,310	1,813,683	10c	1,485,448
	11	Investments—publicly traded securities			4,921,864	11	0
	12	Investments—other securities. See Part IV, line 11				12	
	13	Investments—program-related. See Part IV, line 11				13	
	14	Intangible assets				14	
	15	Other assets. See Part IV, line 11			50,595	15	2,452
	16	Total assets. Add lines 1 through 15 (must equal line 34)			15,756,184	16	21,215,983
Liabilities	17	Accounts payable and accrued expenses			1,149,818	17	3,876,365
	18	Grants payable				18	
	19	Deferred revenue			1,100,000	19	1,100,000
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D				21	
	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L				22	
	23	Secured mortgages and notes payable to unrelated third parties				23	
	24	Unsecured notes and loans payable to unrelated third parties				24	
	25	Other liabilities. Complete Part X of Schedule D			1,186,542	25	1,364,428
	26	Total liabilities. Add lines 17 through 25			3,436,360	26	6,340,793
Net Assets or Fund Balances		Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.					
	27	Unrestricted net assets			4,202,536	27	5,408,747
	28	Temporarily restricted net assets			7,619,871	28	8,824,833
	29	Permanently restricted net assets			497,417	29	641,610
		Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34.					
	30	Capital stock or trust principal, or current funds				30	
	31	Paid-in or capital surplus, or land, building or equipment fund				31	
	32	Retained earnings, endowment, accumulated income, or other funds				32	
	33	Total net assets or fund balances			12,319,824	33	14,875,190
	34	Total liabilities and net assets/fund balances			15,756,184	34	21,215,983

Part XI Reconciliation of Net Assets

Check if Schedule O contains a response to any question in this Part XI

1	Total revenue (must equal Part VIII, column (A), line 12)	1	36,495,838
2	Total expenses (must equal Part IX, column (A), line 25)	2	33,940,472
3	Revenue less expenses Subtract line 2 from line 1	3	2,555,366
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	12,319,824
5	Other changes in net assets or fund balances (explain in Schedule O)	5	0
6	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6	14,875,190

Part XII Financial Statements and Reporting

Check if Schedule O contains a response to any question in this Part XII

		Yes	No
1	Accounting method used to prepare the Form 990 <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		No
b	Were the organization's financial statements audited by an independent accountant?	Yes	
c	If "Yes," to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	Yes	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a separate basis, consolidated basis, or both <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separated basis		
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	Yes	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	Yes	

SCHEDULE A
(Form 990 or 990EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

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

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

OMB No 1545-0047

2010

Open to Public
Inspection

Name of the organization READING IS FUNDAMENTAL INC	Employer identification number 52-0976257
--------------------------------------------------------	----------------------------------------------

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 11, check only one box)

- 1

☐

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)
- 3

☐

A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
- 4

☐

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
- 5

☐

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).**
- 7

☒

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)
- 8

☐

A community trust described in **section 170(b)(1)(A)(vi)** (Complete Part II)
- 9

☐

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)
- 10

☐

An organization organized and operated exclusively to test for public safety See**section 509(a)(4).**
- 11

☐

An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See **section 509(a)(3).** Check the box that describes the type of supporting organization and complete lines 11e through 11h

a

☐

Type I

b

☐

Type II

c

☐

Type III - Functionally integrated

d

☐

Type III - Other
- e

☐

By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2)
- f

☐

If the organization received a written determination from the IRS that it is a Type I, Type II or Type III supporting organization, check this box
- g

☐

Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

(i)

a person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the the supported organization?

(ii)

a family member of a person described in (i) above?

(iii)

a 35% controlled entity of a person described in (i) or (ii) above?
- h

☐

Provide the following information about the supported organization(s)

	Yes	No
11g(i)		
11g(ii)		
11g(iii)		

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

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.)

Section A. Public Support						
Calendar year (or fiscal year beginning in) ▶	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")	32,221,786	31,762,836	33,956,840	30,961,457	35,834,041	164,736,960
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	32,221,786	31,762,836	33,956,840	30,961,457	35,834,041	164,736,960
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)						17,378,538
6 Public Support. Subtract line 5 from line 4						147,358,422

Section B. Total Support						
Calendar year (or fiscal year beginning in) ▶	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
7 Amounts from line 4	32,221,786	31,762,836	33,956,840	30,961,457	35,834,041	164,736,960
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	212,060	241,491	186,723	214,874	287,567	1,142,715
9 Net income from unrelated business activities, whether or not the business is regularly carried on		811	622	8,554	15,067	25,054
10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)			122	48,434	26	48,582
11 Total support (Add lines 7 through 10)						165,953,311
12 Gross receipts from related activities, etc (See instructions)					12	368,062
13 First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here ▶						

Section C. Computation of Public Support Percentage		
14 Public Support Percentage for 2010 (line 6 column (f) divided by line 11 column (f))	14	88 800 %
15 Public Support Percentage for 2009 Schedule A, Part II, line 14	15	91 150 %
16a 33 1/3% support test—2010. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ▶		
b 33 1/3% support test—2009. If the organization did not check the box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ▶		
17a 10%-facts-and-circumstances test—2010. If the organization did not check a box on line 13, 16a, or 16b and line 14 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts and circumstances" test The organization qualifies as a publicly supported organization ▶		
b 10%-facts-and-circumstances test—2009. If the organization did not check a box on line 13, 16a, 16b, or 17a and line 15 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts and circumstances" test The organization qualifies as a publicly supported organization ▶		
18 Private Foundation If the organization did not check a box on line 13, 16a, 16b, 17a or 17b, check this box and see instructions ▶		

Part IIIPart III

Support Schedule for Organizations Described in Section 509(a)(2)
(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support						
Calendar year (or fiscal year beginning in) 	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public Support (Subtract line 7c from line 6)						

Section B. Total Support						
Calendar year (or fiscal year beginning in) 	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in 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 IV)						
13 Total support (Add lines 9, 10c, 11 and 12)						
14 First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section501(c)(3) organization, check this box and stop here 						

Section C. Computation of Public Support Percentage		
15 Public Support Percentage for 2010 (line 8 column (f) divided by line 13 column (f))	15	
16 Public support percentage from 2009 Schedule A, Part III, line 15	16	

Section D. Computation of Investment Income Percentage		
17 Investment income percentage for 2010 (line 10c column (f) divided by line 13 column (f))	17	
18 Investment income percentage from 2009 Schedule A, Part III, line 17	18	
19a 33 1/3% support tests—2010. If the organization did not check the box on line 14, and line 15 is more than 33 1/3% and line 17 is not more than 33 1/3%, check this box and stop here . The organization qualifies as a publicly supported organization 		
b 33 1/3% support tests—2009. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and stop here . The organization qualifies as a publicly supported organization 		
20 Private Foundation If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions 		

Part IV

Supplemental Information. Supplemental Information. Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).

Additional Data

Software ID:
Software Version:
EIN: 52-0976257
Name: READING IS FUNDAMENTAL INC

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

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
JOHN F REMONDI CHAIRMAN	1 50	X		X				0	0	0
ROBERT S DIAMOND VICE CHAIRMAN	1 50	X		X				0	0	0
WILLIAM ME RACHAL JR TREASURER	1 50	X		X				0	0	0
LORETTA BARRETT SECRETARY	1 50	X		X				0	0	0
ALEXANDRA ARMSTRONG DIRECTOR	1 50	X						0	0	0
KENNETH BENTLEY DIRECTOR	1 50	X						0	0	0
MARCIA CARLUCCI DIRECTOR	1 50	X						0	0	0
CHRISTOPHER CERF DIRECTOR	1 50	X						0	0	0
MARIE-AGNES DAUMAS DIRECTOR	1 50	X						0	0	0
LON R GREENBERG DIRECTOR	1 50	X						0	0	0
WILLIAM HANSEN DIRECTOR	1 50	X						0	0	0
CRYSTAL ECHO HAWK DIRECTOR	1 50	X						0	0	0
ROBERTA HORTON DIRECTOR	1 50	X						0	0	0
JUANITA JAMES DIRECTOR	1 50	X						0	0	0
JJ JOHNSON DIRECTOR	1 50	X						0	0	0
DR CLAUDE A MAYBERRY DIRECTOR	1 50	X						0	0	0
CHRISTY MOBERLY DIRECTOR	1 50	X						0	0	0
MICHAEL MONAHAN DIRECTOR	1 50	X						0	0	0
EMELY MOORE DIRECTOR	1 50	X						0	0	0
MARGARET MCNAMARA PASTOR DIRECTOR	1 50	X						0	0	0
JOHN F POLSTEIN DIRECTOR	1 50	X						0	0	0
LYNDA JOHNSON ROBB DIRECTOR	1 50	X						0	0	0
RICHARD D SIMMONS DIRECTOR	1 50	X						0	0	0
CAROLYN SIMPSON DIRECTOR	1 50	X						0	0	0
DR CAROL B SISCO DIRECTOR	1 50	X						0	0	0

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

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
ARTHUR H WHITE DIRECTOR	1 50	X						0	0	0
RICK ZIMMERMAN DIRECTOR	1 50	X						0	0	0
CAROL HAMPTON RASCO PRESIDENT AND CEO	40 00			X				216,093	0	18,523
REBECCA WALKER - UNTIL 022011 CHIEF FINANCIAL OFFICER	40 00			X				49,500	0	2,459
LYNN CRONEBERGER - UNTIL 082011 VP OF DEVELOPMENT	40 00				X			169,700	0	15,591
ERNESTINE BENEDICT VP OF MARKETING/COMM	40 00					X		124,645	0	7,014
PETER PATEL - UNTIL 052011 VP OF INFO SYSTEMS	40 00					X		128,278	0	11,190
SONYA WILLIAMS - UNTIL 062011 VP OF HUMAN RESOURCES	40 00					X		129,922	0	13,821

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)

4d. Other program services				
(Code)	(Expenses \$	239,011	including grants of \$	(Revenue \$)
OTHER PROGRAMS				
(Code)	(Expenses \$	81,427	including grants of \$	(Revenue \$)
VOLUNTEER RECOGNITION				

SCHEDULE D

(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

▶ **Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.**
▶ **Attach to Form 990. ▶ See separate instructions.**

OMB No 1545-0047

2010

Open to Public
Inspection

Name of the organization
READING IS FUNDAMENTAL INC

Employer identification number
52-0976257

Part I

Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	
2	Aggregate contributions to (during year)	
3	Aggregate grants from (during year)	
4	Aggregate value at end of year	
5	Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?	
	<div><input type="checkbox"/> Yes</div> <div><input type="checkbox"/> No</div>	
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit	
	<div><input type="checkbox"/> Yes</div> <div><input type="checkbox"/> No</div>	

Part II

Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

1

Purpose(s) of conservation easements held by the organization (check all that apply)

☐ Preservation of land for public use (e g , recreation or pleasure)

☐ Preservation of an historically importantly land area

☐ Protection of natural habitat

☐ Preservation of a certified historic structure

☐ Preservation of open space

2

Complete lines 2a–2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year

	Held at the End of the Year
a	Total number of conservation easements
b	Total acreage restricted by conservation easements
c	Number of conservation easements on a certified historic structure included in (a)
d	Number of conservation easements included in (c) acquired after 8/17/06

3

Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year ▶ _____

4

Number of states where property subject to conservation easement is located ▶ _____

5

Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?

☐ Yes

☐ No

6

Staff and volunteer hours devoted to monitoring, inspecting and enforcing conservation easements during the year ▶ _____

7

Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ \$ _____

8

Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)?

☐ Yes

☐ No

9

In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization’s financial statements that describes the organization’s accounting for conservation easements

Part III

Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

1a

If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items

b

If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items

(i)

Revenues included in Form 990, Part VIII, line 1

▶ \$ _____

(ii)

Assets included in Form 990, Part X

▶ \$ _____

2

If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items

a

Revenues included in Form 990, Part VIII, line 1

▶ \$ _____

b

Assets included in Form 990, Part X

▶ \$ _____

For Privacy Act and Paperwork Reduction Act Notice, see the Intructions for Form 990

Cat No 52283D

Schedule D (Form 990) 2010

Part III

Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

3

Using the organization's accession and other records, check any of the following that are a significant use of its collection items (check all that apply)

a

☐ Public exhibition

d

☐ Loan or exchange programs

b

☐ Scholarly research

e

☐ Other

c

☐ Preservation for future generations

4

Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV

5

During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?

☐ Yes

☐ No

Part IV

Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a

Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?

☐ Yes

☐ No

b

If "Yes," explain the arrangement in Part XIV and complete the following table

	Amount
1c	
1d	
1e	
1f	

2a

Did the organization include an amount on Form 990, Part X, line 21?

☐ Yes

☐ No

b

If "Yes," explain the arrangement in Part XIV

Part V

Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.

	(a)Current Year	(b)Prior Year	(c)Two Years Back	(d)Three Years Back	(e)Four Years Back
1a	Beginning of year balance	569,908	507,624	532,440	
b	Contributions	144,193	20,000		
c	Investment earnings or losses	55,199	57,240	-14,335	
d	Grants or scholarships				
e	Other expenditures for facilities and programs	7,004	14,956	10,481	
f	Administrative expenses				
g	End of year balance	762,296	569,908	507,624	

2

Provide the estimated percentage of the year end balance held as

a

Board designated or quasi-endowment ▶ 0 %

b

Permanent endowment ▶ 84 170 %

c

Term endowment ▶ 15 830 %

3a

Are there endowment funds not in the possession of the organization that are held and administered for the organization by

(i)

unrelated organizations

(ii)

related organizations

b

If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?

	Yes	No
3a(i)		No
3a(ii)		No
3b		

4

Describe in Part XIV the intended uses of the organization's endowment funds

Part VI

Investments—Land, Buildings, and Equipment. See Form 990, Part X, line 10.

Description of investment	(a) Cost or other basis (investment)	(b)Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements		865,436	123,702	741,734
d Equipment		548,113	464,816	83,297
e Other		2,260,209	1,599,792	660,417
Total. Add lines 1a-1e (Column (d) should equal Form 990, Part X, column (B), line 10(c).) ▶				1,485,448

Schedule D (Form 990) 2010

Part XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements		
1	Total revenue (Form 990, Part VIII, column (A), line 12)	136,495,838
2	Total expenses (Form 990, Part IX, column (A), line 25)	233,940,472
3	Excess or (deficit) for the year Subtract line 2 from line 1	32,555,366
4	Net unrealized gains (losses) on investments	
5	Donated services and use of facilities	
6	Investment expenses	
7	Prior period adjustments	
8	Other (Describe in Part XIV)	
9	Total adjustments (net) Add lines 4 - 8	90
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	102,555,366

Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return		
1	Total revenue, gains, and other support per audited financial statements	136,629,876
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12	
a	Net unrealized gains on investments2a	
b	Donated services and use of facilities2b40,049	
c	Recoveries of prior year grants2c	
d	Other (Describe in Part XIV)2d	
e	Add lines 2a through 2d2e	40,049
3	Subtract line 2e from line 13	36,589,827
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1	
a	Investment expenses not included on Form 990, Part VIII, line 7b4a	
b	Other (Describe in Part XIV)4b-93,989	
c	Add lines 4a and 4b4c	-93,989
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)5	36,495,838

Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return		
1	Total expenses and losses per audited financial statements	134,074,510
2	Amounts included on line 1 but not on Form 990, Part IX, line 25	
a	Donated services and use of facilities2a40,049	
b	Prior year adjustments2b	
c	Other losses2c	
d	Other (Describe in Part XIV)2d	
e	Add lines 2a through 2d2e	40,049
3	Subtract line 2e from line 13	34,034,461
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	
a	Investment expenses not included on Form 990, Part VIII, line 7b4a	
b	Other (Describe in Part XIV)4b-93,989	
c	Add lines 4a and 4b4c	-93,989
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)5	33,940,472

Part XIV Supplemental Information

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

Identifier	Return Reference	Explanation
DESCRIPTION OF INTENDED USE OF ENDOWMENT FUNDS	PART V, LINE 4	ENDOWMENT FUNDS ARE FOR THE VOLUNTEER RECOGNITION PROGRAM AND VARIOUS READING PROGRAMS AT RIF
DESCRIPTION OF UNCERTAIN TAX POSITIONS UNDER FIN 48	PART X	RIF PERFORMED AN EVALUATION OF UNCERTAIN TAX POSITIONS FOR THE YEARS ENDED SEPTEMBER 30, 2011 AND 2010, AND DETERMINED THAT THERE WERE NO MATTERS THAT WOULD REQUIRE RECOGNITION IN THE FINANCIAL STATEMENTS OR THAT MAY HAVE ANY EFFECT ON ITS TAX-EXEMPT STATUS
PART XII, LINE 4B - OTHER ADJUSTMENTS		SPECIAL EVENT EXPENSES -93,989
PART XIII, LINE 4B - OTHER ADJUSTMENTS		SPECIAL EVENT EXPENSES -93,989

Supplemental Information Regarding Fundraising or Gaming Activities

Department of the Treasury
Internal Revenue Service

Complete if the organization answered "Yes" to Form 990, Part IV, lines 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. ▶ See separate instructions.

OMB No 1545-0047

2010

Open to Public Inspection

Name of the organization
READING IS FUNDAMENTAL INC

Employer identification number

52-0976257

Part I Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17.

1. Indicate whether the organization raised funds through any of the following activities. Check all that apply.

a	<input checked="" type="checkbox"/> Mail solicitations	e	<input checked="" type="checkbox"/> Solicitation of non-government grants
b	<input checked="" type="checkbox"/> Internet and e-mail solicitations	f	<input checked="" type="checkbox"/> Solicitation of government grants
c	<input checked="" type="checkbox"/> Phone solicitations	g	<input checked="" type="checkbox"/> Special fundraising events
d	<input checked="" type="checkbox"/> In-person solicitations		

2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? ☒ **Yes** ☐ **No**

b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. Form 990-EZ filers are not required to complete this table.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
LAUTMAN MASKA NEIL & COMPANY 1730 RHODE ISLAND AVENUE NW SUITE WASHINGTON, DC 20036	DIRECT MAIL		No	262,656	61,763	200,893
DEVELOPMENT RESOURCES INC 1601 NORTH KENT STREET SUITE 1200 ARLINGTON, VA 22209	DEVELOPMENT STRATEGIC PLAN & OVERSIGHT OF STAFF		No	0	40,000	-40,000
Total				262,656	101,763	160,893

3 List all states in which the organization is registered or licensed to solicit funds or has been notified it is exempt from registration or licensing

AL, AK, AZ, AR, CA, CO, CT, DC, FL, GA, IL, IN, KS, KY, ME, MD, MA, MI, MN, MS, MO, NH, NJ, NM, NY, NC, ND, OH, OK, OR, PA, RI, SC, TN, UT, VA, WA, WV, WI

Part II Fundraising Events.

Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 on Form 990-EZ, line 6a. List events with gross receipts greater than \$5,000.

		(a) Event #1	(b) Event #2	(c) Other Events	(d) Total Events
		FUNDRAISING GALA/AUCTION (event type)	(event type)	(total number)	(Add col (a) through col (c))
Revenue	1	Gross receipts	469,000		469,000
	2	Less Charitable contributions	427,750		427,750
	3	Gross income (line 1 minus line 2)	41,250		41,250
Direct Expenses	4	Cash prizes			
	5	Non-cash prizes	654		654
	6	Rent/facility costs			
	7	Food and beverages	61,826		61,826
	8	Entertainment	16,721		16,721
	9	Other direct expenses	14,788		14,788
	10	Direct expense summary Add lines 4 through 9 in column (d) ▶			
	11	Net income summary Combine lines 3 and 10 in column (d). ▶			
					-52,739

Part III Gaming.

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

		(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming
					(Add col (a) through col (c))
Revenue	1	Gross revenue			
	2	Cash prizes			
Direct Expenses	3	Non-cash prizes			
	4	Rent/facility costs			
	5	Other direct expenses			
	6	Volunteer labor	<div><input type="checkbox"/> Yes%</div> <div><input type="checkbox"/> No</div>	<div><input type="checkbox"/> Yes%</div> <div><input type="checkbox"/> No</div>	<div><input type="checkbox"/> Yes%</div> <div><input type="checkbox"/> No</div>
	7	Direct expense summary Add lines 2 through 5 in column (d) ▶			
	8	Net gaming income summary Combine lines 1 and 7 in column (d) ▶			

9 Enter the state(s) in which the organization operates gaming activities _____

a Is the organization licensed to operate gaming activities in each of these states? ☐ Yes ☐ No

b If "No," Explain _____

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? ☐ Yes ☐ No

b If "Yes," Explain _____

11

Does the organization operate gaming activities with nonmembers?

☐ Yes ☐ No

12

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 operated in

a	The organization's facility	13a
b	An outside facility	13b

14

Provide the name and address of the person who prepares the organization's gaming/special events books and records

Name ▶ _____

Address ▶ _____

15a

Does the organization have a contract with a third party from whom the organization receives gaming revenue?

☐ Yes ☐ No

b

If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ _____ and the amount of gaming revenue retained by the third party ▶ \$ _____

c

If "Yes," enter name and address

Name ▶ _____

Address ▶ _____

16 Gaming manager information

Name ▶ _____

Gaming manager compensation ▶ \$ _____

Description of services provided ▶ _____

☐ Director/officer ☐ Employee ☐ Independent contractor

17

Mandatory distributions

a

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 distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ _____

Part IV Complete this part to provide additional information for responses to question on Schedule G (see instructions.)

Identifier	ReturnReference	Explanation
------------	-----------------	-------------

Schedule I
(Form 990)

Department of the Treasury
Internal Revenue Service

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

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

OMB No 1545-0047

2010

Open to Public
Inspection

Name of the organization
READING IS FUNDAMENTAL INC

Employer identification number
52-0976257

Part I

General Information on Grants and Assistance

- 1

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

☒ Yes ☐ No
- 2

Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Part II

Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21 for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Part II can be duplicated if additional space is needed. ▶ ☐

1 (a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
See Additional Data Table							

2

Enter total number of section 501(c)(3) and government organizations

▶ 39

3

Enter total number of other organizations

▶ 0

Part III

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

(a)Type of grant or assistance	(b)Number of recipients	(c)Amount of cash grant	(d)Amount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance

Part IV

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

Identifier	Return Reference	Explanation
PROCEDURE FOR MONITORING GRANTS IN THE U S	PART I, LINE 2	SCHEDULE I, PART I, LINE 2 RIF MONITORS THE USE OF GRANT FUNDS BY REQUIRING RECIPIENTS TO USE THE FUNDS TO PURCHASE BOOKS FROM RIF'S LIST OF APPROVED VENDORS IN ADDITION, RIF REVIEWS THE INVOICES FOR THE BOOKS THAT WERE PURCHASED BY THE GRANT RECIPIENTS AND REMITS PAYMENT DIRECTLY TO THE BOOK VENDOR ENSURING THAT THE FUNDS ARE SPENT ON BOOKS

Software ID:

Software Version:

EIN: 52-0976257

Name: READING IS FUNDAMENTAL INC

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
READING IS FUNDAMENTAL OF SOUTHERN CALIFORNIA 7250 BANDINI BOULEVARD SUITE 208 LOS ANGELES,CA 90040	23-7425712	501 (C)(3)	49,739				PURCHASE OF BOOKS
BROOKLYN PUBLIC LIBRARY10 GRAND ARMY PLAZA BROOKLYN,NY 11238	11-1904361		31,296				PURCHASE OF BOOKS

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MIAMI-DADE FAMILY LEARNING PARTNERSHIP INC10800 BISCAYNE BOULEVARD SUITE 500 MIAMI,FL 33160	14-1916606	501 (C)(3)	26,574				PURCHASE OF BOOKS
DALLAS ISD2909 N BUCKNER BOULEVARD DALLAS,TX 752284861	75-6001278		26,562				PURCHASE OF BOOKS

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
OAKLAND UNIFIED SCHOOL DISTRICT314 E 10TH STREET ROOM 215 OAKLAND,CA 94606	94-6000385		19,479				PURCHASE OF BOOKS
COMMUNITIES IN SCHOOLS OF ATLANTA600 WEST PEACHTREE STREET 1250 ATLANTA,GA 30308	58-1152807	501 (C)(3)	19,479				PURCHASE OF BOOKS

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
READBOSTONBOSTON PUBLIC SCHOOLS43 HAWKINS STREET BOSTON,MA 02114	04-2681311		18,258				PURCHASE OF BOOKS
COMMUNITIES IN SCHOOLS OF NEW ORLEANS INCPO BOX 792800 NEW ORLEANS,LA 70179	72-1317054	501 (C)(3)	18,123				PURCHASE OF BOOKS

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SAN ANTONIO ISD LIBRARY MEDIA SERVICES 1811 S LAREDO ROOM 108 SAN ANTONIO,TX 78207	74-6002167		16,716				PURCHASE OF BOOKS
PHILADELPHIA READS325 CHESTNUT STREET SUITE 903 PHILADELPHIA,PA 19106	27-1723052	501 (C)(3)	16,543				PURCHASE OF BOOKS

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
RIF OF NORTHERN VIRGINIA1834 SATINWOOD COURT VIENNA,VA 22182	51-0155758	501 (C)(3)	16,050				PURCHASE OF BOOKS
PHOENIX ELEMENTARY SCHOOL DISTRICT #1 1817 N 7TH STREET PHOENIX,AZ 850062133	86-6000478		15,065				PURCHASE OF BOOKS

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PAGE AHEAD1130 NW 85TH STREET SEATTLE,WA 98117	91-1600084	501 (C)(3)	14,541				PURCHASE OF BOOKS
RIF IN CHICAGO2211 WEST STREET RIVER GROVE,IL 60171	23-7248445	501 (C)(3)	14,540				PURCHASE OF BOOKS

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
REACH OUT AND READ GREATER BALTIMORE1001 EAST FAYETTE STREET BALTIMORE,MD 21202	04-3481253	501 (C)(3)	14,226				PURCHASE OF BOOKS
CHARLOTTE- MECKLENBURG SCHOOLS 700 MARSH ROAD CHARLOTTE,NC 282091851	56-6001074		13,043				PURCHASE OF BOOKS

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READING IS FUNDAMENTAL PITTSBURGH10 CHILDRENS WAY SUITE 300 PITTSBURGH,PA 15212	25-1558336	501 (C)(3)	13,021				PURCHASE OF BOOKS
NEWARK PRESCHOOL COUNCIL10 PARK PLACE 4TH FLOOR NEWARK,NJ 07012	22-1777158	501 (C)(3)	12,050				PURCHASE OF BOOKS

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SOUTHWEST HUMAN DEVELOPMENT2850 N 24TH STREET PHOENIX,AZ 85008	86-0407179	501 (C)(3)	11,729				PURCHASE OF BOOKS
PROVIDENCE YMCA YOUTH SERVICES371 PINE STREET PROVIDENCE,RI 02903	05-0258878	501 (C)(3)	11,000				PURCHASE OF BOOKS

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BOOKSPRINGPO BOX 143147 AUSTIN, TX 78714	74-2542664	501 (C)(3)	10,112				PURCHASE OF BOOKS
READ ALOUD AMERICA 1314 SOUTH KING STREET SUITE G4 HONOLULU,HI 96814	99-0323798	501 (C)(3)	9,611				PURCHASE OF BOOKS

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FAMILY SUPPORT SERVICES OF WEST HAWAII75-127 LUNAPULE ROAD KAILUA KONA,HI 96740	99-0230341	501 (C)(3)	9,000				PURCHASE OF BOOKS
JEAN DEAN RIFPO BOX 848 OPELIKA,AL 36803	63-0997319	501 (C)(3)	8,500				PURCHASE OF BOOKS

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

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FRESNO COUNTY OFFICE OF EDUCATION - MIGRANT PROGRAM1684 W SHAW AVENUE FRESNO,CA 93711	94-6002210		8,246				PURCHASE OF BOOKS
LANSING SCHOOL DISTRICT RIF1705 OPALINE DRIVE LANSING,MI 48917	38-6001599		7,926				PURCHASE OF BOOKS

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ST ALOYSIUS EDUCATION CLINIC219 WEST 132ND STREET NEW YORK,NY 10027	13-3415339		7,699				PURCHASE OF BOOKS
DURHAM COUNTY LIBRARY300 N ROXBORO STREET DURHAM,NC 27701	56-6000297		7,360				PURCHASE OF BOOKS

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

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RIF ST LOUIS INC6300 NORTHWOOD 2E ST LOUIS,MO 63105	51-0159152	501 (C)(3)	7,338				PURCHASE OF BOOKS
DENVER PUBLIC SCHOOLS 1330 FOX STREET DENVER,CO 80204	84-6001099		6,671				PURCHASE OF BOOKS

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

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O'CONNELL & SOUTH SIDE FRC120 PARK STREET BRISTOL,CT 06010	06-6001866		6,657				PURCHASE OF BOOKS
MIAMI VALLEY CHILD DEVELOPMENT CENTERS INC215 HORACE STREET DAYTON,OH 45402	31-0713127	501 (C)(3)	6,526				PURCHASE OF BOOKS

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

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CADWALLADER ELEMENTARY7988 ALAMEDA EL PASO,TX 79915	74-6002473		6,486				PURCHASE OF BOOKS
MANOR RIF8500 DECKER LANE AUSTIN,TX 78724	74-6003097	501 (C)(3)	6,486				PURCHASE OF BOOKS

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

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HUB FAMILY RESOURCE CENTER23 ATKINSON STREET DOVER,NH 03820	02-0508205	501 (C)(3)	6,000				PURCHASE OF BOOKS
REACH OUT AND READ KANSAS CITY3901 RAINBOW BOULEVARD MS 4004 KANSAS CITY,KS 66218	48-0547734	501 (C)(3)	5,711				PURCHASE OF BOOKS

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TODD COUNTY SCHOOL DISTRICTPO BOX 87 MISSION,SD 575550087	46-6003050		5,500				PURCHASE OF BOOKS
DISTRICT 279 FOUNDATION11200 93RD AVENUE N MAPLE GROVE,MN 55369	41-1705060	501 (C)(3)	5,374				PURCHASE OF BOOKS

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

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THE PUBLIC EDUCATION FOUNDATION (CLARK COUNTY READS)3360 W SAHARA AVENUE SUITE 160 LAS VEGAS,NV 89102	88-0275767	501 (C)(3)	5,089				PURCHASE OF BOOKS

Schedule J
(Form 990)

Compensation Information

OMB No 1545-0047

2010

Open to Public Inspection

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

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

▶ Attach to Form 990. ▶ See separate instructions.

Name of the organization READING IS FUNDAMENTAL INC	Employer identification number 52-0976257
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Part I

Questions Regarding Compensation

	Yes	No
1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items		
<input type="checkbox"/> First-class or charter travel		
<input type="checkbox"/> Travel for companions		
<input type="checkbox"/> Tax idemnification and gross-up payments		
<input type="checkbox"/> Discretionary spending account		
<input type="checkbox"/> Housing allowance or residence for personal use		
<input type="checkbox"/> Payments for business use of personal residence		
<input type="checkbox"/> Health or social club dues or initiation fees		
<input type="checkbox"/> Personal services (e g , maid, chauffeur, chef)		
b If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all the expenses described above? If "No," complete Part III to explain	1b	
2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	2	
3 Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director Check all that apply		
<input checked="" type="checkbox"/> Compensation committee		
<input type="checkbox"/> Independent compensation consultant		
<input type="checkbox"/> Form 990 of other organizations		
<input type="checkbox"/> Written employment contract		
<input checked="" type="checkbox"/> Compensation survey or study		
<input checked="" type="checkbox"/> Approval by the board or compensation committee		
4 During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization		
a Receive a severance payment or change-of-control payment from the organization or a related organization?	4a	No
b Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b	No
c Participate in, or receive payment from, an equity-based compensation arrangement?	4c	No
If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III		
Only 501(c)(3) and 501(c)(4) organizations only must complete lines 5-9.		
5 For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of		
a The organization?	5a	No
b Any related organization?	5b	No
If "Yes," to line 5a or 5b, describe in Part III		
6 For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of		
a The organization?	6a	No
b Any related organization?	6b	No
If "Yes," to line 6a or 6b, describe in Part III		
7 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III	7	No
8 Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regs section 53 4958-4(a)(3)? If "Yes," describe in Part III	8	No
9 If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?	9	

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

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

Note. The sum of columns (B)(i)-(iii) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a

(A) Name		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) CAROL HAMPTON RASCO	(i)	216,093	0	0	10,969	7,554	234,616	0
	(ii)	0	0	0	0	0	0	0
(2) LYNN CRONEBERGER - UNTIL 082011	(i)	169,700	0	0	8,230	7,361	185,291	0
	(ii)	0	0	0	0	0	0	0
(3)								
(4)								
(5)								
(6)								
(7)								
(8)								
(9)								
(10)								
(11)								
(12)								
(13)								
(14)								
(15)								
(16)								

Part III **Supplemental Information**

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

Identifier	Return Reference	Explanation
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SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

OMB No 1545-0047

2010

Open to Public
Inspection

Name of the organization READING IS FUNDAMENTAL INC	Employer identification number 52-0976257
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Identifier	Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11		RIF'S FINANCE/AUDIT COMMITTEE OF THE BOARD OF DIRECTORS REVIEWS THE FEDERAL FORM 990 IT IS THEN DISTRIBUTED TO THE ENTIRE BOARD OF DIRECTORS BEFORE IT IS FILED WITH THE INTERNAL REVENUE SERVICE (IRS)

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 12C	RIF'S CONFLICT OF INTEREST POLICY ("POLICY") APPLIES TO BOARD MEMBERS, OFFICERS AND RIF SENIOR MANAGERS (COLLECTIVELY "RIF INSIDERS") THE POLICY REQUIRES THAT A RIF INSIDER DISCLOSE ANY POTENTIAL CONFLICT TO THE BOARD OF DIRECTORS OR A DESIGNATED COMMITTEE OF THE BOARD VIOLATIONS OF THE POLICY WILL RESULT IN APPROPRIATE DISCIPLINARY AND CORRECTIVE ACTION, UP TO AND INCLUDING DISMISSAL RIF INSIDERS ARE REQUIRED ON AN ANNUAL BASIS TO SIGN A STATEMENT AFFIRMING THAT HE OR SHE - HAS RECEIVED A COPY OF THE POLICY, - HAS READ AND UNDERSTANDS THE POLICY, - HAS AGREED TO COMPLY WITH, AND HAS COMPLIED WITH THE POLICY, - UNDERSTANDS THAT RIF IS A CHARITABLE AND EDUCATIONAL ORGANIZATION AND THAT, IN ORDER TO MAINTAIN ITS FEDERAL TAX EXEMPTION AND PRESERVE RIF'S VALUABLE REPUTATION, RIF MUST ENGAGE PRIMARILY IN ACTIVITIES THAT ACCOMPLISH ITS TAX EXEMPT PURPOSE

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 15	TO BEGIN THE ANNUAL EVALUATION OF THE PRESIDENT AND CEO, THE CHAIR OF THE BOARD FIRST SOLICITS INPUT FROM ALL BOARD MEMBERS CONCERNING THE PRESIDENT'S PERFORMANCE. THE EXECUTIVE COMMITTEE THEN CONSIDERS THE INPUT OF THE RESPONDING BOARD MEMBERS IN ITS REVIEW OF THE PRESIDENT, AND REPORTS BACK TO THE BOARD OF DIRECTORS ITS EVALUATION. THE EXECUTIVE COMMITTEE THEN SHARES ITS EVALUATION WITH THE PRESIDENT. THE EXECUTIVE COMMITTEE THEN CONSULTS COMPARABILITY SURVEYS TO DETERMINE THE PRESIDENT'S COMPENSATION FOR THE NEXT YEAR. CONCERNING VICE PRESIDENTS AND OTHER KEY EMPLOYEES, THE CEO PROVIDES TO THE BOARD OF DIRECTORS IN THE EXECUTIVE SESSION AT EACH BOARD MEETING A CURRENT REVIEW OF EACH VICE PRESIDENT AND KEY EMPLOYEE. IN YEARS WHEN SALARY INCREASES ARE CONTEMPLATED, THE CEO ALSO PRESENTS TO THE BOARD IF DIRECTORS THE COMPENSATION OF EACH VICE PRESIDENT AND KEY EMPLOYEE AND REPORTS ON THE INCREASES TO BE PROVIDED TO EACH PERSON.

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION C, LINE 19	RIF SUBMITS ITS AUDITED FINANCIAL STATEMENTS, FEDERAL FORM 990 AND IRS LETTER OF DETERMINATION (OF RIF'S TAX EXEMPT STATUS) TO GUIDESTAR FOR PUBLICATION ON THAT SERVICE. RIF ALSO PUBLISHES ITS FEDERAL FORM 990 ON ITS OWN WEBSITE. TO-DATE, RIF HAS NOT PUBLISHED ITS CONFLICT OF INTEREST POLICY FOR ACCESS BY THE GENERAL PUBLIC. ALL DOCUMENTS ARE ALSO AVAILABLE UPON REQUEST.