

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



Form **990**

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)

OMB No 1545-0047

2011

Open to Public Inspection

Department of the Treasury

inter	nal Revenue	Service	The organization may have to use a copy of this return to satisfy state report			
A	For the 2	2011 calen	dar year, or tax year beginning $7/01$, 2011, and ending	g 6/30	, 2	012
B	Check if app	plicable	C	D Emplo	yer Identificat	ion Number
	Addres	ss change	REACH INSTITUTE FOR SCHOOL LEADERSHIP	27-	1274290)
	Name	change	1221 PRESERVATION PARK WAY #100	E Teleph	none number	
	Initial r	•	OAKLAND, CA 94612	510	-501-50	075
	Termin					
		ded return		G Gross	receipts \$	949,305.
	\vdash	ation pending	F Name and address of principal officer CHRIS NEALE	H(a) Is this a group retu		
	Шлфрііос	ation penang	SAME AS C ABOVE	H(b) Are all affiliates in		Yes No
$\overline{}$	Tay-oven	npt status	X 501(c)(3)	If 'No,' attach a list	t (see instructi	ons) — —
'	Websit			H(c) Group exemption r	number ►	
5		organization	X Corporation Trust Association Other ► L Year of Format		State of legal	domicile CA
		Summar		2005 111	Otate of legal	domicile 011
1.0			be the organization's mission or most significant activities. THE REAC	H INSTITUTE	BULLDS	AND
_		-	TEACHERS AND EDUCATIONAL LEADERS WHO ARE COMM			
Activities & Governance			NG EFFECTIVE, SMALL, AND INNOVATIVE SCHOOLS.	. 5 - 4 - 4 - 4 - 4 - 4 - 4 - 4 - 4 - 4 -	eutro.	
Ē	-	~~~				
8	2 Ch	eck this bo	x ► If the organization discontinued its operations or disposed of mo	ore than 25% of its	net assets	
Ō			ting members of the governing body (Part VI, line 1a)		3	3
93			dependent voting members of the governing body (Part VI, line 1b)		4	3
¥	4		of individuals employed in calendar year 2011 (Part V, line 2a)		6	6
ट्ट			of volunteers (estimate if necessary) ed business revenue from Part VIII, column (C), line 12		7a	0.
			business taxable income from Form 990-T, line 34		7b	0.
	DINE	- uniterated	business taxable income from 10th 1550 1; line 54	Prior Year		Current Year
	8 Co	ntributions	and grants (Part VIII, line 1h)	844,		785,145.
Ð			rice revenue (Part VIII, line 2g)	100,		164,041.
Revenue		estment ir	108.	119.		
æ	1		e (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)			.
	12 Tot	tal revenue	e - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	944,	455.	949,305.
	13 Gra	ants and s	milar amounts paid (Part IX, column (A), lines 1-3)			
	14 Be	nefits paid	to or for members (Part IX, column (A), line 4)			
	15 Sa	laries, oth	er compensation, employee benefits (Part IX, column (A), lines 5-10)	490,	169.	682,038.
363	16a Pro	ofessional	fundraising fees (Part IX, column (A), line 11e)			
Expenses	b Tot	tal fundrais	sing expenses (Part IX, column (D), line 25) ▶			
M			es (Part IX, column (A), lines 11a-11d, 11f-24e)	279,	121.	304,344.
			es. Add lines 13-17 (must equal Part IX, column (A), line 25)	769,		986,382.
		•	expenses Subtract line 18 from line 12	175,		-37,077.
k 8	1	TOTAL TOU	RECEIVED	Beginning of Curre		End of Year
100	20 Tot	tal assets	(Part X, line 16)	379,		339,987.
Net Assets or Fund Balances	21 Tot		s (Part X, line 26) 👼 MAY 2 3 2015	46,	577.	44,130.
Z Z	22 Ne	t assets or	(Part X, line 16) s (Part X, line 26) fund balances. Subtract line 21 from line 20	332,	934.	295,857.
Pa	art II	Signatur	e Block			
Unc	ier penalties	of perjury. Lo	eclare that I have examined this return, including accompanying schedules and statements, and to age (other than officer) is based on all information of which preparer has any knowledge	the best of my knowledg	ge and belief, i	t is true, correct, and
con	iplete Decla	aration of prep	arer (other that) officer) is based on all information of which preparer has any knowledge	-1.0		
				<u> </u>		· · · · · · · · · · · · · · · · · · ·
Sig	gn	Signati	e of officer	Date		
He	re		IS NEALE	TREASURER		
2			print name and title			
7		1	reparer's name Preparer's signature Date	Check	If PTIN	
Pa	id	TERRI	MONTGOMERY 1/21/	15 self-emplo	yed P0	0232100
	eparer	Firm's name				
Us	e Only	Firm's addre		Fırm's EIN	▶ 95-26	
			PLEASANTON, CA 94588-3351	Phone no	(925)	734-6600
Ma	y the IRS	discuss th	is return with the preparer shown above? (see instructions)		X	
54	A Car Da		aduction Act Notice see the congrete instructions	A01131 09/19/11	_	Form 990 (2011)

Forn	1 990 (2011) REACH INSTITUTE FOR SCHO	OOL LEADERSHIP	27-1274290	_ Page 2
Pai				
	Check if Schedule O contains a response to	any question in this Part III		X
	Briefly describe the organization's mission:			
	THE REACH INSTITUTE BUILDS AND S	UPPORTS TEACHERS AND I	EDUCATIONAL LEADERS WHO	ARE
	COMMITTED TO CREATING AND SUSTAI			
			7	<u></u>
		~		
	Did the organization undertake any significant progr	com convece during the year which	were not listed on the ariar	
2		am services during the year which	— .	ر
	Form 990 or 990-EZ?			es X No
_	If 'Yes,' describe these new services on Schedule C			. 🔂
3	Did the organization cease conducting, or make sign	nificant changes in how it conducts	s, any program services?	res X No
	If 'Yes,' describe these changes on Schedule O.			
4	Describe the organization's program service accomp Section 501(c)(3) and 501(c)(4) organizations and s	olishments for each of its three larg	gest program services, as measured	by expenses
	others, the total expenses, and revenue, if any, for	ection 4947(a)(1) trusts are require each program service reported	ed to report the amount of grants an	d allocations to
	candidate total expenses, and veveride, in any, in			
	(C-d- \$12.46	2 makeding grants of \$	\ \(\(\text{Devices to \chi_{\text{c}}}\)	
48		13. including grants of \$) (Revenue \$)
	SEE SCHEDULE O			
	- A			
41	(Code) (Expenses \$	including grants of \$) (Revenue \$)
40	C (Code:) (Expenses \$	including grants of \$) (Revenue \$)
40	Other program services (Describe in Schedule O)			
		rants of \$	_) (Revenue \$	
	e Total program service expenses ► 9	12,463.		

REACH INSTITUTE FOR SCHOOL LEADERSHIP 27-1274290 Form **990** (2011) Page 3 |Checklist of Required Schedules Yes No Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A Х Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 2 Х Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I 3 Х Section 501(c)(3) organizations Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If 'Yes,' complete Schedule C, Part II 4 Х Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If 'Yes,' complete Schedule C, Part III 5 Х Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, 6 Х Part I Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If 'Yes,' complete Schedule D, Part II 7 Х Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' 8 X complete Schedule D, Part III Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If 'Yes,' complete Schedule D. Part IV 9 Х Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If 'Yes,' complete Schedule D, Part V 10 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? If 'Yes,' complete Schedule 11 a Х D, Part VI **b** Did the organization report an amount for investments— other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VII Х 11b c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VIII 11 c Х d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part IX 11 d Х X e Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X 11 e f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If 'Yes,' complete Schedule D, Part X 11 f 12a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI, XII, and XIII 12a b Was the organization included in consolidated, independent audited financial statements for the tax year? If 'Yes,' and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional 12b Х Х 13 Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E 13 Х 14a Did the organization maintain an office, employees, or agents outside of the United States? 14a **b** Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If 'Yes,' complete Schedule F, Parts I and IV Х 14b 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 United States? If 'Yes,' complete Schedule F, Parts II and IV 15 Х 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 United States? If 'Yes,' complete Schedule F, Parts III and IV Х 16 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I (see instructions) 17 Х Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII. lines 1c and 8a? If 'Yes,' complete Schedule G, Part II 18 Х

X

X

19

20

20 b

Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III

20 aDid the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H

b If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?

Checklist of Required Schedules (continued) Yes No Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II 21 Х Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If 'Yes,' complete Schedule I, Parts I and III 22 X Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If 'Yes,' complete 23 Х Schedule J 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, and that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K If 'No,'go to line 25 24a X 24b b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 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 24d d Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year? 25 a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I Х 25a **b** Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? *If 'Yes,' complete* 25b Х Schedule L. Part I Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If 'Yes,' complete Schedule L, Part II 26 Х Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If 'Yes,' complete Schedule L, Part III X 27 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) Х a A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV 28a **b** A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Х 28b Schedúle L, Part IV 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? If 'Yes,' complete Schedule L, Part IV 28c Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes.' complete Schedule M 29 Х Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M 30 Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I 31 X Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II 32 X Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301.7701-3? If 'Yes,' complete Schedule R, Part I 33 Х Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts II, III, IV, and V, line 1 34 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 35a X **b** Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2

BAA

Form 990 (2011)

35b

36

37

Х

Х

Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 197

treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI

Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is

organization? If 'Yes.' complete Schedule R. Part V. line 2

Note. All Form 990 filers are required to complete Schedule O

<u> </u>	Check if Schedule O contains a response to any question in this Part V			
		\Box	Yes	No
1 a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0	ŀ		
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming]	
·	(gambling) winnings to prize winners?	1 c		X
2 a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax State-			
	ments, filed for the calendar year ending with or within the year covered by this return 2a 6			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2 b	Х	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. (see instructions)			
3 a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
b	olf 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule Q	3b		
	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)? If 'Yes,' enter the name of the foreign country	4a		Х
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts	- 1		
.	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
	: If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?	5c		_^
	·			
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?	6a		Х
	If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6ь		
7	Organizations that may receive deductible contributions under section 170(c).		-	į
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and	7-		X
	services provided to the payor?	7a 7b		^
	olf 'Yes,' did the organization notify the donor of the value of the goods or services provided?	70		ſ
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7 c		Х
d	If 'Yes,' indicate the number of Forms 8282 filed during the year 7d			
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899			
_	as required?	7g		<u> </u>
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.	一		
	Did the organization make any taxable distributions under section 4966?	9a		
	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
	Section 501(c)(7) organizations. Enter:	\neg 1		
	Initiation fees and capital contributions included on Part VIII, line 12 . 10a	Į		1
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			İ
	Section 501(c)(12) organizations. Enter	ļ		İ
	Gross income from members or shareholders	ĺ		į
b	Gross income from other sources (Do not net amounts due or paid to other sources	l		ĺ
	against amounts due or received from them).			ļ
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	olf 'Yes,' enter the amount of tax-exempt interest received or accrued during the year			l
	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	I Is the organization licensed to issue qualified health plans in more than one state?	13a		<u> </u>
	Note. See the instructions for additional information the organization must report on Schedule O			
	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
-	Enter the amount of reserves on hand			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
b	If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule O	14b		

BAA

Governance, Management and Disclosure For each 'Yes' response to lines 2 through 7b below, and for a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. \mathbf{X} Check if Schedule O contains a response to any question in this Part VI Section A. Governing Body and Management Yes No 1 a 3 1a Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O. 3 b Enter the number of voting members included in line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other 2 Х officer, director, trustee or key employee? Did the organization delegate control over management duties customarily performed by or under the direct supervision 3 Х of officers, directors or trustees, or key employees to a management company or other person? Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 Х 5 Did the organization become aware during the year of a significant diversion of the organization's assets? 6 X 6 Did the organization have members or stockholders? 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more Х members of the governing body? 7 a **b** Are any governance decisions of the organization reserved to (or subject to approval by) members, X stockholders, or other persons other than the governing body? 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following X a The governing body? 8a Х b Each committee with authority to act on behalf of the governing body? 8b Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If 'Yes,' provide the names and addresses in Schedule O 9 Х Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code. Yes No 10a Did the organization have local chapters, branches, or affiliates? 10a Х b If 'Yes,' did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their 10b operations are consistent with the organization's exempt purposes? Х 11 a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11 a b Describe in Schedule O the process, if any, used by the organization to review this Form 990. SEE SCHEDULE O Х 12a Did the organization have a written conflict of interest policy? If 'No,' go to line 13 12a b Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise Х to conflicts? 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this is done 12 c 13 Did the organization have a written whistleblower policy? 13 X 14 Did the organization have a written document retention and destruction policy? 14 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? a The organization's CEO, Executive Director, or top management official 15 a Х 15b **b** Other officers of key employees of the organization 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? X 16a b If 'Yes,' did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the 16_b 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 > CA Section 6104 requires an organization to make its Forms 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. Another's website X Upon request Describe in Schedule 0 whether (and if so, how) the organization makes its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. SEE SCHEDULE O State the name, physical address, and telephone number of the person who possesses the books and records of the organization: ► JONNA JUSTINIANO 1221 PRESERVATION WAY OAKLAND CA 94612 510-501-5075 TEEA0106L 01/23/12 Form 990 (2011)

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

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

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

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

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

Check this box if neither the organization	n nor any	relate	d or	gan	ızat	ion co	mpe	ensated any current of	fficer, director, or trus	tee
	(D)	Position (do not check more than one box, unless person is both an officer								
(A) Name and title	(B) Average hours per week		and a director/ti			rustee)	box, cer	(D) Reportable compensation from	(E) Reportable compensation from	(F) Estimated amount of other compensation
	(describe hours for related organiza- tions in Schedule O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	from the organization and related organizations
(1) DENNIS CHACONAS	,	х						6,000.	0.	0
PRESIDENT (2) CHRIS NEALE	4	^						6,000.	0.	0.
TREASURER	2	Х						0.	0.	0.
(3) MICHAEL CLARDY SECRETARY	2	Х						0.	0.	0.
(4) JONNA JUSTIANO ASSOC DIRECTOR	40			Х	ļ			21,794.	0.	0.
(5) PAGE TOMPKINS EXECUTIVE DIREC	40			Х				92,250.	0.	0.
(6)										
_(8)										
_(9)						<u> </u>	L			
(10)						_				
(11)										
(12)]								-	
(13)										
(14)										

(A) Name and title	(B) Average hours per week (describ	(do box offic	not ch unles	Pos heck	ition more rson i	than s both r/trus	one n an tee)	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	E- amo con f	(F) stimated int of ot ipensatio om the anizatio id relate	l ther on -
	hours for related organi- zations in Sch O)	Individual trustee or director	Institutional trustee		Key employee	Highest compensated employee	7			org	anızatıor	ıs
(15)										-	-	
(16)												
(17)									- ·			
(18)												
(19)	·											
(20)												
(21)												
(22)												
(23)									 			
(24)											-	
(25)												
1 b Sub-total c Total from continuation sheets to Part VII, Section d Total (add lines 1b and 1c)	A						* * *	120,044. 0. 120,044.	0. 0. 0.			0.
2 Total number of individuals (including but not limiter from the organization ▶ 0	d to the	se I	sted	ab	ove)	who	o re		\$100,000 of report	able cor	npens	
3 Did the organization list any former officer, director	or trus	tee,	key	emį	oloye	ee, c	or hi	ghest compensate	ed employee	F	Yes	No
 on line 1a⁷ If 'Yes,' complete Schedule J for such ii 4 For any individual listed on line 1a, is the sum of rethe organization and related organizations greater the 	portabl	е со	mpe	nsa If 'Y	tion ′es′ i	and	oth plet	er compensation :	from	3		X
such individual 5 Did any person listed on line 1a receive or accrue c	ompen	satio	n fro	om a	anv I	unre	late	d organization or	ındıvıdual	4		X
for services rendered to the organization? If 'Yes,' or Section B. Independent Contractors	omple	te So	hed	ule .	J foi	suc	ch p	erson		5		<u> </u>
Complete this table for your five highest compensate compensation from the organization. Report compe	ed indensation	pen for	dent the c	cor cale	ntrac ndar	tors yea	tha ar er	t received more the total to the total tot	nan \$100,000 of in the organization	's tax ye	ar	
Name and business addres	s							(B) Description (of services	Compe	C) nsatio	n
							-					
2 Total number of independent contractors (including \$100,000 in compensation from the organization ►		lımı	ted	to th	nose	liste	ed a	bove) who receive	ed more than			ŀ

Pai	rt.VIII Statement of Revenue	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512, 513, or 514
PROGRAM SERVICE REVENUE AND OTHER SIMILAR AMOUNTS	1a Federated campaigns b Membership dues c Fundraising events. d Related organizations e Government grants (contributions) f All other contributions, gifts, grants, and similar amounts not included above g Noncash contributions included in lns 1a-1f: h Total. Add lines 1a-1f	785,145.			
VICE REVENUE	Business Code 2a FEES b c	164,041.	164,041.		
PROGRAM SER		164,041.			
	 Investment income (including dividends, interest and other similar amounts) Income from investment of tax-exempt bond proceeds Royalties 	119.			119.
	(i) Real (ii) Personal 6a Gross rents b Less. rental expenses c Rental income or (loss) d Net rental income or (loss)				
	7a Gross amount from sales of assets other than inventory b Less cost or other basis				!
	and sales expenses c Gain or (loss) d Net gain or (loss) 8a Gross income from fundraising events				
OTHER REVENUE	(not including \$		i		
	c Net income or (loss) from fundraising events 9a Gross income from gaming activities See Part IV, line 19 b Less direct expenses b				
	c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less: cost of goods sold b				
	c Net income or (loss) from sales of inventory Miscellaneous Revenue Business Code 11 a				
	b			-	
	e Total. Add lines 11a-11d 12 Total revenue. See instructions	949,305.	164,041.	0.	119.

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)

	Check if Schedule O contains a re	sponse to any question	ın this Part IX		
Do i 6b,	not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
	Grants and other assistance to governments and organizations in the United States See Part IV, line 21				
2	Grants and other assistance to individuals in the United States. See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16				<u> </u>
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees	120,044.	46,125.	73,919.	0.
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0.	0.	0.	0.
7	Other salaries and wages	491,277.	491,277.	·	
8	Pension plan accruals and contributions (include section 401(k) and section 403(b) employer contributions)				
9	Other employee benefits	30,680.	30,680.		
10	Payroll taxes	40,037.	40,037.		
11	Fees for services (non-employees)				
	Management				
	Legal	***			
	Accounting				
	Lobbying	· †			
	Professional fundraising services See Part IV, line 17				
	Investment management fees				
	1 Other	207,290.	207,290.		
•	Advertising and promotion	2,574.	2,574.		
13	, ·	17,253.	17,253.		
14	Information technology	2.,2001			
15	Royalties	······································	-		···
16	Occupancy	47,445.	47,445.		· · · · · · · · · · · · · · · · · · ·
17	· · ·	15,161.	15,161.		
	Payments of travel or entertainment expenses for any federal, state, or local public officials	10, 1011	10,1011		
	Conferences, conventions, and meetings Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	3,413.	3,413.		
23	Insurance	3,048.	3,048.		
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				{
a	DUES AND SUBSCIPTION	3,872.	3,872.		
	MISCELLANEOUS	3,578.	3,578.		· · · · · · · · · · · · · · · · · ·
	POSTAGE AND SHIPPING	670.	670.	-	
	BANK CHARGES	40.	40.	-	
	All other expenses				-
	Total functional expenses. Add lines 1 through 24e	986,382.	912,463.	73,919.	0.
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here				
	SOP 98-2 (ASC 958-720)				
	v · /				

33

34

Total net assets or fund balances

Total liabilities and net assets/fund balances

Page 11 **Balance Sheet** (A) Beginning of year (B) End of year 84,781. 1 15,876. Cash - non-interest-bearing. 160,901 2 193,174 2 Savings and temporary cash investments 50,000. 3 3 Pledges and grants receivable, net 83,829 4 $118, \overline{237}$ Accounts receivable, net Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 5 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) 6 7 Notes and loans receivable, net 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost or other basis Complete Part VI of Schedule D 10a 13,651 3.413 10,238 **b** Less accumulated depreciation 10b 10 c 11 11 Investments - publicly traded securities. 12 Investments - other securities See Part IV, line 11 12 13 13 Investments - program-related. See Part IV, line 11 14 Intangible assets 15 2,462. Other assets See Part IV, line 11 379,511 16 339.987. 16 Total assets. Add lines 1 through 15 (must equal line 34) 44,130. 46,577 17 Accounts payable and accrued expenses 17 18 18 Grants payable Deferred revenue 19 19 20 20 Tax-exempt bond liabilities 21 Escrow or custodial account liability Complete Part IV of Schedule D Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II 22 of Schedule L 23 Secured mortgages and notes payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D 25 46,577 44,130 26 Total liabilities. Add lines 17 through 25 X and complete lines Organizations that follow SFAS 117, check here 27 through 29 and lines 33 and 34. 282,934. 295,857. 27 Unrestricted net assets 50,000. 28 28 Temporarily restricted net assets 29 Permanently restricted net assets Q R Organizations that do not follow SFAS 117, check here ▶ and complete lines 30 through 34. 30 30 Capital stock or trust principal, or current funds 31 Paid-in or capital surplus, or land, building, or equipment fund 32 Retained earnings, endowment, accumulated income, or other funds

BAA Form 990 (2011)

332,934

379,511

33

34

295,857.

339,987.

Form	n 990 (2011) REACH INSTITUTE FOR SCHOOL LEADERSHIP 27	-1274290		Pa	ge 12
Par	t 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		<u>49,3</u>	
2	Total expenses (must equal Part IX, column (A), line 25)	2		86,3	
3	Revenue less expenses Subtract line 2 from line 1	3		<u>37,0</u>	
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)).	4	3	32, <u>s</u>	<u> 34.</u>
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	2	95,8	357.
Par	t 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 Cash X Accrual Other				ì
	If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O.				
2 <i>a</i>	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
b	Were the organization's financial statements audited by an independent accountant?		2b	Х	
c	If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of review, or compilation of its financial statements and selection of an independent accountant?	the audit,	2c		Х
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O				
c	If 'Yes' to line 2a or 2b, check a box below to indicate whether the financial statements for the year were iss separate basis, consolidated basis, or both	ued on a			
	X Separate basis				
3 <i>a</i>	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Audit Act and OMB Circular A-133?	e Single	3a		X
t	If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the re or audits, explain why in Schedule O and describe any steps taken to undergo such audits	quired audit	3b		
BAA		<u> </u>	Form	990 ((2011)

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

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

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

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

Open to Public Inspection

Employer identification number

<u>REA</u>	<u>CH</u>	INSTITUTE FOR	R SCHOOL LEADE	RSHIP					27-12	274290	<u> </u>	_	
Par	ŧΙ	Reason for Publ	lic Charity Status	(All organizations	must o	comple	te this	part.)	See II	nstruct	ions.		
The c	orgai	nization is not a priva	ite foundation becaus	e it is: (For lines 1 thro	ugh 11,	check o	nly one	box.)					
1		A church, convention	of churches or associ	ciation of churches des	cribed ir	section	170(b)	(1)(A)(i)					
2		A school described in	n section 170(b)(1)(A)	(ii). (Attach Schedule I	E)								
3		A hospital or a coope	erative hospital servic	e organization describe	ed in see	ction 17	0(b)(1)(<i>A</i>	\) (iii).					
4		A medical research of	organization operated	in conjunction with a h	nospital	describe	d in sec	tion 17	0(b)(1)(A	(Xiii) Er	iter the hos	spital's	5
_		name, city, and state							-				
5	Ц	170(b)(1)(A)(iv). (Co	mplete Part II)	f a college or university		•	-	•	nmenta	l unit de:	scribed in s	ectio	n
6 7	X	An organization that		overnmental unit descri substantial part of its su					t or from	n the ger	neral public	: desci	rıbed
8				70(b)(1)(A)(vi). (Comple	te Part I	11.5							
9	Ħ	-) more than 33-1/3% or		-	n contri	butions	membe	rshin fe	es and ord	iss rec	eints
J	ш	from activities related investment income a	d to its exempt function	ons – subject to certair s taxable income (less	n except	ions, an	id (2) no	more t	han 33-	1/3% of	its support	from :	gross
10		An organization orga	inized and operated e	xclusively to test for pu	ublic safe	ety See	section	1 509(a)	(4).				
11		more publicly suppor	ted organizations des	exclusively for the bene- scribed in section 509(a tion and complete lines	(1) or s	section 5	509(a)(2	ctions o	of, or ca section s	rry out tł 5 09(a)(3)	ne purpose . Check th	s of or e box	ne or that
		a Type I	b ∏Type Ⅱ	_	l – Fund	_		ted		d 🗌	Type III -	- Othe	r
е		By checking this box other than foundation section 509(a)(2).	, I certify that the org n managers and other	anization is not controll r than one or more pub	led directlicly sup	tly or in ported o	dırectly organıza	by one tions de	or more escribed	disquali in section	fied persoi on 509(a)(1	ns) or	
f			ceived a written dete	rmination from the IRS	that is a	a Type I	, Type I	or Type	e III sup	porting	organizatio	n,	
g		Since August 17, 200	06, has the organizati	on accepted any gift o	r contrib	ution fro	om any	of the fo	ollowing	persons	,7		
												Yes	No
		(i) A person who obelow, the gove	directly or indirectly co erning body of the sup	ontrols, either alone or oported organization?	togethe	r with pe	ersons d	escribe	d in (ii)	and (III)	11 g (i)		
		· · · · · · · · · · · · · · · · · · ·	er of a person descri	· -							11 g (ii)		
		• •	<u>-</u>	described in (i) or (ii) a	bove?						11 g (iii)		
h		• •	= -	e supported organization									
		(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	organiz column (your go	Is the sation in in instead in overning ment?	the organ	ou notify lization in n (i) of upport?	organiz colun organize	s the ation in nn (i) ed in the	(vii) Amoui	nt of sup	port
					Yes	No	Yes	No	Yes	No			
(A)													
(B)													
(C)_									,				
(D)													
(E)													
[ctal													

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

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

Sec	tion A. Public Support											
begiı	ndar year (or fiscal year nning in) ▶	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total					
1	Gifts, grants, contributions, and membership fees received. (Do not include any 'unusual grants.')			179,487.	844,071.	785,145.	1,808,703.					
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf				,		0.					
3	The value of services or facilities furnished by a governmental unit to the organization without charge						0.					
4	4 Total. Add lines 1 through 3 0. 0. 179, 487. 844, 071. 785, 145.											
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)	-					127,642.					
6	Public support. Subtract line 5 from line 4						1,681,061.					
Sec	tion B. Total Support											
Cale begi	ndar year (or fiscal year nning in) ►	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total					
7	Amounts from line 4	0.	0.	179,487.	844,071.	785,145.	1,808,703.					
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources			14.	108.	119.	241.					
9	Net income from unrelated business activities, whether or not the business is regularly carried on						0.					
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV)						0.					
11	Total support. Add lines 7 through 10						1,808,944.					
12	Gross receipts from related activ	rities, etc (see ins	ructions)			12	0.					
13	First five years. If the Form 990 organization, check this box and	stop here		nd, third, fourth, o	r fifth tax year as	a section 501(c)(3) ► X					
<u>Sec</u>	tion C. Computation of Pu											
14	Public support percentage for 20	· ·	•	e 11, column (f)).		14	<u>%</u>					
15	Public support percentage from	2010 Schedule A,	Part II, line 14			15	%_					
16 a	33-1/3% support test — 2011. If and stop here. The organization				nd the line 14 is 3	3-1/3% or more, o	check this box					
b	33-1/3% support test — 2010. If and stop here. The organization				5a, and line 15 is	33-1/3% or more,	check this box					
17 a	7a 10%-facts-and-circumstances test – 2011. 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.											
t	10%-facts-and-circumstances to or more, and if the organization organization meets the 'facts-an	meets the 'facts-a d-circumstances' t	nd-circumstances est The organiza	s' test, check this ition qualifies as a	box and stop hei a publicly support	e. Explain in Part ed organization	IV how the ►					
18 BAA	Private foundation. If the organi	zation did not che	ck a box on line 1	13, 16a, 16b, 17a			structions ► 90 or 990-EZ) 2011					
~~~					30							

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

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Sec	tion A. Public Support						
	ndar year (or fiscal yr beginning in)►	(a) 2007	<b>(b)</b> 2008	<b>(c)</b> 2009	<b>(d)</b> 2010	<b>(e)</b> 2011	(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						
<b>4</b> 5	organization's benefit and either paid to or expended on its behalf The value of services or						
	facilities furnished by a governmental unit to the organization without charge						
	Total. Add lines 1 through 5 a Amounts included on lines 1, 2, and 3 received from disqualified persons						
I	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	<b>Public support</b> (Subtract line 7c from line 6.)						
	tion B. Total Support			1	1		r
Caler	ndar year (or fiscal yr beginning in)►	(a) 2007	<b>(b)</b> 2008	(c) 2009	(d) 2010	<b>(e)</b> 2011	(f) Total
10	Amounts from line 6 a 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  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 Ins 9, 10c, 11, and 12)						
14	First five years. If the Form 990 organization, check this box and	is for the organiz	ation's first, secor	nd, third, fourth, c	or fifth tax year as	a section 501(c)	(3)
Sec	tion C. Computation of Pu						
15	Public support percentage for 20	11 (line 8, columi	n (f) divided by lir	ne 13, column (f))	1	15	%
16	Public support percentage from	2010 Schedule A,	Part III, line 15			16	%
	tion D. Computation of Inv			9			
17	Investment income percentage f	or <b>2011</b> (line 10c,	column (f) divide	d by line 13, colu	ımn (f))	17	%
18	Investment income percentage f	rom <b>2010</b> Schedu	le A, Part III, line	17		18	%
	a 33-1/3% support tests — 2011. If	the organization	did not check the	box on line 14, a	and line 15 is more	e than 33-1/3%. a	and line 17
	is not more than 33-1/3%, check	this box and <b>sto</b>	<b>p here.</b> The organ	nzation qualifies a	as a publicly supp	orted organizatioi	ր ▶ ∐
ı	<b>b 33-1/3% support tests</b> — <b>2010.</b> If line 18 is not more than 33-1/3%						33-1/3%, and inization ►
20	Private foundation. If the organi	zation did not che	eck a box on line_	14, 19a, or 19b, c	check this box and	see instructions	<u> </u>

Schedule A	(Form 990 or	990-EZ) 201	1 REAC	H INST	TUTE F	OR SCH	OOL LE	ADERSHI:	P 27-1	274290	Page <b>4</b>
Part IV	Supplemer Part II, Iine (See instru	ntal Inform 17a or 17	<b>ation.</b> Co b; and P	omplete f art III, lir	this part ie 12. Al:	to provid	de the e lete this	xplanatio part for	ns required t any additiona	oy Part II, line al information	10;
<del>_</del>											
	·										
							<b>-</b> -				
					~						

#### 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, lines 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ► Attach to Form 990. ► See separate instructions.

2011

Open to Public Inspection

Name of the organization Employer identification number REACH INSTITUTE FOR SCHOOL LEADERSHIP 27-1274290 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 Total number at end of year 2 Aggregate contributions to (during year). Aggregate grants from (during year) Aggregate value at end of year 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? Yes No Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can 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? Part II | Conservation Easements. Complete if the organization answered 'Yes' to Form 990. Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 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 Tax Year a Total number of conservation easements 2a 2b **b** Total acreage restricted by conservation easements c Number of conservation easements on a certified historic structure included in (a) 20 d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic 2d structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ► Number of states where property subject to conservation easement is located > Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? No Yes Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶\$ Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(ı) and section 170(h)(4)(B)(ıı)? No 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 (ASC 958), 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 (ASC 958), 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 Revenues included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items a Revenues included in Form 990, Part VIII, line 1 b Assets included in Form 990, Part X

Schedule D (Form 990) 2011 REACI				27-127		Page 2	
Part III   Organizations Mainta				-			
3 Using the organization's acquisit items (check all that apply)	ion, accession, a			g that are a significant u	ise of its colle	ction	
<b></b>	Public exhibition d Loan or exchange programs						
b Scholarly research c Preservation for future gener	rations	e [ ] Other		<del></del>			
4 Provide a description of the orgal Part XIV.		ions and explain ho	w they further the organ	nization's exempt purpos	se ın		
5 During the year, did the organiza assets to be sold to raise funds in					Yes	□ No	
Part IV Escrow and Custodia line 9, or reported an	I Arrangemer amount on Fo	orm 990, Part X,	the organization ar line 21.	swered 'Yes' to For	m 990, Pai	rt IV,	
1a Is the organization an agent, true included on Form 990, Part X?				her assets not	Yes	No	
<b>b</b> If 'Yes,' explain the arrangement	t in Part XIV and	complete the follow	ing table:		A		
a Bogunnung halanga				1c	Amount		
<ul><li>c Beginning balance</li><li>d Additions during the year</li></ul>				1d			
e Distributions during the year				1e			
f Ending balance				1f			
2a Did the organization include an a	amount on Form	990. Part X. line 21	>	L	Yes	No	
<b>b</b> If 'Yes,' explain the arrangement		500, r are rs,o = r		1		•	
Part V Endowment Funds. Co		organization and	swered 'Yes' to For	m 990, Part IV, line	10.		
	(a) Current yea	(b) Prior yea	r (c) Two years bac	k (d) Three years back	(e) Four yea	ars back	
1 a Beginning of year balance.							
<b>b</b> Contributions							
c Net investment earnings, gains, and losses							
d Grants or scholarships						1	
<ul> <li>Other expenditures for facilities and programs</li> </ul>							
f Administrative expenses					<del> </del>	<del></del>	
g End of year balance	L						
2 Provide the estimated percentag	-		ne 1g, column (a)) held	as:			
a Board designated or quasi-endov		%					
<b>b</b> Permanent endowment		Q.					
c Temporarily restricted endowmer The percentages in lines 2a, 2b,		% %					
•							
3a Are there endowment funds not organization by	in the possessior	of the organization	that are held and adm	inistered for the	Yes	No	
(i) unrelated organizations					3a(i)	<del>  ""</del>	
(ii) related organizations					3a(ii)	+-	
<b>b</b> If 'Yes' to 3a(ii), are the related of	organizations list	ed as required on So	chedule R?		3b		
4 Describe in Part XIV the intended	_				<del></del>		
Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10.							
Description of property	(a)	Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book v	ralue	
1 a Land	<u> </u>						
<b>b</b> Buildings	<u> </u>			,,		<del></del>	
c Leasehold improvements	<u> </u>		10 651	0.440			
<b>d</b> Equipment	<u> </u>		13,651.	3,413.	10	<u>,238.</u>	
e Other	nn (d) must seus	1 Form 000 Dad Y	ookumm (D) km = 10(-) 3			1 220	
Total. Add lines 1a through 1e (Colum BAA	ını (u) must equa	і гонні 990, Рап X,	columni (b), line 10(c) )		lule <b>D</b> (Form 9	90) 2011	

Schedule D (Form 990) 2011 REACH INSTITUTE FOR SCHOOL LEADERSHIP

27-1274290

Page 3

Sche	dule D (Form 990) 2011 REACH INSTITUTE FOR SCHOOL LEADERSHIP	27-1274290	Page 4
Parl	XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statemen	ts	
1	Total revenue (Form 990, Part VIII, column (A), line 12)		949,305.
2	Total expenses (Form 990, Part IX, column (A), line 25)		986,382.
3	Excess or (deficit) for the year Subtract line 2 from line 1		-37,077.
4	Net unrealized gains (losses) on investments		
5	Donated services and use of facilities		
6	Investment expenses		
7	Prior period adjustments		
	Other (Describe in Part XIV.)		
	Total adjustments (net) Add lines 4 through 8		
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9		-37,077.
	XII Reconciliation of Revenue per Audited Financial Statements With Re	venue per Return	· -
	Total revenue, gains, and other support per audited financial statements .	1	949,305.
	Amounts included on line 1 but not on Form 990, Part VIII, line 12		· · <u>-</u>
	Net unrealized gains on investments 2a		
	Donated services and use of facilities 2b		
	Recoveries of prior year grants 2c		
	Other (Describe in Part XIV )		
	Add lines 2a through 2d	2e	
	Subtract line 2e from line 1	3	949,305.
		3	949, 303.
	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
	Investment expenses not included on Form 990, Part VIII, line 7b 4a	<del></del>	
	Other (Describe in Part XIV)		
	Add lines 4a and 4b	4c	040 205
_	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	949,305.
	XIII   Reconciliation of Expenses per Audited Financial Statements With E		006 200
	Total expenses and losses per audited financial statements	1	986,382.
	Amounts included on line 1 but not on Form 990, Part IX, line 25		
	Donated services and use of facilities 2a		
	Prior year adjustments 2b		
	Other losses 2c		
	Other (Describe in Part XIV )		
	Add lines 2a through 2d		
	Subtract line 2e from line 1	3	986,382.
	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
	Investment expenses not included on Form 990, Part VIII, line 7b.		
	Other (Describe in Part XIV )		
	Add lines 4a and 4b	4c	006 202
	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5	986,382.
	XIV   Supplemental Information  Determine the provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a	and A. Dark N. Januar 15 and a	OI-
Part \	V, line 4, Part X, line 2, Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4l dditional information.	o. Also complete this part to p	rovide
	~		
BAA	TEEA3304L 05/25/11	Schedule <b>D</b> (F	orm 990) 2011

Schedule <b>D</b>	(Form 990) 2011	REACH	INSTITUTE I	FOR SCHOOL	LEADERSH	IP	27-127	4290	Page 5
Part XIV	(Form 990) 2011 Supplementa	l Informa	tion (continue	ed)					
									-
									. <b>_</b>
		<i>-</i>							
									. – – – -
									. – – – -
									· <b></b>
									_

BAA

# SCHEDULE O (Form 990 or 990-EZ)

### Supplemental Information to Form 990 or 990-EZ

OMB No 1545-0047

2011

Department of the Treasury Internal Revenue Service

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

► Attach to Form 990 or 990-EZ.

Open to Public Inspection

Name of the organization REACH INSTITUTE FOR SCHOOL LEADERSHIP	Employer identification number 27–1274290				
FORM 990, PART III, LINE 4A - PROGRAM SERVICE ACCOMPLISHMENTS					
INTERN_CREDENTIAL PROGRAM: DESIGNED FOR NEW TEACHERS WITHOUT A	CREDENTIAL, THE REACH				
INTERN_CREDENTIAL_PROGRAM_ALLOWS_WORKING_TEACHERS_TO_EARN_A_SIN	INTERN CREDENTIAL PROGRAM ALLOWS WORKING TEACHERS TO EARN A SINGLE OR MULTIPLE				
SUBJECT PRELIMINARY TEACHING CREDENTIAL OVER THE COURSE OF 21 MONTHS. USING					
JOB-EMBEDDED COACHING, THE PROGRAM FOCUSES ON THE PERSONAL AND PROFESSIONAL					
DEVELOPMENT_OF_NEW_TEACHERS, GROUNDED_IN_THEIR_ACTUAL_EXPERIENC	ES WITH STUDENTS IN				
THE CLASSROOM.					
PROFESSIONAL TEACHER INDUCTION PROGRAM: THE REACH PROFESSIONAL	TEACHER INDUCTION				
PROGRAM SUPPORTS NEW TEACHERS, FOLLOWING THE COMPLETION OF A PROGRAM SUPPORTS NEW TEACHERS, FOLLOWING THE COMPLETION OF A PROGRAM SUPPORTS NEW TEACHERS, FOLLOWING THE COMPLETION OF A PROGRAM SUPPORTS NEW TEACHERS, FOLLOWING THE COMPLETION OF A PROGRAM SUPPORTS NEW TEACHERS, FOLLOWING THE COMPLETION OF A PROGRAM SUPPORTS NEW TEACHERS, FOLLOWING THE COMPLETION OF A PROGRAM SUPPORTS NEW TEACHERS, FOLLOWING THE COMPLETION OF A PROGRAM SUPPORTS NEW TEACHERS, FOLLOWING THE COMPLETION OF A PROGRAM SUPPORTS NEW TEACHERS, FOLLOWING THE COMPLETION OF A PROGRAM SUPPORTS NEW TEACHERS, FOLLOWING THE COMPLETION OF A PROGRAM SUPPORTS NEW TEACHERS, FOLLOWING THE COMPLETION OF A PROGRAM SUPPORTS NEW TEACHERS NEW TE	RELIMINARY CREDENTIAL,				
TO MOVE THEIR PRACTICE FROM COMPETENT TO EXCEPTIONAL. THROUGH A	A PARTNERSHIP WITH THE				
NEW TEACHER CENTER AT THE UNIVERSITY OF CALIFORNIA, SANTA CRUZ,	THE PROGRAM LEADS TO				
A PROFESSIONAL CLEAR CREDENTIAL. LIKE THE INTERN PROGRAM, THE	NDUCTION PROGRAM				
EMPHASIZES PERSONALIZED AND JOB-EMBEDDED COACHING.					
LEADERSHIP_PROGRAMS: IN 2009-2010, REACH LAUNCHED THE TEACHER I	LEADERSHIP ACADEMY. THE				
PROGRAM IS BASED ON THE REACH INSTITUTE'S INNOVATED JOB-EMBEDDE	ED, PERSONALIZED, AND				
COLLABORATIVE PRACTICES AND INCLUDES THREE INTEGRATED PROFESSION	NAL DEVELOPMENT				
OPPORTUNITIES: TEACHER LEADER PROFESSIONAL DEVELOPMENT, COACH 1	RAINING, INSTRUCTIONAL				
LEADERSHIP ADMINISTRATIVE SERVICES CREDENTIAL AND PILOT M.ED. I	PROGRAM.				
FORM 990, PART VI, LINE 11B - FORM 990 REVIEW PROCESS					
DRAFT COPY PROVIDED TO BOARD FOR REVIEW PRIOR TO FILING.					
FORM 990, PART VI, LINE 19 - OTHER ORGANIZATION DOCUMENTS PUBLICLY AV	/AILABLE				
DOCUMENTS AVAILABLE UPON REQUEST.					