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DLN: 93493133009763

Department of the Treasury

# **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

ntemal	Revenue	Service	► The organization may have to use a copy	of this return to satis	fy state reporting	requireme	nts	Inspection
A Fo	r the 2	2011 ca	lendar year, or tax year beginning 10-01-2011	L and ending 09-30-2	2012	D Employ	er id	lentification number
_		pplicable	C Name of organization Reading is Fundamental Inc					
_	dress ch	_	Doing Business As		<del></del>	52-097 E Telepho		
_	me char	-				(202)5	336-	-3400
_	tıal retur		Number and street (or P O box if mail is not deliver 1730 Rhode Island Avenue NW 11th FL	ed to street address) Roon	n/suite			s \$ 23,012,104
_	rmınated							
	ended r		City or town, state or country, and ZIP + 4 Washington, DC 20036					
Apı	plication	pending						
			<b>F</b> Name and address of principal officer Carol Hampton Rasco		<b>H(a)</b> Is the affilia		retui	rn for ┌ Yes ┌ No
			1730 Rhode Island Avenue NW 11th FL		aiiiia	tes		1 165 14 110
			Washington, DC 20036		H(b) Are al			·
 <b>r</b> Ta	x-exem	pt status	▼ 501(c)(3)	4947(a)(1) or 527	_	o," attach a p exemptic		t (see instructions)
1 W	ahsita	:: <b>-</b> www			H(c) Grou	pexemptic	JII II	umber P
					<u>                                     </u>			
			Corporation Trust Association Other		<b>L</b> Year of for	mation 197	3	M State of legal domicile DC
Pa	rt I		mary					
			escribe the organization's mission or most sig ng children to read by making reading a fun an		eryday lıfe			
ತ								
Governance	-							
<u> </u>	2 0	Check th	is box দ if the organization discontinued its	s operations or dispose	ed of more than 2	5% of its r	net a	assets
<u> </u>	3 1	Number	of voting members of the governing body (Par	t VI, line 1a)			3	27
త ల	4 1	Number	of independent voting members of the governi	ng body (Part VI, line	1b)		4	27
Ē.	<b>5</b> T	Γotal nur	mber of individuals employed in calendar year	2011 (Part V, line 2a	)		5	84
Activities &	<b>6</b> ⊺	Γotal nur	mber of volunteers (estimate if necessary) .				6	400,027
۹.	1		related business revenue from Part VIII, colu	• • • • • • • • • • • • • • • • • • • •		<b>⊢</b>	7a	110,305
	<b>b</b> N	Net unre	lated business taxable income from Form 990	)-T, line 34			7b	3,355
		C t	but and an at (Dark VIII based by		Prio	r Year	4.1	Current Year
क	8		butions and grants (Part VIII, line 1h) m service revenue (Part VIII, line 2g)	•	35,834,04		22,222,310	
Ravenue	10		ment income (Part VIII, olumn (A), lines 3,			425,83		5,357
Ť	11		revenue (Part VIII, column (A), lines 5, 6d, 8			233,5	-	287,025
	12		revenue—add lines 8 through 11 (must equal l	line	-	寸		
	1.5					36,495,83	-	22,517,378
	13		and similar amounts paid (Part IX, column (A			514,3	0	777,857
	14 15		ts paid to or for members (Part IX, column (A) es, other compensation, employee benefits (P)		0			
\$	13	5-10)			4,658,804		2,540,396	
Expenses	16a	Profes	sional fundraising fees (Part IX, column (A), l	ıne 11e)		61,76	553,000	
ਡੌ	b	Total fu	ndraising expenses (Part IX, column (D), line 25) $\blacktriangleright 1,11$	10,554	_			
	17		expenses (Part IX, column (A), lines 11a-11			28,705,5	18,980,011	
	18		expenses Add lines 13-17 (must equal Part		·	33,940,41	_	22,851,264
- en	19	Keven	ue less expenses Subtract line 18 from line 1	14		2,555,36 of Current	${}^{-}$	-333,886
කුමු වෙඩු						ear	_	End of Year
Net Assets of Fund Balances	20	Total a	assets (Part X, line 16)			21,215,98	83	15,567,874
2 E	21		iabilities (Part X, line 26)			6,340,79	93	1,026,624
	22		sets or fund balances Subtract line 21 from l	ine 20		14,875,19	90	14,541,250
	rt II		ature Block	including account	a sobjectivities over the			to the best of
now	ledge a		erjury, I declare that I have examined this return, f, it is true, correct, and complete. Declaration of					
(now	ledge.							
		****	**		120	13-05-13		
Sigr	1		ture of officer		Da			
Her		<u>C</u> arol	Hampton Rasco President and CEO					
			or print name and title					
		Preparer		Date 2012-04-20	Check if			ayer identification number
Paid		sıgnature	Frank H Smith	2013-04-30	self- employed 🕨 🦵	(see instru P00639053		15 <i>)</i>
	arer's		ame (or yours Raffa PC	_1		EIN <b>&gt;</b> 52-	1511	275
Use (	Only		nployed), and ZIP + 4 1899 L Street NW Suite 900				1911	

Washington, DC 20009 May the IRS discuss this return with the preparer shown above? (see instructions) . . Phone no 🕨 (202) 822-5000

Form	1990 (2011)					Page <b>2</b>
Par		t of Program Serv				
_		e organization's mission	• •	estion in this Part III		,,
<b>1</b>	•	-		orica in which all child	Iren have access to books a	nd discover the love and
valu	e of reading Founded	l ın 1966, RIF motivate	s children to rea	id by working with then	n, their parents, and commurerserved children from birth	nity members to make
	Did the organization	n undertake any signific	ant program ser	rvices during the year	which were not listed on	
_	the prior Form 990		· · · ·	· · · · · ·		┌ Yes ┌ No
	If "Yes," describe tl	hese new services on S	chedule O			
3	services?	n cease conducting, or i		t changes in how it con		✓ Yes
	If "Yes," describe t	hese changes on Sched	ule O			
4	expenses Section	501(c)(3) and 501(c)(4	l) organizations	and section 4947(a)(	ee largest program services, 1) trusts are required to repo n program service reported	
<u> </u>	(Code	) (Expenses \$	16,101,458	ıncludıng grants of \$	777,857 ) (Revenue \$	)
	encourage the particip children with approxim Distribution Program ( the IBDP, individual lo- contractually specified that the local funds ha contributions from nor	nating children to read for ple nately 10 million new, free both IBDP)" contract with the U S cal RIF programs order inexp amount of locally raised fun hive been paid, RIF then remind governmental donors to fun	asure Through compoks Most "local RIF Department of Edubensive books from dis directly to the botts the balance of the different of the BFO service at the BFO service as	munity volunteers in every F programs" that conduct the Location (Education) RIF hat a list of approximately 140 book suppliers and then submate invoice to the book supplet tocal RIF programs Dunno the book supplet but tocal RIF programs Dunno the supplet supplet but tocal RIF programs Dunno the supplet supplet supplet supplet the supplet suppl	book distribution also includes mostate and U S territory, RIF provide BFO service receive funds from I s contracted with Education to ope approved book suppliers. The localitist he invoice to RIF. After RIF collers from federal funds it has draw an IBDP contract was remain IBDP contract with the DOE	ded approximately 4 million RIF's "Inexpensive Book rate the IBDP since 1976 Under il program submits a onfirms with the book suppliers n down RIF also receives
	(0.1	) (F +	1 010 555		) (D	•
4b					) (Revenue \$ the specific needs of individual coi RIF program services A multidiscip	
	(Code	) (Expenses \$	169,180	including grants of \$	) (Revenue \$	
40	•	rams include literacy events	,		ghout the United States, which help	p promote literacy and inform
	(Code	) (Expenses \$	62,430	including grants of \$	) (Revenue \$	
	Volunteer Recognition winners based upon the innovative programs to 2009, RIF launched the	Each year, RIF solicits nom ne individual's demonstrated hat encourage family and co le RIF Ambassadors Initiative regional gatherings in cities a	inations from aroun concern for children mmunity involveme as a way to furthe	d the country for its Volunte n and education, exceptiona ent The winners and their r r engage RIF's volunteers a	eer of the Year Awards (VOYA) A p I dedication to fulfilling RIF's mission iominators are honored at a celebra nd leverage the enthusiasm of RIF or RIF's volunteers to network with	on, and development of ation in Washington, DC In -'s volunteers in all 50 states RIF
	(Code	) (Expenses \$	56,112	ıncludıng grants of \$	) (Revenue \$	2.686 )
	Literacy services RIF' are designed to help p workshops, book distr emerging literacy skills their colleagues and co	s literacy services include far parents take a leading role in ibutions, and reading celebra s The training is done throug	nily and community encouraging their c tions RIF conducts th a "train the trains	engagement and literacy t children's literacy developme literacy training for early ch er" model that prepares par	raining for educators Family and cent With the guidance of RIF's vol hildhood educators This training is ticipants to return to their commun 's program activities to identify are	community engagement activities unteers, parents participate in designed to support children's nities and deliver the training to
<u></u>	0.44-					
4d	Other program sei (Expenses \$	rvices (Describe in Sch 118,542 ind	nedule O ) :luding grants of	F <b>s</b>	) (Revenue \$	2,686 )
	Total program ser		18,308,735	•	, (ποτοπαο ψ	2,000 /
	. Ocar program ser	TICC CAPCIISCSF P	10,500,752	<u> </u>		

Part IV	Checklist of	Required	Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	110
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 🕏	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part $I$	3		No
4	<b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If</i> "Yes," complete Schedule C, Part II	4		N o
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part 1	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," complete Schedule D, Part II.	7		Νο
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		No
9	Did the organization report an amount in Part X, line 21, 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		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part $\sqrt{2}$	10	Yes	
11	If the organization's answer to any of the following questions is 'Yes,' then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line10? <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? If "Yes," complete Schedule D, Part VII.	11b		N o
c	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.	11c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.	11d		N o
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	11f	Yes	
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	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
Ь	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, Part 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? If "Yes," complete Schedule F, Part II and IV.	15		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the U S ? If "Yes," complete Schedule F, Part III and IV	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</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? If "Yes," complete Schedule G, Part II	18	Yes	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		N o
20a	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach its audited financial statement to this return? <b>Note.</b> All Form 990 filers that operated one or more hospitals must attach audited financial statements	20b		

Par	t 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 $1^2$ If "Yes," complete Schedule I, Parts I and II	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? If "Yes," complete Schedule I, Parts I and III	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? If "Yes," complete 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, that was issued after December 31, 2002? If "Yes," answer questions 24b-24d and complete Schedule K. If "No," go to line 25	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? If "Yes," complete Schedule L, Part $I$	25a		No	
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No	
26	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		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</i> "Yes," complete Schedule L, Part III	27		No	
28	Was the organization a party to a business transaction with one of the following parties? (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)				
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part				
	<i>IV</i>	28a		No	
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No	
	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 owner? If "Yes," complete Schedule L, Part $IV$	28c		No	
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		No	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If</i> "Yes," complete Schedule M	30		No	
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No	
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No	
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part $I$	33		No	
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		No	
35a	Is any related organization a controlled entity of the filing organization within the meaning of section $512(b)(13)$ ?	35a		No	
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	35b		No	
36	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If</i> "Yes," complete Schedule R, Part V, line 2	36		No	
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No	
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O	38	Yes		

Part V	Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response to any question in this Part V	•	.1	
			Yes	No
a	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable			
_				
	<b>1a</b> 34			
h	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable			
	1b			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			
	gaming (gambling) winnings to prize winners?	1c	Yes	
a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements filed for the calendar year ending with or within the year covered by this			
	return			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	26	V	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
a	Did the organization have unrelated business gross income of \$1,000 or more during the	3-	Yes	
_	year?	3a		
Ь	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	Yes	
a	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 or securities account)?	4a		No
<b>L</b>	·			-110
ט	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			
	Weekler annual term a market and a little transfer to the second and the second a	<del></del>		
a	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		Νo
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?			
		5c		
a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	6a		Νo
	organization solicit any contributions that were not tax deductible?			
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b		
	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and	7a	Yes	
	services provided to the payor?			
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?	<b>7</b> c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year			
	Delth and the second of the se			
е	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
				110
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		
	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		
	Sponsoring organizations maintaining donor advised funds.			
a	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		
		90		
0	Section 501(c)(7) organizations. Enter			
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club			
	facilities			
1	Section 501(c)(12) organizations. Enter			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other			
	sources against amounts due or received from them )			
)-	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
		ı∠a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
2	Section 501(c)(29) qualified nonprofit health insurance issuers.			
		,		
а	Is the organization licensed to issue qualified health plans in more than one state?  Note. All 501(c)(29) organizations must list in Schedule O each state in which they are licensed to issue			
	qualified health plans, the amount of reserves required by each state, and the amount of reserves the organization			
	allocated to each state	13a		
b	Enter the aggregate amount of reserves the organization is required to maintain by			
	the states in which the organization is licensed to issue qualified health plans			
C	Enter the aggregate amount of reserves on hand			
_	13c			_
<del>1</del> a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Νo
	If "Yes," has it filed a Form 730 to report these payments? If "No," provide an explanation in Schodule O	I		

**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.

Se	ction 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					
b	Enter the number of voting members included in line 1a, above, who are independent					
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		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? .	3		No		
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No		
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No		
6	Did the organization have members or stockholders?	6		Νo		
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		No		
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		No		
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following					
а	The governing body?	8a	Yes			
b	Each committee with authority to act on behalf of the governing body?	8b	Yes			
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No		
	ction B. Policies (This Section B requests information about policies not required by the Internal					
ке	venue Code.)		Yes	No		
10a	Did the organization have local chapters, branches, or affiliates?	10a		No		
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,					
	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b				
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes			
b	Describe in Schedule O the process, if any, used by the organization to review the Form 990					
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes			
b	Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes			
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done $\dots \dots \dots$	12c	Yes			
13	Did the organization have a written whistleblower policy?	13	Yes			
14	Did the organization have a written document retention and destruction policy?	14	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?					
а	The organization's CEO, Executive Director, or top management official	15a	Yes			
	Other officers or key employees of the organization	15b	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?	16a		No		
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the					
	organization's exempt status with respect to such arrangements?					
Se	ction C. Disclosure					
17	List the States with which a copy of this Form 990 is required to be filed ►AL, AK, AZ, AR, CA, CT, FL, GA, HI  ME, MD, MA, MI, MN, MS, NH, NJ, I  OH, OK, PA, RI, SC, TN, UT, VA, W	N, M	Y,NC,			
	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply    Own website. Another's website. Upon request	. , ***	,			

- 19 Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public 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 Former Ferrufino

1730 Rhode Island Ave NW 11th Floor

Washington, DC 20036 (202) 536-3400

# <u>Part VII</u> Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

#### 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, and **current** key employees Enter -0 in columns (D), (E), and (F) if no compensation was paid
- List all of the organization's current key employees, if any See instructions for definition of "key employee"
- ◆ List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- ◆ List all of the organization's **former** officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations

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

◆ 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

(A)  Name and Title	(B) Average hours per week (describe hours	Position more unles an	on (de thai	C) o no n one son er ai	t che e bo is bo nd a stee	eck x, oth		(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
	for related organizations in Schedule O)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former		Miscy	organizations
(1) John F Remondı Chaırman	1 50	х		Х				0	0	0
(2) Robert S Diamond Vice Chairman	1 50	Х		Х				0	0	0
(3) William ME Rachal Jr Treasurer	1 50	Х		Х				0	0	0
(4) Loretta Barrett Secretary	1 50	Х		Х				0	0	0
(5) Alexandra Armstrong Director	1 50	х						0	0	0
(6) Kenneth Bentley Director	1 50	х						0	0	0
(7) Marcia Carlucci Director	1 50	х						0	0	0
(8) Christopher Cerf Director	1 50	х						0	0	0
(9) Marie-Agnes Daumas Director	1 50	х						0	0	0
(10) Lon R Greenberg Director	1 50	х						0	0	0
(11) William Hansen Director	1 50	х						0	0	0
(12) Crystal Echo Hawk Director	1 50	х						0	0	0
(13) Roberta Horton Director	1 50	х						0	0	0
(14) Juanıta James Dırector	1 50	Х						0	0	0
(15) JJ Johnson Director	1 50	х						0	0	0
(16) Dr Claude A Mayberry Director	1 50	х						0	0	0
(17) Christy Moberly Director	1 50	Х						0	0	0

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

(A) Name and Title	(B) Average hours per week (describe	unles an	on (d e tha	n on son er a	e bo ıs b nd a	x, oth		(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the organization and
	hours for related organizations in Schedule O)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former		MISC)	related organizations
(18) Michael Monahan Director	1 50	х						0	0	0
(19) Emely Moore Director	1 50	х						0	0	0
(20) Margaret McNamara Pastor Director	1 50	Х						0	0	0
(21) John F Polstein Director	1 50	х						0	0	0
(22) Lynda Johnson Robb Director	1 50	х						0	0	0
(23) Richard D Simmons Director	1 50	х						0	0	0
(24) Carolyn Sımpson Dırector	1 50	х						0	0	0
(25) Dr Carol B Sisco Director	1 50	х						0	0	0
(26) Arthur H White Director	1 50	х						0	0	0
(27) Rick Zimmerman Director	1 50	х						0	0	0
(28) Carol Hampton Rasco President and CEO	40 00			х				228,390	0	19,610
(29) Ernestine Benedict VP of Marketing/Comm	40 00					х		134,952	0	7,335
(30) Lynn Croneberger Former Officer - until 08/2011	40 00						х	132,072	0	12,171
41 61 7 1 1			٠.				►			
c Total from continuation sheets	to Part VII, Sect	ion A .					<b>F</b>			
d Total (add lines 1b and 1c) .							<b>F</b>	495,414	0	39,116

\$100,000 of reportable compensation from the organization  $\blacktriangleright 3$ 

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

#### Section B. Independent Contractors

Complete this table for your five highest compensated independent contractors that received more than  $\$100,\!000$  of compensation from the organization Report compensation for the calendar year ending with or within the organization's tax year

(A)	(B)	(C)
Name and business address	Description of services	Compensation
Mothers Industries LLC 595 11th Avenue New York, NY 10036	PSA & video production	261,003
Development Resources Inc 1601 N Kent St 1200 Arlington, VA 22209	Professional fundraising	207,040
Fable Vision Inc 308 Congress St 6th FL Boston, MA 02210	Web development	159,250
BDO 7101 Wisconsin Ave Suite 800 Bethesda, MD 208144827	Professional consulting	137,325
Smarter Learning Group Inc 4011 Yoke Drive Hampstead, MD 21074	Professional consulting	136,041
2 Total number of independent contractors (including but not limited to those listed above)	who received more than	

\$100,000 of compensation from the organization  $\blacktriangleright 5$ 

Form 99								Page <b>9</b>
Part V	<b>/!!!!</b>	Statement o	of Revenue		<b>(A)</b> Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512,513,or 514
\$ \$\$	1a	Federated cam	paigns 1a					
ar Our	b	Membership du	es <b>1b</b>					
ું. ⊞	c	Fundraising eve	ents <b>1</b> c	427,077				
<u>≅,≅</u>	d	Related organiz	zations 1d					
E, S	e	Government grants	s (contributions) 1e	14,233,811				
Contributions, gifts, grants and other similar amounts	f g	sımılar amounts no Noncash contri	ons, gifts, grants, and <b>1f</b> ot included above ibutions included in ,024	7,561,422				
0 a 0 ¥	h		s 1a-1f	▶	22,222,310			
				Business Code				
il.	2a	Training programs		900099	2,686	2,686		
£9.	b							
93	c							
<u>5</u>	d							
ø ⊊	e							
Program Service Revenue	f	All other progra	am service revenue					
Š		T-4-1 A dd l	- 2- 25		2.505			
	д 3		s 2a-2f		2,686			
			ome (including dividen	- · · ·	1,744			1,744
	4	<ul><li>and other similar amounts) .</li><li>Income from investment of tax-exemp</li></ul>		F	_,			
	5				314,748			314,748
		,	(ı) Real	(II) Personal				
	6a	Gross rents	132,915	,				
	b	Less rental	127,972					
	c	expenses Rental income	4,943					
		or (loss)		<u> </u>	4,943			4,943
	d	Net rental incol	me or (loss)  (i) Securities	(II) Other	7,943			4,943
	7a	Gross amount from sales of assets other than inventory	(i) Securities	173,948				
	b	Less cost or other basis and sales expenses		170,335				
	c	Gain or (loss)		3,613				
	d	Net gain or (los	ss)		3,613			3,613
Other Revenue	8a	of contributions						
ά			a	49,500				
‡ ₽	ь	Less direct ex	penses <b>b</b>					
δ	c	Net income or (	(loss) from fundraising	events 🕦	-146,919			-146,919
	9a	Gross income f See Part IV, lin	rom gaming activities ne 19 a					
	b c		penses <b>b</b> (loss) from gaming acti					
	10a	Gross sales of returns and allo	ınventory, less					
	ь	Less cost of a	oods sold <b>b</b>					
	С		(loss) from sales of inv	entory 🟲				
		Miscellaneous		Business Code				
	11a	Promotional rev	venue	900099	110,000		110,000	
	b	O ther revenue		900099	3,948			3,948
	c	O n-Line store		454110	305		305	
	d	All other revenue	ue					
	e	Total. Add lines	s 11a-11d		114,253			
	12	Total revenue.	See Instructions .	▶	22,517,378	2,686	110,305	182,077

## Part IX Statement of Functional Expenses

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

	ot include amounts reported on lines 6b, o, 9b, and 10b of Part VIII.	<b>(A)</b> Total expenses	<b>(B)</b> Program service expenses	(C) Management and general expenses	( <b>D)</b> Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States See Part IV, line 21	777,857	777,857		
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				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	244,200	65,934	178,266	
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	1,934,643	785,331	941,937	207,375
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	72,821	29,712	34,626	8,483
9	Other employee benefits	120,587	49,501	59,624	11,462
10	Payroll taxes	168,145	65,560	85,569	17,016
11	Fees for services (non-employees)				
а	Management				_
b	Legal	50,784		50,784	
c	Accounting	235,486		235,486	_
d	Lobbying				
e	Professional fundraising See Part IV, line 17	553,000			553,000
f	Investment management fees	8		8	
g	Other	1,317,295	834,414	344,120	138,761
12	Advertising and promotion				
13	Office expenses	271,713	129,919	72,269	69,525
14	Information technology	88,743	16,158	72,585	
15	Royalties				
16	Occupancy	881,523	4,375	877,148	
17	Travel	143,485	130,440	5,752	7,293
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	399,183		399,183	
23	Insurance	28,697		28,697	
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)				
а	Books-local RIF prgms	15,288,141	15,280,333	2,309	5,499
b	Printing & reproduction	231,336	138,134	4,673	88,529
С	Bad debt expense	31,500		31,500	
d	Other services	12,117	1,067	7,439	3,611
е					
f	All other expenses				
25	Total functional expenses. Add lines 1 through 24f	22,851,264	18,308,735	3,431,975	1,110,554
26	Joint costs. Check here ► ☐ 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				rm <b>990</b> (2011)

Part X **Balance Sheet** (A) (B) Beginning of year End of year 22.191 226,790 1 1 13,499,360 13.831.413 2 3 5,972,505 626,203 15 4 5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of 5 6 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete Part II of 6 7 8 9 234.012 9 220.555 Prepaid expenses and deferred charges . . . . . . 10a Land, buildings, and equipment cost or other basis Complete 2,875,514 Part VI of Schedule D 10a 10b b Less accumulated depreciation . . . . . 2,212,601 1,485,448 **10c** 662,913 11 11 12 12 Investments—other securities See Part IV, line 11 . . . . . . 13 13 Investments—program-related See Part IV, line 11 . . 14 14 2,452 15 0 15 21,215,983 15,567,874 16 Total assets. Add lines 1 through 15 (must equal line 34) . . . 16 3,876,365 17 546,954 17 Accounts payable and accrued expenses . 18 18 19 1,100,000 19 20 20 21 21 Escrow or custodial account liability Complete Part IV of Schedule D . . . Liabilities 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified 22 23 Secured mortgages and notes payable to unrelated third parties . . . 23 24 24 Unsecured notes and loans payable to unrelated third parties . . . . 25 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 1,364,428 25 479,670 D . . . . 26 6,340,793 26 1,026,624 **Total liabilities.** Add lines 17 through 25 . . . . . Organizations that follow SFAS 117, check here ▶ 🔽 and complete lines 27 Balances through 29, and lines 33 and 34. 27 5,408,747 27 5,174,082 Unrestricted net assets . . . . 8,824,833 28 8,775,558 28 Temporarily restricted net assets . . . . . Fund 591,610 29 641,610 29 Permanently restricted net assets . . . . . Organizations that do not follow SFAS 117, check here ▶ 

and complete lines 30 through 34. ö 30 Capital stock or trust principal, or current funds . . . . . . 30 Assets 31 31 Paid-in or capital surplus, or land, building or equipment fund . . . . . 32 32 Retained earnings, endowment, accumulated income, or other funds ¥ 33 14.875.190 33 14.541.250 Total net assets or fund balances . . . . . 34 Total liabilities and net assets/fund balances . . . . . 21.215.983 15.567.874

Pal	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		22.5	517,378
2	Total expenses (must equal Part IX, column (A), line 25)	2			351,264
3	Revenue less expenses Subtract line 2 from line 1	3		- 3	33,886
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		14,8	375,190
5	Other changes in net assets or fund balances (explain in Schedule O)	5			- 5 4
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		14,5	541,250
Par	Tt XII Financial Statements and Reporting  Check if Schedule O contains a response to any question in this Part XII		•	T	No
1	Accounting method used to prepare the Form 990			165	140
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? $\cdot$ .		2a		No
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
C	If "Yes," to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of taudit, 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 its Schedule O		2c	Yes	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were is on a separate basis, consolidated basis, or both	ssued			
	▼ Separate 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?	e	За	Yes	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the raudit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	equired	3b	Yes	

As Filed Data -

DLN: 93493133009763

# OMB No 1545-0047

Inspection

### **SCHEDULE A**

(Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service

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

**Public Charity Status and Public Support** 

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

Name of the organization Reading is Fundamental Inc

**Employer identification number** 

								52-09762		
Part I			blic Charity Sta						structions	
_			e foundation becaus					ox )		
1	· ·		on of churches, or a				)(1)(A)(i).			
2	A school d	escribed	in <b>section 170(b)(1</b>	l <b>)(A)(ii).</b> (At	tach Schedu	ıle E)				
з Г	A hospital	or a coo	perative hospital se	rvice organiz	atıon descri	bed in <b>sectio</b>	n 170(b)(1)	(A)(iii).		
4			n organization operal ty, and state	ted in conjun	ction with a	hospital desc	cribed in <b>sec</b>	tion 170(b)(	1)(A)(iii). E	nter the
5	_		erated for the benefi	_	or universit	y owned or o	perated by a	government	al unit descr	 ribed in
	section 170	)(b)(1)(	<b>A)(iv).</b> (Complete P	art II )						
6	A federal, s	tate, or	local government or	government	al unit desc	rıbed ın <b>secti</b>	on 170(b)(1	)(A)(v).		
7	described i	n	at normally receives (A)(vi) (Complete P		al part of its	support from	a governme	ntal unit or fr	om the gene	ral public
8			described in section		A)(vi) (Con	nplete Part II	)			
9			at normally receives					outions, mem	bership fees	, and gross
•	<del>-</del>		ities related to its ex	` '		• •		•	•	
			oss investment inco							
			janızatıon after June						,	
LO 🗆			ganized and operated							
ii									o carry out t	he nurnoses (
,	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 <b>section 509(a)(3).</b> Check the box that describes the type of supporting organization and complete lines 11e through 11h  a									
e   f g	other than section 50 If the organ check this	foundati 9 (a)(2) nization box ist 17, 2	ox, I certify that the on managers and other received a written do 2006, has the organic	her than one	or more pub	licly supporte	ed organizat Type I, Type	ions describe	ed in section	509(a)(1) or
			rectly or indirectly c	ontrols, eithe	er alone or to	oaether with i	persons des	cribed in (ii)		Yes No
			governing body of th					(,	11g(	
	, ,	•	er of a person descri		-				11g(	
			led entity of a perso			hove?			11g(i	
h			ng information about						[9(	···/
(i) Name suppo organız	e of rted	(ii) EIN	(iii) Type of organization (described on lines 1- 9 above or IRC section (see	organızatı col (ı) lıst your gove	(iv)  Is the organization in col (i) listed in your governing document?		cify the on in your t?	(vi) Is the organizate col (i) orga	e Ion In anized	(vii) A mount o support?
			instructions))	Yes	No	Yes	No	Yes	No	1
			//							†
										†
						1		1		†
										†
									<del>                                     </del>	<del> </del>
otal										†
	1			i e	1	i	I	1	1	1

Support Schedule for Organizations Described in IRC 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.)

-	under Part III. II tr	ie organization	talis to quality u	nder the tests	iistea below, pie	ase con	тріете ғ	art III.)
	ection A. Public Support endar year (or fiscal year beginning	1 (-) 2007	(1) 2000	(-) 2000	(4) 2010	(-) 20		(6) Tabal
	ın)	(a) 2007	<b>(b)</b> 2008	<b>(c)</b> 2009	(d) 2010	<b>(e)</b> 20	11	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do							
	not include any "unusual	31,762,83	33,956,840	30,961,457	35,834,041	22,2	222,310	154,737,484
	grants ")							
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							
4	charge <b>Total.</b> Add lines 1 through 3	31,762,83	33,956,840	30,961,457	35,834,041	22.7	222,310	154,737,484
5	The portion of total contributions	31,702,03	33,730,040	30,301,437	33,034,041	22,2	22,310	134,737,404
,	by each person (other than a							
	governmental unit or publicly							
	supported organization) included							19,864,153
	on line 1 that exceeds 2% of the amount shown on line 11, column							
	(f)							
6	Public Support. Subtract line 5							134,873,331
	from line 4							
	ection B. Total Support	<u> </u>	T					
Car	endar year (or fiscal year beginning in)	<b>(a)</b> 2007	<b>(b)</b> 2008	(c) 2009	(d) 2010	<b>(e)</b> 201	.1	(f) Total
7	A mounts from line 4	31,762,836	33,956,840	30,961,457	35,834,041	22,2	22,310	154,737,484
8	Gross income from interest,							
	dividends, payments received							
	on securities loans, rents,	241,491	186,723	214,874	287,567	3	16,492	1,247,147
	royalties and income from similar sources							
9	Net income from unrelated							
	business activities, whether or	811	622	8,554	15,067			25,054
	not the business is regularly	011	922	3,331	13,007			23,031
10	carried on Other income (Explain in Part			+				
10	IV ) Do not include gain or loss							
	from the sale of capital		122	48,434	26		3,948	52,530
	assets							
11	Total support (Add lines 7							156,062,215
12	through 10) Gross receipts from related activi	ties.etc (See ins	tructions )			12		208,500
13	First Five Years If the Form 990 is		•	third fourth or f	fifth tay year as a		organiz	
	check this box and <b>stop here</b>	5 101 till 01 gam2a			cax your ao a	(-)(-)	0.942	<b>▶</b> □
	ection C. Computation of Pu			11! (5)		T T		
14	Public Support Percentage for 20:	-		11 column (r))		14		86 420 %
15	Public Support Percentage for 20:	•				15		88 800 %
16a	<b>33 1/3% support test—2011.</b> If the and <b>stop here.</b> The organization qu	_		•	line 14 is 33 1/3%	or more,	check t	his box <b>►</b> ▼
ь	33 1/3% support test—2010. If the				Sa, and line 15 is 3	33 1/3% o	r more,	
	box and <b>stop here.</b> The organization				,	-,	,	<b>▶</b> □
17a	10%-facts-and-circumstances tes							
	is 10% or more, and if the organization me							ad
	in Part IV how the organization me organization	eets the lacts an	iu circumstances"	test i ne organiz	acion quannes as	a publicly	support	ea ▶□
b	10%-facts-and-circumstances tes	t— <b>2010.</b> If the or	ganızatıon dıd not o	heck a box on lir	ne 13, 16a, 16b, o	r 17a and	line	- 1
	15 is 10% or more, and if the orga	anızatıon meets tl	he "facts and cırcu	mstances" test,	check this box and	d stop her	e.	
	Explain in Part IV how the organiz	ation meets the "	facts and circumst	ances" test The	organization qual	ıfıes as a	publicly	
18	supported organization <b>Private Foundation</b> If the organization	ation did not chac	k a hox on line 13	16a 16h 17a o	r 17h chack this	hoy and e	e e	▶□
	instructions	acion dia not chec	K a box on time 15,	100,100,1700	T T D, CHECK CHIS	DON UNU S		<b>▶</b> □

Schedule A (Form 990 or 990-EZ) 2011 Page 3 Part III Support Schedule for Organizations Described in IRC 509(a)(2) (Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.) Section A. Public Support Calendar year (or fiscal year beginning (a) 2007 **(b)** 2008 (c) 2009 (d) 2010 (e) 2011 (f) Total ın) Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants ") Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose Gross receipts from activities that are not an unrelated trade or business under section 513 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 5 7a Amounts included on lines 1, 2, and 3 received from disqualified persons Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year c Add lines 7a and 7b Public Support (Subtract line 7c from line 6) Section B. Total Support Calendar year (or fiscal year beginning (a) 2007 **(b)** 2008 (c) 2009 (d) 2010 (e) 2011 (f) Total ın) Amounts from line 6 Gross income from interest, 10a dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b C Net income from unrelated 11 business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support (Add lines 9, 10c, 13 11 and 12) First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage Public Support Percentage for 2011 (line 8 column (f) divided by line 13 column (f)) 15 15 Public support percentage from 2010 Schedule A, Part III, line 15 16 16 Section D. Computation of Investment Income Percentage

Investment income percentage for 2011 (line 10c column (f) divided by line 13 column (f))

19a 33 1/3% support tests—2011. 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

18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization Private Foundation If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions

33 1/3% support tests-2010. 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

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

Investment income percentage from 2010 Schedule A, Part III, line 17

17

18

17

18

**▶**[

Part IV	<b>Supplemental Information.</b> Supplemental Information. Complete this part to provide the explanation required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Also complete this part for any additional information. (See instructions).							
	Facts And Circumstances Test							
	Explanation							

Schedule A (Form 990 or 990-EZ) 2011

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DLN: 93493133009763

OMB No 1545-0047

**SCHEDULE D** (Form 990)

Department of the Treasury Internal Revenue Service

**Supplemental Financial Statements** 

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

Open to Public Inspection

	me of the organization adjug is Fundamental Inc	om 55017 See Separate motractions.	Employer identification number
Rea	ading is rundamental inc		52-0976257
Pa	organizations Maintaining Donor Acorganization answered "Yes" to Form 99		
		(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 advifunds are the organization's property, subject to the		or advised <b>Yes No</b>
6	Did the organization inform all grantees, donors, and used only for charitable purposes and not for the ben conferring impermissible private benefit	efit of the donor or donor advisor, or for a	ny other purpose Yes No
Pa	rt II Conservation Easements. Complete	if the organization answered "Yes" t	o Form 990, Part IV, line 7.
1 2	Purpose(s) of conservation easements held by the oil Preservation of land for public use (e.g., recreating Protection of natural habitat Preservation of open space Complete lines 2a-2d if the organization held a qualice easement on the last day of the tax year	on or pleasure) Preservation of an Preservation of a	n historically importantly land area certified historic structure n of a conservation
	easement on the last day of the tax year		Held at the End of the Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
c	Number of conservation easements on a certified his	toric structure included in (a)	2c
d	Number of conservation easements included in (c) a	cquired after 8/17/06	2d
3	Number of conservation easements modified, transfe	erred, released, extinguished, or terminate	ed by the organization during
	the taxable year 🛌	,	
4	Number of states where property subject to conserva	ation easement is located 🛌	<u></u>
5	Does the organization have a written policy regarding enforcement of the conservation easements it holds?		dling of violations, and <b>Yes No</b>
6	Staff and volunteer hours devoted to monitoring, insp	pecting and enforcing conservation easem	nents during the year 🗕
7	Amount of expenses incurred in monitoring, inspecti	ng, and enforcing conservation easement:	s during the year
	<b>▶</b> \$		
8	Does each conservation easement reported on line 2 $170(h)(4)(B)(i)$ and $170(h)(4)(B)(ii)$ ?	(d) above satisfy the requirements of sec	rtion Yes No
9	In Part XIV, describe how the organization reports contained sheet, and include, if applicable, the text of the organization's accounting for conservation easen	the footnote to the organization's financial	
aı	Complete if the organization answered	ons of Art, Historical Treasures,	or Other Similar Assets.
1a	If the organization elected, as permitted under SFAS art, historical treasures, or other similar assets held provide, in Part XIV, the text of the footnote to its fin	116, not to report in its revenue stateme for public exhibition, education or resear	ch in furtherance of public service,
b	If the organization elected, as permitted under SFAS historical treasures, or other similar assets held for provide the following amounts relating to these items	public exhibition, education, or research i	
	(i) Revenues included in Form 990, Part VIII, line 1		<b>▶</b> -\$
	(ii) Assets included in Form 990, Part X		<b>►</b> \$
2	If the organization received or held works of art, histofollowing amounts required to be reported under SFA		or financial gain, provide the
а	Revenues included in Form 990. Part VIII, line 1		<b>▶-</b> \$

**b** Assets included in Form 990, Part X

Part	Organizations Maintaining Co	llections of Art	t, His	toric	al Tre	easu	res, or C	ther	· Similar	Asse	ts (co	ntınued)
3	Using the organization's accession and othe items (check all that apply)	r records, check an	y of th		_		_		se of its col	lection	1	
a	Public exhibition		d	Γ	Loan o	rexch	nange prog	rams				
b	☐ Scholarly research e ☐ Other											
c	Preservation for future generations											
4	Provide a description of the organization's c Part XIV	ollections and expla	ain hov	w they	furthe	r the o	rganızatıor	ı's ex	empt purpo	se in		
5	During the year, did the organization solicit assets to be sold to raise funds rather than								ılar	<u> </u>	Yes	┌ No
Par	Escrow and Custodial Arrang Part IV, line 9, or reported an ar						answere	d "Ye	es" to Fori	n 990	),	
1a	Is the organization an agent, trustee, custoo included on Form 990, Part X?	dian or other interm	ediary	for co	ntrıbut	ions d	rotherass	ets n	ot	Г.	Yes	┌ No
b	If "Yes," explain the arrangement in Part XI $$	V and complete the	follow	ng tal	ble		-					
										Amou	nt	
С	Beginning balance							1c				
d	Additions during the year							1d				
e	Distributions during the year							1e				
f	Ending balance							1f				
2a	Did the organization include an amount on F	orm 990, Part X, lın	e 21?							Γ.	Yes	┌ No
b	If "Yes," explain the arrangement in Part XI	J										
Par	t V Endowment Funds. Complete											
		(a)Current Year	(b)	Prior Ye	$\overline{}$	<b>(c)</b> Tw	o Years Back	_	Three Years B	<del>- + `</del>	Four Y	ears Back
1a	Beginning of year balance	762,296			69,908		507,62	+	532,	440		
b	Contributions	-50,000			44,193		20,00	+				
С	Investment earnings or losses	178			55,199		57,24	0	-14,335			
d	Grants or scholarships							_				
e	Other expenditures for facilities and programs	34,304			7,004		14,95	6	10,	481		
f	Administrative expenses							+				
g	End of year balance	678,170		7	62,296		569,90	8	507,	624		
-	,				,			1				
2	Provide the estimated percentage of the year	0 %	as									
а	Board designated or quasi-endowment	0 70										
Ь	Permanent endowment ► 87 240 %											
С	Term endowment ► 12 760 %											
3a	Are there endowment funds not in the posse organization by	ssion of the organiz	ation	that ar	e held	and a	dministere	d for t	the		Yes	No
	(i) unrelated organizations			_					Г	3a(i)	163	No
	(ii) related organizations								· . · . ·	3a(ii)		No
b	If "Yes" to 3a(II), are the related organization			chedu	ıle R?		·			3b		
4	Describe in Part XIV the intended uses of the	ne organization's en	dowme	ent fur	ıds				_			
Par	VI Land, Buildings, and Equipme	<b>ent.</b> See Form 99	0, Pa	ırt X,	lıne 1	0.						
	Description of property				Cost or (Invest		( <b>b)</b> Cost or basis (oth		(c) Accumu deprecia		( <b>d)</b> Bo	ook value
<b>1a</b> L	and											
b E	Buildings											
c L	easehold improvements											
	quipment						48	4,805	3	27,650		157,155
	Other		•					0,709		84,951		505,758
	. Add lines 1a-1e <i>(Column (d) should equal F</i>			, line i	10(c).)		· ·	•		,		662,913
	• • • • • •	· · ·	. ,						Schedu	le D (F	orm 9	90) 2011

Part VIII Investments—Other Securities. See	Form 990, Part X, line 1		
(a) Description of security or category	(b)Book value		od of valuation
(including name of security)	(2)Book value	Cost or end-o	f-year market value
(1)Financial derivatives			
(2)Closely-held equity interests			
Other			
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)	•		
Part VIII Investments—Program Related. Se		13	
Tilvestillents—Program Related. Se	Fart X, line		- d - 6 1 6
(a) Description of investment type	(b) Book value		od of valuation f-year market value
		Cost of ella-o	i-year market value
Table (Calume (h) about a sual Farm 000 Bart V cal (B) to a 42 )			
Total. (Column (b) should equal Form 990, Part X, col (B) line 13)			
Part IX Other Assets. See Form 990, Part X, III			
(a) Descri	otion		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line in			
Part X Other Liabilities. See Form 990, Part >	(, line 25.		
1 (a) Description of Liability	(b) A mount		
Federal Income Taxes			
Deferred rent and lease incentives	419,013		
Deposit	60,657		
	Ì		
Total. (Column (b) should equal Form 990, Part X, col (B) line 25 )	479,670		

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	22,517,378
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	22,851,264
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	-333,886
4	Net unrealized gains (losses) on investments	4	-54
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	
9	Total adjustments (net) Add lines 4 - 8	9	-54
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	-333,940
Par	t XII Reconciliation of Revenue per Audited Financial Statements With Revenue p	er R	eturn
1	Total revenue, gains, and other support per audited financial statements	1	33,836,436
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments		
b	Donated services and use of facilities		
c	Recoveries of prior year grants		
d	Other (Describe in Part XIV)		
e	Add lines <b>2a</b> through <b>2d</b>	2e	11,327,614
3	Subtract line <b>2e</b> from line <b>1</b>	3	22,508,822
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a		
b	Other (Describe in Part XIV) 4b 8,556		
C	Add lines 4a and 4b	4c	8,556
5	Total Revenue Add lines <b>3</b> and <b>4c.</b> (This should equal Form 990, Part I, line 12)	5	22,517,378
Part	Reconciliation of Expenses per Audited Financial Statements With Expenses	per	
1	Total expenses and losses per audited financial statements	1	34,170,376
2	Amounts included on line 1 but not on Form 990, Part IX, line 25	<u> </u>	
а	Donated services and use of facilities		
ь	Prior year adjustments	1	
c	Other losses	1	
d	Other (Describe in Part XIV)	1	
e	Add lines <b>2a</b> through <b>2d</b>	2e	11,327,668
3	Subtract line <b>2e</b> from line <b>1</b>	3	22,842,708
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIV) 4b 8,556		
c	Add lines <b>4a</b> and <b>4b</b>	4c	8,556
5	Total expenses Add lines <b>3</b> and <b>4c.</b> (This should equal Form 990, Part I, line 18)	5	22,851,264

Part XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements

#### 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 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		Earnings from the endowment funds are recorded and made available for operations through an annual allocation of up to 5% of the fund. The allocation is based on a three-year rolling average of the investment's market value, determined as of March 31 of the year prior to the budget year. Each year, as part of RIF's budgeting process, RIF reviews the appropriate level of payout for the following fiscal year. Fund disbursements are paid at the end of each quarter in the fiscal year. Each fund's operating income is utilized as set forth in the specific applicable endowment agreement. The general endowment fund's income is utilized for general operations.
Description of Uncertain Tax Positions Under FIN 48		RIF performed an evaluation of uncertain tax positions for the years ended September 30, 2012 and 2011, and determined that there were no matters that would require recognition in the financial statements or that may have any effect on its taxexempt status
Part XII, Line 2d - Other Adjustments		Special event expenses 196,419
Part XII, Line 4b - Other Adjustments		Gain on disposal of fixed assets 3,613 Sublease income 4,943
Part XIII, Line 2d - Other Adjustments		Special event expenses 196,419
Part XIII, Line 4b - Other Adjustments		Gain on disposal of fixed assets 3,613 Sublease income 4,943

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DLN: 93493133009763

OMB No 1545-0047

**SCHEDULE G** (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

# **Supplemental Information Regarding Fundraising or Gaming Activities**

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.

Open to Public Inspection

Name of the organization Reading is Fundamental Inc **Employer identification number** 

52-0976257

- Indicate whether the organization raised funds through any of the following activities. Check all that apply
- ✓ Mail solicitations
- Internet and e-mail solicitations Phone solicitations
- In-person solicitations

- e Solicitation of non-government grants Solicitation of government grants
  - ▼ Special fundraising events
- 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

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?

(i) Name and address of Individual or entity (fundraiser)	(ii) Activity	fundrais custo cont	Did ser have ody or crol of outions?	(iv) Gross receipts from activity	(v) A mount paid to (or retained by) fundraiser listed in col (i)	(vi) A mount paid to (or retained by) organization
April Hendrickson 1928 Calvert Street NW Washington, DC 20009	Special events		No	476,577	60,000	416,577
Lautman Maska Neil & Company 1730 Rhode Island Avenue NW Suite  Washington, DC 20036	Direct mail		No	322,504	78,000	244,504
Development Resources Inc 1601 North Kent Street Suite 1200 Arlington, VA 22209	Development strategic plan & oversight of staff		No	0	475,000	-475,000
Total			<b>&gt;</b>	799,081	613,000	186,081

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 \_\_\_\_\_

Pai	Part II Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18 more than \$15,000 on Form 990-EZ, line 6a. List events with gross receipts greater than \$5,000.									
			(a) Event #1  Fundraising Gala/Auction (event type)	(b) Event #2  (event type)	(c) O ther Events (total number)	(d) Total Events (Add col (a) through col (c))				
φ3	,	Contract of the contract of th	476,577	7		476,577				
Revenue	2	Gross receipts  Less Charitable contributions	427,077			427,077				
	3	Gross income (line 1 minus line 2)	49,500	)		49,500				
	4	Cash prizes								
မှာ	5	Non-cash prizes								
SUS	6	Rent/facility costs	64!	5		645				
Expenses	7	Food and beverages	80,660			80,660				
Direct	8	Entertainment	17,693	3		17,693				
ā	9	Other direct expenses .	97,421			97,421				
	10	Direct expense summary Add lin	es 4 through 9 ın columr	n (d)		(196,419)				
	11	Net income summary Combine II	nes 3 and 10 ın column (	(d)		-146,919				
Par	t III	Gaming. Complete if the oil \$15,000 on Form 990-EZ, lii		"Yes" to Form 990, Pa	rt IV, line 19, or rep	orted more than				
Revenue			(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (Add col (a) through col (c))				
	1	Gross revenue								
မှာ ()	2	Cash prizes								
cbenses	3	Non-cash prizes								
Direct D	4	Rent/facility costs								
<u></u>	5	Other direct expenses								
	6	Volunteer labor	Г Yes Г No	Г Yes Г No	Г Yes Г No	_				
	7	Direct expense summary Add line	s 2 through 5 in column (	(d)		( )				
	8	Net gaming income summary Com	bine lines 1 and 7 in col	ımn (d)	<u> </u>					
9 a b	Is th	er the state(s) in which the organiza ne organization licensed to operate No," Explain	gaming activities in eac	h of these states?		· · Fyes Fno				
	Were	e any of the organization's gaming 'es," Explain	licenses revoked, suspe	nded or terminated during	the tax year?					

Sche	dule G (Form 990 or 990-EZ) 20	11			Page <b>3</b>
11	Does the organization operate ga	aming activities with nonmembers? .		Г <sub>Yes</sub> Г	- No
12	Is the organization a grantor, be	neficiary or trustee of a trust or a mem	per of a partnership or other entity		
	formed to administer charitable (	gamıng?		· · · · F Yes F	- No
13	Indicate the percentage of gamii	ag activity operated in		1 1	
a				13a	
b					
14		f the person who prepares the organiza			
	Name ►				
	Address ►				
	revenue?	ntract with a third party from whom the			- No
		ed by the third party 🟲 \$			
С	If "Yes," enter name and address	S			
	Name 🟲				
	Address ►				
16	Gaming manager information				
	Name 🟲				
	Gaming manager compensation I	<b>\$</b> \$			
	Description of services provided	<b>&gt;</b>			
17 a		Employee er state law to make charitable distribu		· · ·	- No
b	Enter the amount of distributions	required under state law distributed to	o other exempt organizations or sp		<del>-</del>
_		activities during the tax year > \$		hadala C /	
Par	t IV Complete this part to property instructions.)	provide additional information for	responses to quuestion on Sc	nedule G (see	
	Identifier	ReturnReference	Explana	tion	
		•	•		

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DLN: 93493133009763 OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

Reading is Fundamental Inc

Schedule I

(Form 990)

**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

**Inspection** 

Employer identification number 52-0976257

Part I General Information	n on Grants and	l Assistance				•	
1 Does the organization maintain r the selection criteria used to awa	ecords to substantı ard the grants or as:	ate the amount of the sistance?	grants or assistance, th	e grantees' eligibility for	the grants or assist	ance, and	ר Yes Γ
<b>2</b> Describe in Part IV the organization	tion's procedures fo	r monitoring the use o	f grant funds in the Unite	ed States			
Form 990, Part IV, line Part IV and Schedule I	21 for any recip	ient that received r	nore than \$5,000. Ch	eck this box if no one	recipient receive	d more than \$5,000	. Use
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of gran or assistance
See Additional Data Table							
2 Enter total number of section 50		_				· · · · • •	39
3 Enter total number of other organ	nzativns nstea in th	e mie i table		<del></del>		<u> </u>	U

, ,					· - 9
Part IIII Grants and Other Assista Use Schedule I-1 (Form 990			. Complete if the organ	zation answered "Yes" to	Form 990, Part IV, line 22.
(a)Type of grant or assistance	<b>(b)</b> Number of recipients	<b>(c)</b> A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance

recipients	casn grant	non-cash assistance	(book, FMV, appraisal, other)	
 ·		·	·	

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 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

Procedure for Monitoring Grants in the U S

Grants in the U S

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.

Schedule I (Form 990) 2011

Software ID: Software Version:

**EIN:** 52-0976257

Name: Reading is Fundamental Inc

(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	( <b>d)</b> A mount 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)	99,074				Purchase of books
Brooklyn Public Library10 Grand Army Plaza Brooklyn, NY 11238	11- 1904361	501 (C)(3)	42,415				Purchase of books

(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount 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 Inc 10800 Biscayne Boulevard Suite 500 Miami,FL 33160	14- 1916606	1 501 (C)(3)	63,677				Purchase of books
Dallas ISD2909 N Buckner Boulevard Dallas,TX 752284861	75- 6001278	I 501 (C)(3)	41,309				Purchase of books

(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount 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	501 (C)(3)	29,354				Purchase of books
Communities In Schools of Atlanta 600 West Peachtree Street 1250 Atlanta, GA 30308	58- 1152807	501 (C)(3)	20,171				Purchase of books

(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount 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	501 (C)(3)	25,968				Purchase of books
Communities in Schools of New Orleans IncPO Box 792800 New Orleans, LA 70179	72- 1317054	501 (C)(3)	6,052				Purchase of books

(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section If applicable	(d) A mount 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 Services1811 S Laredo Room 108 San Antonio, TX 78207	74- 6002167	501 (C)(3)	15,716				Purchase of books
Philadelphia Reads 325 Chestnut Street Suite 903 Philadelphia, PA	27- 1723052	I 501 (C)(3)	5,265				Purchase of books

(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount 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)	17,274				Purchase of books
Page Ahead1130 NW 85th Street Seattle, WA 98117	91- 1600084	501 (C)(3)	28,634				Purchase of books

(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount 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 in Chicago 2211 West Street River Grove, IL 60171	23- 7248445	501 (C)(3)	20,646				Purchase of books
Reach Out and Read Greater Baltimore1001 East Fayette Street Baltimore, MD 21202	04- 3481253	501 (C)(3)	18,140				Purchase of books

(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount 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 Pittsburgh10 Childrens Way Suite 300 Pittsburgh, PA 15212	25- 1558336	1 5017637	21,810				Purchase of books
Newark Preschool Council10 Park Place 4th Floor Newark N1 07012	22- 1777158	1 501 (0.)(3)	17,873				Purchase of books

(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Southwest Human Development2850 N 24th Street Phoenix, AZ 85008	86- 0407179	I 501 (C)(3)	13,207				Purchase of books
BookSpringPO Box 143147 Austin,TX 78714	74- 2542664	501 (C)(3)	18,602				Purchase of books

(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Read Aloud America1314 South King Street Suite G4 Honolulu, HI 96814	99- 0323798	501 (C)(3)	17,100				Purchase of books
Fresno County Office of Education - Migrant Program 1684 W Shaw Avenue Fresno CA 93711	94- 6002210	501 (C)(3)	14,718				Purchase of books

(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Lansing School District RIF1705 Opaline Drive Lansing, MI 48917	38- 6001599	501 (C)(3)	12,487				Purchase of books
St Aloysius Education Clinic 219 West 132nd Street New York, NY 10027	13- 3415339	501 (C)(3)	10,604				Purchase of books

(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Durham County Library300 N Roxboro Street Durham, NC 27701	56- 6000297	501 (C)(3)	10,299				Purchase of books
RIF St Louis Inc 6300 Northwood 2E St Louis, MO 63105	51- 0159152	501 (C)(3)	6,911				Purchase of books

(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Denver Public Schools1330 Fox Street Denver, CO 80204	84- 6001099	501 (C)(3)	12,005				Purchase of books
O'Connell & South Side FRC120 Park Street Bristol, CT 06010	06- 6001866	501 (C)(3)	10,609				Purchase of books

(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount 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 Valley Child Development Centers Inc215 Horace Street Dayton, OH 45402	31- 0713127	501 (C)(3)	14,773				Purchase of books
Manor RIF8500 Decker Lane Austin, TX 78724	74- 6003097	501 (C)(3)	8,236				Purchase of books

(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount 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 Kansas City 3901 Rainbow Boulevard MS 4004 Kansas City, KS 66218	48- 0547734	1 501 (C)(3)	7,945				Purchase of books
District 279 Foundation11200 93rd Avenue N Maple Grove, MN 55369	41- 1705060	501 (C)(3)	9,929				Purchase of books

(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
The Public Education Foundation (Clark County Reads) 3360 W Sahara A venue Suite 160 Las Vegas, NV 89102	88- 0275767	501 (C)(3)	12,222				Purchase of books
Williamette Eduation Service District2611 Pringle Road SE Salem, OR 97301	93- 1318631	501 (C)(3)	11,989				Purchase of books

(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Pajaro Valley RIF 3050 Marlo Court 7 Apto,CA 95003	23- 7066840	501 (C)(3)	10,849				Purchase of books
San Mateo County Office of Education 101 Twin Dolphine Drive Redwood City, CA 94065	94- 6002468	501 (C)(3)	8,722				Purchase of books

(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Delta Lambda RIF - Monterey150 Shady Lane Monterey, CA 93940	94- 6130720	501 (C)(3)	8,472				Purchase of books
Northrop Garfield PTO950 E Reagan Parkway Medina, O H 44256	27- 0264807	501 (C)(3)	7,013				Purchase of books

(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
First AME Child and Family Center 1912 East Madison Street Seattle, WA 98122	91- 1127055	501 (C)(3)	6,909				Purchase of books
Marsing School DistrictPO Box 340 Marsing,ID 83639	82- 6000855	501 (C)(3)	5,773				Purchase of books

(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Campbell Elementary91 Elder Street Fairbum, GA 30213	58- 6000246	501 (C)(3)	5,105				Purchase of books

**Compensation Information** 

DLN: 93493133009763

OMB No 1545-0047

**Schedule J** (Form 990)

Department of the Treasury

Internal Revenue Service

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.

Open to Public Inspection

Name of	the organization
Reading is	Fundamental Inc

**Employer identification number** 

52-0976257

Pai	t I Questions Regarding Compensation	n						
					Yes	No		
1a	Check the appropriate box(es) if the organization pr 990, Part VII, Section A, line 1a Complete Part II							
	First-class or charter travel	Γ	Housing allowance or residence for personal use					
	Travel for companions	Γ	Payments for business use of personal residence					
	Tax idemnification and gross-up payments	Γ	Health or social club dues or initiation fees					
	Discretionary spending account	Γ	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 orprovision of all the expenses described above? If "No," complete Part III to explain							
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?							
3	Indicate which, if any, of the following the organization organization's CEO/Executive Director Check all to Compensation committee							
	✓ Independent compensation consultant	,    -						
	Form 990 of other organizations	<u>- ا</u>	·					
	, Tomi 550 or other organizations	•	reproved by the board of 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							
а	Receive a severance payment or change-of-contro	l paymer	nt?	4a		Νo		
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?							
С	Participate in, or receive payment from, an equity-based compensation arrangement?							
	If "Yes" to any of lines $4a-c$ , list the persons and $p$	rovide th	ne applicable amounts for each item in Part III					
	Only 501(c)(3) and 501(c)(4) organizations only m	ust com	plete lines 5-9.					
5	For persons listed in form 990, Part VII, Section A compensation contingent on the revenues of $\ensuremath{N}$	, line 1a	, did the organization pay or accrue any					
а	The organization?			5a		Νo		
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 compensation contingent on the net earnings of $% \left\{ 1,2,3,3,4,4,4,4,4,4,4,4,4,4,4,4,4,4,4,4,4$	, line 1a,	, did the organization pay or accrue any					
а	The organization?			6a		Νo		
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 payments not described in lines 5 and 6? If "Yes,"			7		No		
8	Were any amounts reported in Form 990, Part VII,	paid or a	accured pursuant to a contract that was					
	subject to the initial contract exception described i	n Regs	section 53 4958-4(a)(3)? If "Yes," describe					
	ın Part III			8		Νo		
9	If "Yes" to line 8, did the organization also follow the section 53 $4958-6(c)$ ?	ne rebutt	able presumption procedure described in Regulations	9				

#### Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space 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)(1)-(III) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, columns (D) and (E) for that individual

(A) Name		I	W-2 and/or 1099-MI		(C) Retirement and other deferred	<b>(D)</b> Nontaxable benefits	(E) Total of columns (B)(ı)-(D)	<b>(F)</b> Compensation reported in prior
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation	belleties	(5)(1) (5)	Form 990 or Form 990-EZ
(1) Carol Hampton Rasco	(I) (II)	217,390 0	11,000 0	0	11,000 0	8,610 0	248,000 0	0
(2) Lynn Croneberger	(I) (II)	132,072 0	0 0	0	6,560 0	5,611 0	144,243 0	0 0

Schedule J (Form 990) 2011 Page **3** 

## 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

Schedule J (Form 990) 2011

efile GRAPHIC print - DO NOT PROCESS

**SCHEDULE 0** 

(Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

As Filed Data -

DLN: 93493133009763

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

2011

Open to Public

Inspection

	Employer identifi	cation number
Reading is Fundamental Inc		
	52-0976257	

Identifier	Return Reference	Explanation
Changes in Program Services	Part III, line 3	During 2011, the IBDP contract was removed from the Department of Education's (DOE) fiscal year 2012 budget Approximately 42% and 77% of RIF's 2012 and 2011 revenue, respectively, was received from the IBDP contract. In addition, 14% and 15%, respectively, of RIF's 2012 and 2011 revenue came from one corporate donor. Management significantly restructured its organization, including a significant reduction in staff and other operating costs, which is in-line with RIF's revenue from nonfederal sources. In addition, RIF is working to increase nonfederal donations.

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
		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 their 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 their shares its evaluation with the President. The Executive Committee their 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 of 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
	1 '	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

ldentifier	Return Reference	Explanation
Changes in Net Assets or Fund Balances	Form 990, Part XI, line 5	Net unrealized losses on investments -54

# **Additional Data**

Software ID: Software Version:

**EIN:** 52-0976257

Name: Reading is Fundamental Inc

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

4d. Other program se	ervices				
(Code	) (Expenses \$	62,430	ıncludıng grants of \$	) (Revenue \$	)
of judges selects regi fulfilling RIF's missio nominators are honor engage RIF's volunte	ional winners based upon the i n, and development of innovat ed at a celebration in Washing ers and leverage the enthusia	ndıvıdual's o ıve programs ıton, DC In sm of RIF's	lemonstrated concern for s that encourage family ar 2009, RIF launched the R volunteers in all 50 states	s Volunteer of the Year Awards (VOYA) children and education, exceptional ded ad community involvement. The winners IF Ambassadors Initiative as a way to for RIF also continues to hold regional gaine another and meet RIF's staff and other another and meet RIF's staff.	ication to and their urther therings in
(Code	) (Expenses \$	56,112	ıncludıng grants of \$	) (Revenue \$	2,686 )
community engageme With the guidance of I training for early child "train the trainer" mo communities RIF con	ent activities are designed to l RIF's volunteers, parents part dhood educators This training del that prepares participants	nelp parents icipate in wo is designed to return to	take a leading role in enc rkshops, book distribution to support children's eme their communities and de	literacy training for educators Family a ouraging their children's literacy develons, and reading celebrations RIF conduc erging literacy skills The training is don liver the training to their colleagues and activities to identify areas of need and e	pment cts literacy e through a

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

Compensated Employees, and Independent Contractors										
<b>(A)</b> Name and Title	(B) Average hours per		tion ( that a		y)	_	1	(D) Reportable compensation from the	<b>(E)</b> Reportable compensation from related	(F) Estimated amount of other compensation
	week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)	from the organization and related organizations
John F Remondı Chaırman	1 50	х		х				0	О	0
Robert S Diamond Vice Chairman	1 50	Х		Х				0	0	0
William ME Rachal Jr Treasurer	1 50	Х		х				0	0	0
Loretta Barrett Secretary	1 50	Х		х				0	0	0
Alexandra Armstrong Director	1 50	Х						0	0	0
Kenneth Bentley Director	1 50	Х						0	0	0
Marcıa Carluccı Dırector	1 50	Х						0	0	0
Christopher Cerf Director	1 50	Х						0	0	0
Marie-Agnes Daumas Director	1 50	Х						0	0	0
Lon R Greenberg Director	1 50	Х						0	0	0
William Hansen Director	1 50	Х						0	0	0
Crystal Echo Hawk Director	1 50	Х						0	0	0
Roberta Horton Dırector	1 50	Х						0	0	0
Juanita James Director	1 50	Х						0	0	0
JJ Johnson Director	1 50	Х						0	0	0
Dr Claude A Mayberry Dırector	1 50	Х						0	0	0
Christy Moberly Director	1 50	Х						0	0	0
Mıchael Monahan Dırector	1 50	Х						0	0	0
Emely Moore Director	1 50	Х						0	0	0
Margaret McNamara Pastor Dırector	1 50	Х						0	0	0
John F Polstein Director	1 50	Х						0	0	0
Lynda Johnson Robb Dırector	1 50	Х						0	0	0
Richard D Simmons Director	1 50	Х						0	0	0
Carolyn Sımpson Dırector	1 50	Х						0	0	0
Dr Carol B Sisco Director	1 50	Х						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		(tion that a			Ш		(D) Reportable compensation	<b>(E)</b> Reportable compensation	<b>(F)</b> Estimated amount of other	
	per week	Individual trustae or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	from the organization (W- 2/1099-MISC)	from related organizations (W- 2/1099- MISC)	compensation from the organization and related organizations	
Arthur H White Director	1 50	Х						0	0	0	
Rick Zimmerman Director	1 50	Х						0	0	0	
Carol Hampton Rasco President and CEO	40 00			х				228,390	0	19,610	
Ernestine Benedict VP of Marketing/Comm	40 00					Х		134,952	0	7,335	
Lynn Croneberger Former Officer - until 08/2011	40 00						х	132,072	0	12,171	