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 private foundations)

▶ Do not enter social security numbers on this form as it may be made public.

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

OMB No. 1545-0047 2019

DLN: 93493304020540

Open to Public Inspection

		nue Service				2006			
				ginning 04-01-2019 , and ending 0	3-31-	2020	D.F		iaakian nt.
		pplicable:	C Name of organization KIDS NEED TO READ				υ Employe	er identifi	ication number
□ Ad		change lange					26-2755	631	
☐ Ini		-	Doing business as						
		n/terminated					F T-1- 1	a m.:1	
☐ Am	nende	d return			n/suite		E Telephon	e number	
□Ар	plicati	on pending	2450 WEST BROADWAY ROAD S	OTTE 110			(480) 25	56-0115	
			City or town, state or province, of MESA, AZ 85202	country, and ZIP or foreign postal code					
			MESA, AZ 83202				G Gross red	ceipts \$ 80	08,741
			F Name and address of princ	cipal officer:		i(a) Is this	a group ret	urn for	
			TYSON BREINHOLT 2450 WEST BROADWAY ROAI	D SHITE 110		subor	dinates?		□Yes ☑ No
			MESA, AZ 85202	50172 110	1		l subordinate	es	☐ Yes ☐No
I Ta:	x-exer	npt status:	501(c)(3) 501(c)()	◀ (insert no.) ☐ 4947(a)(1) or ☐ 52'	,	includ		ist (see	instructions)
7 107	- 1 7-	N. N.		(Illsert No.)			, accacir a ii	•	•
J 99	ebsii	re:► ww	VW.KIDSNEEDTOREAD.ORG			·(•) Group	exemption	Hullibel	
			: 🗹 Corporation 🗌 Trust 🔲 A		L	Year of forma	ation: 2008	M State	of legal domicile: AZ
K Forr	n of o	rganization	: Corporation L Trust L A	Association Li Other P					3
Pa	art I	Sum	ımary						
			scribe the organization's mission	n or most significant activities:					
as				DRGANIZATIONS THAT SERVE CHILDREN	N, ESPI	CIALLY DIS	SADVANTAGE	ED CHILI	OREN.
ž	-								
na Ta	[
Governance	_	Chl. H-	:	di	-6	- th 250/	-£:LL		
င္ဟ				discontinued its operations or disposed rning body (Part VI, line 1a)		e than 25%	or its net as	3	10
	l		•	s of the governing body (Part VI, line 1b)				4	9
es	l		-	calendar year 2019 (Part V, line 2a)			•	5	6
롲	l		, ,		•		•		
Activities &	l		•	necessary)			•	6	40
Q.	ı			Part VIII, column (C), line 12				7a	0
	b	Net unre	lated business taxable income f	rom Form 990-T, line 39	•		•	7b	0
						Pri	or Year		Current Year
<u>Qr</u>	8	Contribu	tions and grants (Part VIII, line :	1h)			1,859,2	272	807,604
Ravenue	9	Program	service revenue (Part VIII, line			0			
λċ	10	Investm	ent income (Part VIII, column (A	.), lines 3, 4, and 7d)			1,2	263	1,137
ш	11	Other re	venue (Part VIII, column (A), lin	es 5, 6d, 8c, 9c, 10c, and 11e)				0	0
	12	Total rev	venue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)		1,860,5	35	808,741
	-		<u> </u>	K, column (A), lines 1–3)	,		622,2	277	855,061
	l		paid to or for members (Part IX				,-	0	0
10	l		,	benefits (Part IX, column (A), lines 5-1	0)		100,7		113,609
રહે	l		onal fundraising fees (Part IX, co	* * * * * * * * * * * * * * * * * * * *	0)		100,7	0	0
હ	l		- , ,	, ,,				4	
Expenses	l		raising expenses (Part IX, column (I	·· · · · · · · · · · · · · · · · · · ·					
	l		penses (Part IX, column (A), lin	•			98,7		94,709
	l		·	equal Part IX, column (A), line 25)			821,7		1,063,379
	19	Revenue	less expenses. Subtract line 18	3 from line 12			1,038,7	755	-254,638
ଞ୍ଚ						Beginning	of Current Ye	ear	End of Year
ets Jan									
Net Assets or Fund Balances	l		sets (Part X, line 16)				3,026,2		2,782,127
2 E	l		oilities (Part X, line 26)		•		7,9	936	20,936
Zű	22	Net asse	ts or fund balances. Subtract lir	ne 21 from line 20			3,018,3	312	2,761,191
	ırt II		ature Block						
				amined this return, including accompany ete. Declaration of preparer (other than					
any k			er, it is true, correct, and compr	etc. Declaration of preparer (other than	Officer) is based o		1011 01 1	villen preparer has
		T k							
		Signat	* ture of officer			202 Date	0-10-29		
Sign		J Signal	are or officer			Duc	•		
Here	•		SE GARY EXECUTIVE DIRECTOR						
		 	or print name and title						
			Print/Type preparer's name	Preparer's signature	Date	. Che		TIN 01241957	7
Paid	t	L				self-	-employed		
Pre	pare	er 🗀	Firm's name LOHMAN COMPANY	PLLC		Firn	n's EIN ▶ 86-0	0985325	
Use		H	Firm's address ▶ 1630 S STAPLEY DF	R SUITE 108		Pho	ne no. (480) 3	355-1100	
_		·					(400) 3	.55 1100	
			MESA, AZ 85204						
			this return with the preparer s					∠ ∨	es 🗆 No
For P	aper	work Re	duction Act Notice, see the s	separate instructions.		Cat. No. 1	1282Y		Form 990 (2019)

Form	990 (2019)						Page 2
Pa	rt III Stateme	ent of Program Service	Accomplish	ments			
	Check if S	schedule O contains a respons	e or note to ar	ny line in this Part III .			
1	Briefly describe t	he organization's mission:					
					VIDING INSPIRING BOOKS TO UN SERVING DISADVANTAGED CHILD		HOOLS,
2	Did the organizat	ion undertake any significant	program servi	ces during the year whi	ch were not listed on		
	the prior Form 99	90 or 990-EZ?				□ Yes 🔽	No
	If "Yes," describe	these new services on Scheo	ule O.				
3	Did the organizat	tion cease conducting, or mak	e significant ch	nanges in how it conduc	ts, any program		
		these changes on Schedule (☐Yes	✓ No
4	Describe the orga Section 501(c)(3)	anization's program service ac	complishment are required t	o report the amount of	rgest program services, as measur grants and allocations to others, th		5.
4a	(Code:) (Expenses \$	974,156	including grants of \$	855,061) (Revenue \$	808,741)	
	See Additional Data		,	,	, , , , , , , , , , , , , , , , , , , ,	,	
4b	(Code:) (Expenses \$		including grants of \$) (Revenue \$)	
4c	(Code:) (Expenses \$		including grants of \$) (Revenue \$)	
4d	Other program se	ervices (Describe in Schedule	0.)				
	(Expenses \$	•	ng grants of \$) (Revenue \$)	
4e	Total program s	service expenses ►	974,15	6			

19

Par	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	
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	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>	4		No
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? 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 I	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 😼	8		No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi endowments? If "Yes," complete Schedule D, Part V	10	Yes	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable.			
	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D,</i> Part VI.	11a	Yes	
	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 2	11b		No
	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
	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		No
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	11e		No
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	11f	Yes	
	Schedule D, Parts XI and XII	12a		No
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	12b		No
		13		No
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		No
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		No
	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		No
	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I(see instructions)	17		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	Yes	

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

Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic

government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II

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

Nο

Nο

19

20a

20b

21

Yes

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

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

1a

1b

1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable .

(gambling) winnings to prize winners? .

 ${f b}$ Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable .

Yes

Yes Form **990** (2019)

1

0

1c

No

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Pa	Statements Regarding Other IRS Filings and Tax Compliance (continued)			
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return			
	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		No
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If "Yes," enter the name of the foreign country: See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).	4a		No
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		No
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7 c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12 10a			
. b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11	Section 501(c)(12) organizations. Enter: Gross income from members or shareholders			
a b	Gross income from members or shareholders			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year.			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
C 14a	Enter the amount of reserves on hand	14-		No
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14a 14b		No
	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?	15		No
16	If "Yes," see instructions and file Form 4720, Schedule N. Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.	16		No

orm	990 (2019)			Page 6
Par	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "Na 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI	o" respo	nse to l	ines
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 10	4		
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent 1b			
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	Yes	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? .	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? .	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No
6	Did the organization have members or stockholders?	6		No
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		No
8	$\label{lem:poisson} Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:$			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8 b	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? <i>If "Yes," provide the names and addresses in Schedule O</i>	9		No
Se	ction B. Policies (This Section B requests information about policies not required by the Internal Revenu	e Code		
			Yes	No
	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		
	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes	
13	Did the organization have a written whistleblower policy?	13	Yes	
14	Did the organization have a written document retention and destruction policy?	14		No
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?			
	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b		No
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
	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?			
_	· · · · · · · · · · · · · · · · · · ·	16b		
<u>Se</u> 17	ction C. Disclosure List the states with which a copy of this Form 990 is required to be filed▶			
_,	<u>CA</u>			
18	Section 6104 requires an organization to make its Form 1023 (or 1024-A 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.			
19	Own website Another's website Upon request Other (explain in Schedule O) Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.			
20	State the name, address, and telephone number of the person who possesses the organization's books and records: THE COMPANY 2450 WEST BROADWAY ROAD STE 110 MESA, AZ 85202 (480) 256-0115			
				. (2242)

Part VII

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

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

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount
- of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's current key employees, if any. See instructions for definition of "key employee." • List the organization's five current highest compensated employees (other than an officer, director, trustee or key employee)
- who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations. • List all of the organization's former officers, key employees, or highest compensated employees who received more than \$100,000
- of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.
- See instructions for the order in which to list the persons above. Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

Check this box if fletther the organization no	Tany relaced of	gamzac	.1011 C	01116	, (110	acca a	, .	in che officer, and	ctor, or tradice.	
(A) Name and title	(B) Average hours per week (list any hours		ne b	ox, ι n of	t ch unle: ficer	ss pers	son	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation from the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099- MISC)	(W-2/1099- MISC)	organization and related organizations
(1) TYSON BREINHOLT CHAIRMAN	2.00	Х		x				0	0	0
(2) DIANE ELHARD DIRECTOR	1.00	х						0	0	0
(3) KIM OBRIEN DIRECTOR	1.00	х						0	0	0
(4) DENISE GARY EXECUTIVE DIRECTOR	47.00	X		x				52,910	0	0
(5) BRUCE MATSUNAGA PHD SECRETARY	2.00	Х		x				0	0	0
(6) GARY MLODZIK DIRECTOR	10.00	х						0	0	0
(7) CHRIS INGERSOLL TREASURER	2.00	х		х				0	0	0
(8) JESSICA PAYNE DIRECTOR	4.00	х						0	0	0
(9) TINA MLODZIK DIRECTOR	5.00	Х						0	0	0
(10) HEATHER MILLER DIRECTOR	2.00	×						0	0	0
										5 000 (0010)
										Form 990 (2019)

Part VII

Page 8

	(A) Name and title	(B) Average hours per week (list any hours	Average hours per than one box, unless person week (list is both an officer and a any hours for related for the formula is both an officer and a director/trustee) Position (do not check more Reportable compensation from the organization (W-2/1099-							(E) Reportable compensation from related organizations (W-2/1099-	5	(F) Estimated amount of other compensation from the organization and		
		organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	MISC)	(W-2/1099- MISC)		relate organiza	ed	
				_							+			
											+			
											\perp			
											\bot			
				_						_	+			
				_							+			
c ·	Sub-Total	art VII, Section	Α.				*		52,910		0		0	
2	Total number of individuals (including of reportable compensation from the	g but not limited	l to thos				e) who	rece	eived more than s	100,000				
												Yes	No	
3	Did the organization list any former line 1a? <i>If "Yes," complete Schedule</i> 2									ed employee on	3		No	
4	For any individual listed on line 1a, is organization and related organization													
5	individual										4		No	
6/	services rendered to the organization		ete Sch	eaule	: J го	r su	icn pei	rson			5		No	
1	ection B. Independent Contract Complete this table for your five high from the organization. Report compe	est compensate									npens	ation		
		(A) and business addre		уеаг	ena	my	WILII O	ı WIC	T T	(B) scription of services		(C Compen		
										,	\dashv			
					_	_					\rightrightarrows			

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 ▶ 0

orm 9 Part		(2019) Statement	of F	Revenue						Page 9
	VIII				respo	onse or note to any	/ line in this Part VIII	<u></u>	<u></u>	<u> </u>
					-		(A) Total revenue	(B) Related or exempt function	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
4	1	a Federated campa	aigns		1a			revenue		312 - 314
Contributions, Gifts, Grants and Other Similar Amounts		b Membership dues	s.	· [1 b					
, Gr.		c Fundraising even		Ŀ	1c	35,897				
ifts,		d Related organiza		-	1d					
imi		e Government grantsf All other contributio		Ļ	1e					
ition er S		and similar amounts			1 f	771,707				
rie de		g Noncash contributio	ns in	cluded in	.	627.200				
ont		h Total. Add lines	1a-1		1 g	637,208				
						Business Code	807,604			<u> </u>
	2a									
ne File										
Program Service Revenue	b									
ice	c	:								
Serv	ا	1								
ram										
Prog	e									
_	f	All other program	serv	ice revenue.						
	┺	Total. Add lines 2					1	1		
	:	Investment income similar amounts) .			•	i	63	6		636
		Income from invest Royalties			npt bo	•	•			
		Royalties	Ċ	(i) Rea	· I	(ii) Personal	<u> </u>			
	6a	Gross rents	6a							
		Less: rental								
		expenses Rental income	6b							
		or (loss)	6 c							
	°	d Net rental income	or	(loss) (i) Securi	ies .	(ii) Other				
	7 <i>a</i>	Gross amount from sales of	7a	()	501					
		assets other than inventory	, a		301					
	b	Less: cost or	7b)				
		other basis and sales expenses				<u>'</u>				
	С	Gain or (loss)	7c		501					
		d Net gain or (loss)					50	1		501
ine	06	Gross income from fu (not including \$		35,897 of						
.ven		contributions reported See Part IV, line 18		ine 1c).	8a	(
Other Revenue		b Less: direct expen			8b		0			
the	(c Net income or (los	ss) fr	om fundraisi	ng ev	ents 🕨	<u> </u>	0		
	9a	Gross income from See Part IV, line 19	gam	ing activities.						
	ı	b Less: direct expen			9a 9b					
		c Net income or (los			activit	ies >				
	10	a Gross sales of inve	entoi	ry, less						
		returns and allowa	ances	5	10a					
		b Less: cost of good			10b					
	_	Net income or (los Miscellaneo			nvent	Business Code				
	11	La								
	'	o								
	,	c								
		d All other revenue								
		e Total. Add lines 1								
	12	2 Total revenue. S	ee ir	nstructions .	•	• • • •	808,74	1	0	0 1,137

Р	art IX Statement of Functional Expenses				rage 10
	Section 501(c)(3) and 501(c)(4) organizations must c	complete all columns.	All other organization	ns must complete colu	mn (A).
	Check if Schedule O contains a response or note to ar	ny line in this Part IX			<u> D</u>
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	855,061	855,061		
2	Grants and other assistance to domestic individuals. See Part IV, line 22				
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16.				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	56,084	28,042	14,021	14,021
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$	48,885	38,385	4,191	6,309
7	Other salaries and wages				
8	Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes	8,640	5,450	1,509	1,681
11	Fees for services (non-employees):				
ā	a Management				
ŀ	Legal				
	Accounting	10,324		10,324	
	l Lobbying				
	Professional fundraising services. See Part IV, line 17				
	Investment management fees	812		812	
	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)				
12	Advertising and promotion	19	19		
13	Office expenses	10,679		9,128	1,551
14	Information technology				
	Royalties				
	Occupancy	28,435	24,667	2,057	1,711
	Travel				
	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	8,347	3,836	4,511	
	Insurance	4,867		4,867	
	Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
	a SHIPPING	11,151	10,405	129	617
	b OBSOLETE INVENTORY	8,603		8,603	
	c MATERIALS AND SUPPLIES	8,193	7,381	238	574
	d SPECIAL EVENT	2,648	910		1,738
	e All other expenses	631		581	50
25	Total functional expenses. Add lines 1 through 24e	1,063,379	974,156	60,971	28,252
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				
	Check here ▶ ☐ if following SOP 98-2 (ASC 958-720).				

Form 990 (2019)

1

Assets

11

12

13

14

15

16

17

18

19

20

21

23

24

25

26

27

28

31

32

33

Liabilities 22

Fund Balances

ō 29

Assets 30 (B)

End of year

Page **11**

27,998

52,033

2.650.942

4,137

16,212

27,864

2,941

20,936

20.936

2.668,648

2,761,191

2,782,127

Form 990 (2019)

92,543

2,782,127

Inventories for sale or use . .

10a Land, buildings, and equipment: cost or other

Investments—publicly traded securities .

Other assets. See Part IV, line 11 . . .

Accounts payable and accrued expenses .

Investments—other securities. See Part IV, line 11 .

Total assets. Add lines 1 through 15 (must equal line 34) .

Escrow or custodial account liability. Complete Part IV of Schedule D

Secured mortgages and notes payable to unrelated third parties . . .

Organizations that follow FASB ASC 958, check here <a> \square and

Unsecured notes and loans payable to unrelated third parties

and other liabilities not included on lines 17 - 24).

Total liabilities. Add lines 17 through 25 . .

Capital stock or trust principal, or current funds

Total liabilities and net assets/fund balances

Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity

Other liabilities (including federal income tax, payables to related third parties,

Organizations that do not follow FASB ASC 958, check here > \(\begin{align*} \text{and} \\ \text{and} \end{align*}

Paid-in or capital surplus, or land, building or equipment fund . . .

Retained earnings, endowment, accumulated income, or other funds

Investments—program-related. See Part IV, line 11

basis. Complete Part VI of Schedule D

b Less: accumulated depreciation

Intangible assets .

Grants payable .

Deferred revenue . . .

Tax-exempt bond liabilities .

Complete Part X of Schedule D

complete lines 27, 28, 32, and 33.

Net assets without donor restrictions

Net assets with donor restrictions .

complete lines 29 through 33.

Total net assets or fund balances

Cash-non-interest-bearing								
Savings and temporary cash investments								
Pledges and grants receivable, not	_							

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

Sa 2 3 Pledges and grants receivable, net . Accounts receivable, net Loans and other payables to any current or former officer, director, trustee,

key employee, creator or founder, substantial contributor, or 35% controlled Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B).

Notes and loans receivable, net . . .

Prepaid expenses and deferred charges .

10a

10b

49,108 32,896

2.834.525 4,646 24,558

30.022

2,941

7,936

3,026,248

32,817

96.739

1

2

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32

33

7.936

2.891.552

3,018,312

3,026,248

126,760

Beginning of year

Form	990 (2019)				Page 12
Pa	Reconcilliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI	<u></u>			
1	Total revenue (must equal Part VIII, column (A), line 12)	1			808,741
2	Total expenses (must equal Part IX, column (A), line 25)	2		1	,063,379
3	Revenue less expenses. Subtract line 2 from line 1	3			-254,638
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		3	,018,312
5	Net unrealized gains (losses) on investments	5			-2,483
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		2	,761,191
Pa	rt XII Financial Statements and Reporting	•			
	Check if Schedule O contains a response or note to any line in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990:				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed separate basis, consolidated basis, or both:	on a			
	☑ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate consolidated basis, or both:	basis,			
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis				
С	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c		No
	If the organization changed either its oversight process or selection process during the tax year, explain in Sche	dule O.			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sin Audit Act and OMB Circular A-133?	ngle	За		No
Ь	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requiaudit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.	ired	3b		

Form **990** (2019)

Additional Data

Software ID:

Software Version:

EIN: 26-2755631

Name: KIDS NEED TO READ

Form 990 (2019)

Form 990, Part III, Line 4a: GRANTS TO PROVIDE BOOKS TO DISADVANTAGED CHILDREN THROUGH UNDERFUNDED SCHOOLS, LIBRARIES AND LITERACY PROGRAMS. THE PROGRAM SUPPORTS LITERACY AND GRADUATION RATES AMONG OUR NATION'S YOUTH.

efil	e GR/	<u>APHIC prii</u>	nt - DO NOT PROCESS	As Filed Data -			DLN: 9	3493304020540
SCI		ULE A	Dublic (Charity Statu	e and Dul	olic Supp	ort	OMB No. 1545-0047
	m 99		Complete if the or	rganization is a sect 4947(a)(1) nonexe ▶ Attach to Form	ion 501(c)(3) c empt charitable 990 or Form 99	organization or trust. 10-EZ.	· a section	2019
		the Treasury	► Go to <u>www.irs</u>	.gov/Form990 for i	nstructions and	I the latest info	ormation.	Open to Public Inspection
Nam	e of th	ne organiza O READ	tion				Employer identific	ation number
KID3 I	NLLD I	O KLAD					26-2755631	
	rt I		for Public Charity Statu				See instructions.	
1 1	rganiz		a private foundation because onvention of churches, or as	•			(A)(:)	
		•	,			. ,, ,	. , . ,	
2			scribed in section 170(b)(•	, ,		
3		·	or a cooperative hospital serv	-			-	
4		A medical r name, city,	esearch organization operate and state:	ed in conjunction with	a hospital descri	ibed in section :	170(b)(1)(A)(iii). E	nter the hospital's
5		(b)(1)(A)	ation operated for the benefit (iv). (Complete Part II.)	-		, ,		bed in section 170
6			tate, or local government or	-				
7			ation that normally receives a (O(b)(1)(A)(vi). (Complete		s support from a	governmental u	init or from the gener	al public described in
8		A communi	ty trust described in section	170(b)(1)(A)(vi).	(Complete Part I	I.)		
9			ural research organization de rant college of agriculture. Se					ege or university or a
10	✓	from activit investment	ation that normally receives: dies related to its exempt fun income and unrelated busin dee section 509(a)(2). (Co	ctions—subject to cer ess taxable income (le	tain exceptions,	and (2) no more	than 331/3% of its su	ipport from gross
11		An organiza	ation organized and operated	l exclusively to test fo	r public safety. S	ee section 509	(a)(4).	
12		more public	ation organized and operated ly supported organizations of through 12d that describes	lescribed in section 5	09(a)(1) or sec	ction 509(a)(2). See section 509(a	
a		Type I. A so	supporting organization opera n(s) the power to regularly a Part IV, Sections A and B.	ated, supervised, or co appoint or elect a majo	ontrolled by its s	upported organiz	zation(s), typically by	
b		Type II. A manageme	supporting organization sup nt of the supporting organiza plete Part IV, Sections A a	ervised or controlled i ation vested in the sar				
c		Type III f	unctionally integrated. A sorganization(s) (see instructi	supporting organizatio				ted with, its
d		Type III n functionally	on-functionally integrated integrated. The organization integrated. The organization	d. A supporting organi n generally must satis	ization operated fy a distribution	in connection wi requirement and	th its supported orgar	
е		Check this	box if the organization receiver Type III non-functionally	ed a written determir	ation from the I		pe I, Type II, Type II	I functionally
f	Enter				-		<u> </u>	
g	Provi	de the follow	ing information about the su	pported organization(s).			
	(i) N	Name of supp organization		(iii) Type of organization (described on lines 1- 10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
					Yes	No		
Tota			tion Act Notice, see the Ir		Cat. No. 11285		 Schedule A (Form 9	

Sch	edule A (Form 990 or 990-EZ) 2019						Page 2
P	art II Support Schedule for	Organizations	Described in S	Sections 170(b)(1)(A)(iv) ar	nd 170(b)(1)(A	(vi)
	(Complete only if you ch						under Part III.
	If the organization failed	to qualify unde	r the tests listed	below, please	complete Part I	II.)	
	ection A. Public Support Calendar year		I				
	(or fiscal year beginning in) ▶	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not include any "unusual grant.")						
2	Tax revenues levied for the						
_	organization's benefit and either paid						
_	to or expended on its behalf The value of services or facilities						
3	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions by each person (other than a						
	governmental unit or publicly						
	supported organization) included on						
	line 1 that exceeds 2% of the amount shown on line 11, column (f).						
6	Public support. Subtract line 5 from						
	line 4.						
<u>s</u>	ection B. Total Support		T		1	1	
	Calendar year (or fiscal year beginning in) ▶	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
7	Amounts from line 4						
8	Gross income from interest,						
	dividends, payments received on securities loans, rents, royalties and						
	income from similar sources						
9	Net income from unrelated business						
	activities, whether or not the						
10	business is regularly carried on Other income. Do not include gain or						-
	loss from the sale of capital assets						
	(Explain in Part VI.).						
11	Total support. Add lines 7 through 10						
12	Gross receipts from related activities,	etc. (see instruction	ons)			12	
13	First five years. If the Form 990 is for	or the organization	's first, second, th	ird, fourth, or fifth	n tax year as a sec	tion 501(c)(3) org	anization,
	check this box and stop here					▶ [
S	ection C. Computation of Publi						
14	Public support percentage for 2019 (li	ne 6, column (f) di	vided by line 11,	column (f))		14	-
15	Public support percentage for 2018 Sc	hedule A, Part II,	line 14			15	
16a	33 1/3% support test—2019. If the						
	and stop here. The organization qual	ifies as a publicly s	supported organiza	ation			▶□
b	33 1/3% support test—2018. If th	e organization did	not check a box o	on line 13 or 16a,	and line 15 is 33 i	1/3% or more, chec	k this
	box and stop here. The organization	qualifies as a pub	licly supported or	ganization			▶ 🗆
17 a	10%-facts-and-circumstances tes	t— 2019. If the org	ganization did not	check a box on lin	ne 13, 16a, or 16b	, and line 14	
	is 10% or more, and if the organization in Part VI how the organization meets	n meets the facts	-and-circumstanci cumstances" test.	es test, check thi The organization	s box and stop n e qualifies as a publ	e re. Explain icly supported	
	organization			-			►□
h	10%-facts-and-circumstances tes	st— 2018. If the o	rganization did no	t check a box on I	ine 13, 16a, 16b,	or 17a, and line	
_	15 is 10% or more, and if the organiz	zation meets the "i	facts-and-circums	tances" test, chec	k this box and sto	p here.	
	Explain in Part VI how the organization			-		• •	. \Box
_	supported organization		haven 15 40-4	C- 10b 47 4	76		▶⊔
18	_						. □
	instructions		<u> </u>		- Cabadu	lo A (Form 000 o	▶ ⊔

20

S	Section A. Public Support							
	Calendar year (or fiscal year beginning in) ▶	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total	
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") .	448,036	1,713,384	1,022,814	1,818,467	771,707	5,774,408	
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose							
3	Gross receipts from activities that are not an unrelated trade or business under section 513							
4								

the organization fails to qualify under the tests listed below, please complete Part II.)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If

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

3	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						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5	448,036	1,713,384	1,022,814	1,818,467	771,707	5,774,408
7a b	Amounts included on lines 1, 2, and 3 received from disqualified persons Amounts included on lines 2 and 3						0
	received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year.						0
С	Add lines 7a and 7b						0
8	Public support. (Subtract line 7c from line 6.)						5,774,408
Se	ection B. Total Support						
	Calendar year (or fiscal year beginning in) ▶	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
9	Amounts from line 6	448,036	1,713,384	1,022,814	1,818,467	771,707	5,774,408
10a	Gross income from interest, dividends, payments received on	60	3,280	1,949	1,263	1,137	7,689

3	are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5	448,036	1,713,384	1,022,814	1,818,467	771,707	5,774,408
7a	Amounts included on lines 1, 2, and						0
	3 received from disqualified persons						<u> </u>
b	Amounts included on lines 2 and 3 received from other than disqualified						
	persons that exceed the greater of						0
	\$5,000 or 1% of the amount on line						
	13 for the year.						
	Add lines 7a and 7b.						0
8	Public support. (Subtract line 7c from line 6.)						5,774,408
Se	ection B. Total Support						
	Calendar year				T		
	(or fiscal year beginning in) ▶	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
9	Amounts from line 6	448,036	1,713,384	1,022,814	1,818,467	771,707	5,774,408
10a	Gross income from interest,						
	dividends, payments received on securities loans, rents, royalties and income from similar sources	60	3,280	1,949	1,263	1,137	7,689
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30,						
	1975.						
С		60	3,280	1,949	1,263	1,137	7,689
11	Net income from unrelated business activities not included in line 10b, whether or not the business is						
	regularly carried on.						
12							
	or loss from the sale of capital	43,659	71,614	73,976	40,805	35,897	265,951
13	assets (Explain in Part VI.) Total support. (Add lines 9, 10c, 11, and 12.).	491,755	1,788,278	1,098,739	1,860,535	808,741	6,048,048
14	First five years. If the Form 990 is for	or the organization	's first, second, th	ird, fourth, or fifth	tax year as a sec	tion 501(c)(3) or	ganization,
	check this box and stop here						🕨 🗆
Se	ection C. Computation of Public	Support Perce	ntage				
15	Public support percentage for 2019 (lin	ne 8, column (f) d	ivided by line 13, o	column (f))		15	95.480 %

4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf							
5	The value of services or facilities furnished by a governmental unit to the organization without charge							
6	Total. Add lines 1 through 5	448,036	1,713,384	1,022,814	1,818,467		771,707	5,774,408
7a	Amounts included on lines 1, 2, and							0
	3 received from disqualified persons						\longrightarrow	
b	Amounts included on lines 2 and 3							
	received from other than disqualified persons that exceed the greater of							0
	\$5,000 or 1% of the amount on line							Ü
	13 for the year.							
С	Add lines 7a and 7b							0
8	Public support. (Subtract line 7c from line 6.)							5,774,408
Se	ection B. Total Support	•	•	•	•			
	Calendar year	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 20	010	(f) Total
	(or fiscal year beginning in) ▶	` '		(0) 2017	` '			(1) Total
9	Amounts from line 6	448,036	1,713,384	1,022,814	1,818,467		771,707	5,774,408
10a	Gross income from interest,							
	dividends, payments received on securities loans, rents, royalties and	60	3,280	1,949	1,263		1,137	7,689
	income from similar sources							
ь	Unrelated business taxable income							
	(less section 511 taxes) from							
	businesses acquired after June 30,							
	1975.		2 200	1.040	4 262		4 4 2 7	7.000
C	Add lines 10a and 10b.	60	3,280	1,949	1,263		1,137	7,689
11	Net income from unrelated business activities not included in line 10b,							
	whether or not the business is							
	regularly carried on.							
12								
	or loss from the sale of capital	43,659	71,614	73,976	40,805		35,897	265,951
	assets (Explain in Part VI.)						$-\!+$	
13	11, and 12.).	491,755	1,788,278	1,098,739	1,860,535		808,741	6,048,048
14	First five years. If the Form 990 is fo	r the organization	's first, second, th	nird, fourth, or fift	h tax year as a se	ction 501(c)(3) org	anization,
	check this box and stop here	.						▶ 🗀
Se	ection C. Computation of Public							
15	Public support percentage for 2019 (lir			column (f))		15		95.480 %
16	Public support percentage from 2018 S					16		95.080 %
	ection D. Computation of Invest					10		
17	Investment income percentage for 20:			line 13, column (f))	17		0.130 %
18	Investment income percentage from 2				· -	18		0.120 %
	331/3% support tests—2019. If the						and line	
тэа	551/5 /6 Support tests—2015/11 tile	o, garnzadon ala 1	TO CHICCK THE DOX	on mic 17, and ill	C 13 IS HIDIE HIGH	JJ 1/J /0,	and mie	I, 13 1100

	or loss from the sale of capital assets (Explain in Part VI.) .	43,659	71,614	73,976	40,805		35,897	265,951
13	Total support. (Add lines 9, 10c, 11, and 12.).	491,755	1,788,278	1,098,739	1,860,535	8	308,741	6,048,048
14	First five years. If the Form 990 is for	or the organization	n's first, second, t	hird, fourth, or fift	h tax year as a se	ction 501(d	:)(3) orga	anization,
	check this box and stop here							▶ 🗆
Se	ction C. Computation of Public							
15	Public support percentage for 2019 (li	ne 8, column (f) d	livided by line 13,	column (f))		15		95.480 %
16	Public support percentage from 2018 !	Schedule A, Part I	II, line 15			16		95.080 %
Se	ction D. Computation of Invest	ment Income	Percentage			•		
17	Investment income percentage for 20	19 (line 10c, colu	mn (f) divided by	line 13, column (f	·))	17		0.130 %
18	Investment income percentage from 2	2018 Schedule A,	Part III, line 17 .			18		0.120 %
19a	331/3% support tests—2019. If the	organization did r	not check the box	on line 14, and lir	ne 15 is more than	33 1/3%,	and line 1	17 is not
	more than 33 1/3%, check this box and 33 1/3% support tests—2018. If th							

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

Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ▶ □

Schedule A (Form 990 or 990-EZ) 2019

Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete

10a

answer line 10b below.

the organization had excess business holdings).

Sections A and D, and complete Part V.) Section A. All Supporting Organizations Yes No

Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain. 1 Did the organization have any supported organization that does not have an IRS determination of status under section 509 (a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2). 2

Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below. 3a Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the

determination. 3b Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use. 3с

Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked 12a or 12b in Part I, answer (b) and (c) below. 4a Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or

4b supervised by or in connection with its supported organizations. Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in **Part VI** what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes. 4c Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and

(c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by 5a amendment to the organizing document).

Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document? 5b

5с Substitutions only. Was the substitution the result of an event beyond the organization's control? Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other 6

supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI. 6 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a

substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ) . 7

Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes,"

8 complete Part I of Schedule L (Form 990 or 990-EZ). 8

Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as

defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes,"

provide detail in Part VI. 9a

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Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting
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than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its

organization had an interest? If "Yes," provide detail in Part VI.

9c

10a

10b

Schedule A (Form 990 or 990-EZ) 2019

9b

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Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in
which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
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Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding

certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes,"

Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether

	edule A (101111 550 01 550 E2) 2015			age 3		
Pa	rt IV Supporting Organizations (continued)					
_			Yes	No		
	Has the organization accepted a gift or contribution from any of the following persons?					
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?					
		11a				
	A family member of a person described in (a) above?	11b				
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI .	11c				
S	ection B. Type I Supporting Organizations					
			Yes	No		
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1				
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that					
2	operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting					
	organization.					
S	ection C. Type II Supporting Organizations					
_			Yes	No		
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of					
	each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the	1				
	supporting organization was vested in the same persons that controlled or managed the supported organization(s).					
S	ection D. All Type III Supporting Organizations		v			
_			Yes	No		
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing					
	documents in effect on the date of notification, to the extent not previously provided?	1				
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization (s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).					
_		2				
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax					
	year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.	3				
S	ection E. Type III Functionally-Integrated Supporting Organizations					
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instruct	ions):				
	The organization satisfied the Activities Test. Complete line 2 below.					
	b					
•	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see	instru	ctions)			
2	Activities Test. Answer (a) and (b) below.	ſ	Yes	No		
•	a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.	2a				
ı	b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's					
	involvement.	2b				
3	Parent of Supported Organizations. Answer (a) and (b) below.					
•	a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI</i> .	3a				
	b Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? If "Yes," describe in Part VI. the role played by the organization in this regard.	3h				

3b

1	Type III Non-Functionally Integrated 509(a)(3) Supporting O Check here if the organization satisfied the Integral Part Test as a qualifying true.			. Part VIV See
	Check here if the organization satisfied the Integral Part Test as a qualifying truinstructions. All other Type III non-functionally integrated supporting organization			
	Section A - Adjusted Net Income		(A) Prior Year	(B) Current Yea (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		
	Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Yea (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):	1		
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1 b		
C	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
e	Discount claimed for blockage or other factors (explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt use assets	2		
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by .035	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
	Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6		

	Amounts paid to supported organizations to accomplish exempt purposes	
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	
4	Amounts paid to acquire exempt-use assets	
5	Qualified set-aside amounts (prior IRS approval required)	
6	Other distributions (describe in Part VI). See instructions	
7	Total annual distributions. Add lines 1 through 6.	
8	Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions	
9	Distributable amount for 2019 from Section C, line 6	

7 Total annual distributions. Add lines 1 through 6.							
8 Distributions to attentive supported organizations to who details in Part VI). See instructions	sive (provide						
9 Distributable amount for 2019 from Section C, line 6							
10 Line 8 amount divided by Line 9 amount	10 Line 8 amount divided by Line 9 amount						
Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2019	(iii) Distributable Amount for 2019				
1 Distributable amount for 2019 from Section C, line 6							
2 Underdistributions if any for years prior to 2019	2. Underdictributions if any far years prior to 2010						

7 Total annual distributions. Add lines 1 through 6.			
Distributions to attentive supported organizations to who details in Part VI). See instructions			
9 Distributable amount for 2019 from Section C, line 6			
10 Line 8 amount divided by Line 9 amount			
Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2019	(iii) Distributable Amount for 2019
1 Distributable amount for 2019 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2019 (reasonable cause required explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2019:			
a From 2014			
b From 2015			
c From 2016			

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2019	(iii) Distributable Amount for 2019
1 Distributable amount for 2019 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2019 (reasonable cause required explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2019:			
a From 2014			
b From 2015			
c From 2016			
d From 2017			
e From 2018			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2019 distributable amount			
 Carryover from 2014 not applied (see instructions) 			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
		·	

c From 2016		
d From 2017		
e From 2018		
Total of lines 3a through e		
g Applied to underdistributions of prior years		
n Applied to 2019 distributable amount		
Carryover from 2014 not applied (see instructions)		
Remainder. Subtract lines 3g, 3h, and 3i from 3f.		
Distributions for 2019 from Section D, line 7:		
\$		
Applied to underdistributions of prior years		
Applied to 2019 distributable amount		
Remainder. Subtract lines 4a and 4b from 4.		

instructions)		
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.		
4 Distributions for 2019 from Section D, line 7:		
\$		
Applied to underdistributions of prior years		
b Applied to 2019 distributable amount		
c Remainder. Subtract lines 4a and 4b from 4.		
5 Remaining underdistributions for years prior to 2019, if any. Subtract lines 3g and 4a from line 2. If the amount is greater than zero, explain in Part VI . See instructions.		
6 Remaining underdistributions for 2019. Subtract lines 3h and 4b from line 1. If the amount is greater than zero, explain in Part VI. See instructions		

C Remainder, Subtract lines 4a and 4b from 4.		
5 Remaining underdistributions for years prior to 2019, if any. Subtract lines 3g and 4a from line 2. If the amount is greater than zero, explain in Part VI. See instructions.		
6 Remaining underdistributions for 2019. Subtract lines 3h and 4b from line 1. If the amount is greater than zero, explain in Part VI. See instructions.		
7 Excess distributions carryover to 2020. Add lines 3j and 4c.		
8 Breakdown of line 7:		
a Excess from 2015		
b Excess from 2016		
c Excess from 2017		

Schedule A (Form 990 or 990-EZ) (2019)

d Excess from 2018.

e Excess from 2019.

schedule A ((Form 990 or 990-EZ) 2	.019	Page 8			
Part VI	Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V, Section B, line 1e; Part V Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions).					
	Facts And Circumstances Test					
990 Sched	dule A, Supplemen	tal Information				
	turn Reference	Explanation				
	HEDULE A, PART III, LINE 12, FUNDRAISING EVENTS - 2015 AMOUNT: \$ 43,659. 2016 AMOUNT: \$ 71,614. 2017 AMOUNT: \$ 73,976. 2018					

EXPLANATION OF OTHER AMOUNT: \$ 40,805. 2019 AMOUNT: \$ 35,897. INCOME:

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DLN: 93493304020540

OMB No. 1545-0047

(Form 990)

Supplemental Financial Statements ▶ Complete if the organization answered "Yes," on Form 990,

Open to Public Inspection

Department of the Treasury

Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ► Attach to Form 990.

▶ Go to www.irs.gov/Form990 for instructions and the latest information. Internal Revenue Service Name of the organization **Employer identification number** KIDS NEED TO READ 26-2755631 Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts 1 Total number at end of year 2 Aggregate value of contributions to (during year) Aggregate value of grants from (during year) Aggregate value at end of year 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No 6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible ☐ Yes ☐ No Part II **Conservation Easements.** Complete if the organization answered "Yes" on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Year 2b Number of conservation easements on a certified historic structure included in (a) 20 Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register . . . Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the 3 tax year 🟲 Number of states where property subject to conservation easement is located > 5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 6 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) ☐ Yes In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items. If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:

For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat. No. 52283D Schedule D (Form 990) 2019

Sche	edule D (Form 990) 2019					Page 2
Par	t IIII Organizations Maintair	ing Collections of Art, H	listorical Trea	sures, or Other S	Similar Assets	(continued)
3	Using the organization's acquisition, items (check all that apply):	accession, and other records,	check any of the	following that are a	significant use of i	ts collection
а	Public exhibition		d Los	an or exchange progi	rams	
b	Scholarly research		e 🗌 Oti	ner		
С	Preservation for future genera	tions				
4	Provide a description of the organiza Part XIII.	tion's collections and explain	how they further t	:he organization's ex	empt purpose in	
5	During the year, did the organization assets to be sold to raise funds rath				_	∕es □ No
Pa	rt IV Escrow and Custodial A Complete if the organizat X, line 21.	Arrangements. ion answered "Yes" on For	m 990, Part IV,	line 9, or reported	d an amount on	Form 990, Part
1a	Is the organization an agent, trusted included on Form 990, Part X?					res 🗌 No
b	If "Yes," explain the arrangement in	Part XIII and complete the fo	llowing table:		Amoun	 t
С	Beginning balance	· ·	3	1c		
d	Additions during the year					
е	Distributions during the year					
f	Ending balance			4.5		
	•				Liliano D.	
2a	Did the organization include an amo					ſes ∐ No
b	If "Yes," explain the arrangement in	Part XIII. Check here if the ex	kplanation has be	en provided in Part X	ш ⊔	
- 6	rt V Endowment Funds. Complete if the organizat	ion answered "Yes" on For	m 990 Part IV	line 10		
	complete in the organization	(a) Current year	(b) Prior year		(d) Three years back	(e) Four years back
1a	Beginning of year balance	30,022	28,038	26,115		
b	Contributions		2,375		25,000)
c	Net investment earnings, gains, and \boldsymbol{I}	osses -1,346	425	2,475	1,396	6
d	Grants or scholarships					
е	Other expenditures for facilities					
	and programs					
	Administrative expenses		816	+	281	
g	End of year balance	27,864	30,022	28,038	26,115	5
2	Provide the estimated percentage of	the current year end balance	(line 1g, column	(a)) held as:		
а	Board designated or quasi-endowme	ent ▶ 0 %				
b	Permanent endowment ► 100.00	10 %				
C	Temporarily restricted endowment	0 %				
	The percentages on lines 2a, 2b, and	d 2c should equal 100%.				
3а	Are there endowment funds not in the organization by:	ne possession of the organizat	ion that are held	and administered for	the	Yes No
	(i) unrelated organizations				Γ:	Yes No 3a(i) Yes
	(ii) related organizations				<u> </u>	Ba(ii) No
b	If "Yes" on 3a(ii), are the related organizations		on Schedule R?		F	3b
4	Describe in Part XIII the intended us	•			_	
Pa	rt VI Land, Buildings, and Ed	uipment.				
		ion answered "Yes" on For				
	Description of property (a)	Cost or other basis (investment) (b) Cost	or other basis (other	(c) Accumulated de	epreciation	(d) Book value
1 a	Land					
b	Buildings					
c	Leasehold improvements		2,62	25	1,847	778
d	Fauinment		19.63	13	14,747	4.886

26,850

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).)

10,548

16,302

Part VII Investments—Other Securities.) + T) / :	11h C F 000	Doub V. Bing 4.2
Complete if the organization answered "Yes" on Form 990, P (a) Description of security or category (including name of security)	(b) Book value	(c) Metho	d of valuation: -year market value
(1) Financial derivatives			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.)			
Part VIII Investments—Program Related. Complete if the organization answered 'Yes' on Form 990, P (a) Description of investment	art IV, li	ne 11c. See Form 990, (b) Book value	Part X, line 13. (c) Method of valuation: Cost or end-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col.(B) line 13.)		•	
Part IX Other Assets. Complete if the organization answered 'Yes' on Form 990, Pa	art IV, lin	ne 11d. See Form 990, Pai	
(a) Description			(b) Book value
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15.)			•
Part X Other Liabilities. Complete if the organization answered 'Yes' on Form 990, Pa	art IV, lin	ne 11e or 11f.See Form	990, Part X, line 25.
 (a) Description of liability (1) Federal income taxes 			(b) Book value
(2)			
(3)			
(4) (5)			
(5)			
(6)			
(7)			
(8)			
(9) Total (Column (h) must equal Form 990, Part Y, col (R) line 25.)			
Total. (Column (b) must equal Form 990, Part X, col.(B) line 25.) 2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote	e to the or	ganization's financial state	
organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check h	ere if the		een provided in Part XIII Schedule D (Form 990) 2019

Schedule D (Form 990) 2019

Page 4

1	lotal revenue, gains, and other s	upport per audited financial statements .		1	
2	Amounts included on line 1 but no	ot on Form 990, Part VIII, line 12:			
а	Net unrealized gains (losses) on i	nvestments	2a		
b	Donated services and use of facili	ties	2b		
C	Recoveries of prior year grants		2c		
d	Other (Describe in Part XIII.) .		2d		
е	Add lines 2a through 2d			2e	
3	Subtract line ${f 2e}$ from line ${f 1}$.			3	
4	Amounts included on Form 990, F	Part VIII, line 12, but not on line 1:			
а	Investment expenses not include	d on Form 990, Part VIII, line 7b 🔒	4a		
b	Other (Describe in Part XIII.) .		4b		
c	Add lines 4a and 4b			4c	
5	Total revenue. Add lines 3 and 4	c. (This must equal Form 990, Part I, line 12.))	5	
Par		penses per Audited Financial Staten zation answered 'Yes' on Form 990, Par	• • •	Return.	
1	Total expenses and losses per au	dited financial statements		1	
2	Amounts included on line 1 but no	ot on Form 990, Part IX, line 25:			
а	Donated services and use of facili	ties	2a		
b	Prior year adjustments		2b		
c	Other losses		2c	7	
d	Other (Describe in Part XIII.) .		2d	7	
е	Add lines 2a through 2d			2e	
3	Subtract line ${f 2e}$ from line ${f 1}$.			3	_
4	Amounts included on Form 990, F	Part IX, line 25, but not on line 1:			_
а	Investment expenses not include	d on Form 990, Part VIII, line 7b 🔒 🔒	4a		
b	Other (Describe in Part XIII.) .		4b	7	
c	Add lines 4a and 4b			4c	
5	Total expenses. Add lines 3 and 4	lc. (This must equal Form 990, Part I, line 18	.)	5	
Pai	t XIII Supplemental Info	rmation			
Prov	vide the descriptions required for P lines 2d and 4b; and Part XII, lines	art II, lines 3, 5, and 9; Part III, lines 1a and 2d and 4b. Also complete this part to provide	4; Part IV, lines 1b and 2b; Pa e any additional information.	rt V, line 4;	Part X, line 2; Part
	Return Reference		Explanation		
See A	Additional Data Table				

chedule D (Form 990) 2019	Page 5
Part XIII Supplemental Info	ormation (continued)
Return Reference	Explanation

Schedule D (Form 990) 2019

Additional Data

Software Version:

EIN: 26-2755631

Name: KIDS NEED TO READ

Supplemental Information

Return Reference	Explanation
,	THE ORGANIZATION HAS ADOPTED INVESTMENT POLICIES FOR ENDOWMENT ASSETS IN WHICH FUNDS ARE I NVESTED IN A MANNER INTENDED TO EMPHASIZE LONG-TERM CAPITAL GROWTH. IN THE FUTURE, THE EAR
	NINGS WILL START BEING UTILIZED TOWARD EXPENSES ON A PERMANENT BASIS.

Software ID:

Supplemental Information	
Return Reference	Explanation
PART X, LINE 2:	THE ORGANIZATION HAS RECEIVED FROM THE INTERNAL REVENUE SERVICE AN EXEMPTION FROM FEDERAL INCOME TAXES UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE. IT HAS BEEN CLASSIFIED AS A PUBLIC CHARITY UNDER SECTION 509(A)(2). A PROVISION IS MADE IN THE FINANCIAL STATEMEN TS FOR INCOME TAXES ON UNRELATED TRADE OR BUSINESS INCOME EARNED, WHEN APPLICABLE. NO SIGN IFICANT TIMING OR OTHER DIFFERENCE THAT WOULD RESULT IN A MATERIAL DEFERRED INCOME TAX LIA BILITY EXISTS. MANAGEMENT EVALUATED THE ORGANIZATION'S TAX POSITIONS AND CONCLUDED THAT TH

Supplemental Information

E ORGANIZATION HAD TAKEN NO UNCERTAIN TAX POSITIONS THAT REQUIRE ADJUSTMENT TO THE ACCOMPA

NYING FINANCIAL STATEMENTS TO COMPLY WITH THE PROVISIONS OF THIS GUIDANCE.

efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493304020540 OMB No. 1545-0047 SCHEDULE G **Supplemental Information Regarding** (Form 990 or 990-EZ) **Fundraising or Gaming Activities** Complete if the organization answered "Yes" on Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a. Open to Public Department of the Treasury Attach to Form 990 or Form 990-EZ. Inspection Internal Revenue Service Go to www.irs.gov/Form990 for instructions and the latest information. **Employer identification number** Name of the organization KIDS NEED TO READ 26-2755631 Part I Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part. Indicate whether the organization raised funds through any of the following activities. Check all that apply. Mail solicitations e Solicitation of non-government grants Internet and email solicitations ☐ Solicitation of government grants Phone solicitations ☐ Special fundraising events ☐ In-person solicitations Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? ☐ Yes ☐ No If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. (i) Name and address of individual (ii) Activity (iii) Did (iv) Gross receipts (v) Amount paid to (vi) Amount paid to or entity (fundraiser) fundraiser have from activity (or retained by) (or retained by) custody or fundraiser listed in organization control of col. (i) contributions? Yes No 3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing. For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Cat. No. 50083H Schedule G (Form 990 or 990-EZ) 2019

	dule G (Form 990 or 990-EZ) 2019 rt III Fundraising Events. Complet	te if the organization :	answered "Yes" on For	m 990. Part IV. line 18	Page 2	
	than \$15,000 of fundraising ev	ent contributions and				
	gross receipts greater than \$5	,000. (a)Event #1	(b) Event #2	(c)Other events	(d) Total events	
			(b) Event #2		(add col. (a) through	
		PHOENIX FAN FUSION	(event type)	(total number)	col. (c))	
		(event type)	,,,,			
ne						
Reverue						
Re						
	 -					
	1 Gross receipts	14,033		21,864	35,897	
	2 Less: Contributions	14,033		21,864	35,897	
	3 Gross income (line 1 minus	14,033		21,004	33,687	
	line 2)					
	4 Cash prizes					
Direct Expenses	5 Noncash prizes					
	6 Rent/facility costs					
	7 Food and beverages					
	8 Entertainment					
	_					
ā	9 Other direct expenses					
	10 Direct expense summary. Add lines 4 th	rrough 9 in column (d)		•		
	11 Net income summary. Subtract line 10	from line 3, column (d)		>		
Par	Gaming. Complete if the orga	nization answered "Ye	es" on Form 990, Part 1	IV, line 19, or reported	more than \$15,000	
a \	on Form 990-EZ, line 6a.					
Revenue		(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col.(a) through col.(c))	
eve	 -					
ĕ	1 Gross revenue					
Se						
èus	2 Cash prizes					
Expenses	3 Noncash prizes					
ぜ	4 Rent/facility costs					
Direct						
	5 Other direct expenses					
		Yes%	☐ Yes%	☐ Yes %		
	6 Volunteer labor	□ No	□ No	☐ No		
	7 Direct expense summary. Add lines 2 through 5 in column (d)					
	8 Net gaming income summary. Subtract	line 7 from line 1, colum	n (d)	<u> ▶ </u>		
9	Enter the state(s) in which the organization	on conducts gaming activ	ities:			
a Is the organization licensed to conduct gaming activities in each of these states?						
b						
10a	Were any of the organization's gaming lice				l	
b	If "Yes," explain:			c tax year:	∐Yes ∐No	
-						

Sche	dule G (Form 990 or 990-EZ) 20	19				F	age 3					
11	Does the organization conduct	gaming activities with nonmembers	5?		Yes	□No						
12	Is the organization a grantor, be formed to administer charitable		member of a partnership or other entity		Yes							
13	Indicate the percentage of gam	ing activity conducted in:										
а	The organization's facility .			13a			%					
b	An outside facility			13b			%					
14	Enter the name and address of	Enter the name and address of the person who prepares the organization's gaming/special events books and records:										
	Name ▶											
	Address >											
15a			m the organization receives gaming		· 🗆 Yes	Пио						
b	If "Yes," enter the amount of g	aming revenue received by the orgained by the third party $ ightharpoons$ $ angle$	anization 🕨 \$ and	the								
c	If "Yes," enter name and address of the third party:											
	Name •											
	Address •											
16	Gaming manager information:											
	Name ▶											
	Gaming manager compensation ► \$											
	Description of services provided ▶											
	☐ Director/officer	☐ Employee	☐ Independent contractor									
17	Mandatory distributions:											
а	<u>-</u>		stributions from the gaming proceeds to		Yes	Пио						
b	Enter the amount of distributio	ns required under state law distribu	ited to other exempt organizations or spen	t								
		pt activities during the tax year	·									
Pai			ions required by Part I, line 2b, colun licable. Also provide any additional int				5.					
	Return Reference		Explanation									

efile GRAPHIC print - DO NOT PROCESS | As Filed Data - |

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

Schedule I | Content of the select landscape mode (10" x 8.5") when printing.

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

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

▶ Attach to Form 990.

► Go to <u>www.irs.gov/Form990</u> for the latest information.

OMB No. 1545-0047

2019

DLN: 93493304020540

Open to Public Inspection

nternal Revenue Service							
ame of the organization IDS NEED TO READ						Employer identifica	ition number
						26-2755631	
Part I General Inform	ation on Grants	and Assistance					
Does the organization main the selection criteria used t						ce, and	
Describe in Part IV the organic	_						☑ Yes ☐ No
Part II Grants and Other	•	_	_		rganization answered "Yes	" on Form 990, Part IV, line	21, for any recipient
that received more t	han \$5,000. Part II	can be duplicated if ad	ditional space is needed.		T		1
(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
1) See Additional Data							
2)							
3)							
4)							
5)							
6)							
7)							
8)							
9)							
10)							
11)							
12)							
2 Enter total number of section	on 501(c)(3) and go	vernment organization	s listed in the line 1 table			•	
B Enter total number of other	organizations liste	d in the line 1 table .				-	

(Form 990)

Department of the

Schedule I (Form 990) 2019 Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.									
(a) Type of grant or assistance	(b) Number of recipients				(e) Method of valuation (book, FMV, appraisal, other)		(f) Description of noncash assistance		
(1)									
(2)									
(3)									
(4)									
(5)									
(6)									
(7)									

Schedule I (Form 990) 2019

Part IV

Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

Return Reference

Explanation

Additional Data

Software ID: **Software Version:**

EIN: 26-2755631 Name: KIDS NEED TO READ

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

PROFICIENCY LEVELS

AMONG DISADVANTAGED CHILDREN.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SURPRISE AND KINGSWOOD ELEMENTARY SCHOOLS 12907 WEST GREENWAY ROAD EL MIRAGE, AZ 85335	86-6000520	170(C)(1)		11,798	FMV		READING RESOURCES PROVIDED TO UNDERFUNDED LITERACY PROGRAMS TO INCREASE READING PROFICIENCY LEVELS AMONG DISADVANTAGED CHILDREN.
INDIAN OASIS ELEMENTARY PRIMARY AND INTERMEDIATE CAMPUSES 111 MAIN STREET SELLS, AZ 85634	86-0718016	170(C)(1)		39,295	FMV		READING RESOURCES PROVIDED TO UNDERFUNDED LITERACY PROGRAMS TO INCREASE READING

organization if applicable (book, FMV, appraisal, non-cash assistance grant cash or assistance or government assistance other) FAITH CHRISTIAN CENTER 73-1688319 501(C)(3) 6,273 FMV DONATION OF 875 READING READING RESOURCES RESOURCES PROVIDED TO 2640 EAST MCDOWELL ROAD

(e) Amount of non-

(f) Method of valuation

(g) Description of

(h) Purpose of grant

PROFICIENCY LEVELS

AMONG DISADVANTAGED CHILDREN.

(d) Amount of cash

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(c) IRC section

(b) EIN

(a) Name and address of

PHOENIX, AZ 85008					UNDERFUNDED LITERACY PROGRAMS TO INCREASE READING PROFICIENCY LEVELS AMONG DISADVANTAGED CHILDREN.
GOOD NEIGHBORS COMMUNITY OUTREACH AGENCY 3356 SEYMOUR AVENUE BRONX, NY 10469	26-0068695	501(C)(3)	13,531	RESOURCES	READING RESOURCES PROVIDED TO UNDERFUNDED LITERACY PROGRAMS TO INCREASE READING

if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government assistance other) SHOW LOW PUBLIC LIBRARY 86-6002836 170(C)(1) 8,335 FMV DONATION OF 909 READING READING RESOURCES RESOURCES 181 NORTH 9TH STREET PROVIDED TO SHOW LOW, AZ 85901 UNDERFUNDED LITERACY PROGRAMS TO INCREASE READING PROFICIENCY LEVELS

(e) Amount of non-

(f) Method of valuation

(g) Description of

(h) Purpose of grant

DISADVANTAGED CHILDREN.

AMONG DISADVANTAGED CHILDREN. DONATION OF 1,665 READING FAYETTE COUNTY SCHOOLS 35-1099057 170(C)(1) 8,308 FMV READING RESOURCES RESOURCES 900 SPARTAN DRIVE PROVIDED TO CONNERSVILLE, IN 47331 UNDERFUNDED LITERACY PROGRAMS TO INCREASE READING PROFICIENCY LEVELS AMONG

(d) Amount of cash

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(c) IRC section

(a) Name and address of

(b) EIN

if applicable organization grant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other) THE FREE BOOK BUS 83-2436210 501(C)(3) 10,192 FMV DONATION OF 1,120 READING READING RESOURCES RESOURCES 430 NOB HILL CIRCLE PROVIDED TO CHARLOTTESVILLE, VA 22903 UNDERFUNDED LITERACY PROGRAMS TO INCREASE READING PROFICIENCY LEVELS

(f) Method of valuation

(g) Description of

(h) Purpose of grant

DISADVANTAGED CHILDREN.

(d) Amount of cash

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(c) IRC section

(a) Name and address of

(b) EIN

AMONG DISADVANTAGED CHILDREN. DONATION OF 765 READING CACTUS WREN ELEMENTARY 86-6000484 170(C)(1) 5,713 FMV READING RESOURCES RESOURCES SCHOOL HEAD START PROVIDED TO 9650 NORTH 39TH AVENUE UNDERFUNDED PHOENIX, AZ 85051 LITERACY PROGRAMS TO INCREASE READING PROFICIENCY LEVELS AMONG

if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government assistance other) MESA PUBLIC LIBRARY 86-6000252 170(C)(1) 5,541 FMV DONATION OF 1,200 READING READING RESOURCES RESOURCES 64 EAST 1ST STREET PROVIDED TO MESA, AZ 85201 UNDERFUNDED LITERACY PROGRAMS TO INCREASE READING PROFICIENCY LEVELS AMONG

(f) Method of valuation

(g) Description of

(h) Purpose of grant

DISADVANTAGED CHILDREN.

DISADVANTAGED CHILDREN. DONATION OF 1,207 READING MARTIN LUTHER KING JR 86-6000509 170(C)(1) 9,325 FMV READING RESOURCES RESOURCES SCHOOL PROVIDED TO 4615 SOUTH 22ND STREET UNDERFUNDED PHOENIX, AZ 85040 LITERACY PROGRAMS TO INCREASE READING PROFICIENCY LEVELS AMONG

(d) Amount of cash

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(c) IRC section

(a) Name and address of

if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government assistance other) EAGLE PATHWAY 47-5047173 501(C)(3) 29,708 FMV DONATION OF 4,893 READING READING RESOURCES RESOURCES 1720 EAST 8TH AVENUE PROVIDED TO MESA, AZ 85204 UNDERFUNDED

54,538 FMV

(f) Method of valuation

(g) Description of

DONATION OF 7,369 READING

RESOURCES

(h) Purpose of grant

LITERACY PROGRAMS
TO INCREASE READING
PROFICIENCY LEVELS

READING RESOURCES

PROVIDED TO

UNDERFUNDED LITERACY PROGRAMS TO INCREASE READING PROFICIENCY LEVELS

AMONG DISADVANTAGED CHILDREN.

AMONG DISADVANTAGED CHILDREN.

(d) Amount of cash

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

170(C)(1)

(c) IRC section

MOUNTAIN VIEW SCHOOL 801 WEST PEORIA AVENUE PHOENIX, AZ 85029

(a) Name and address of

(b) EIN

86-6000484

if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government assistance other) ASSISTANCE LEAGUE OF 86-0193883 501(C)(3) 16,316 FMV DONATION OF 2,983 READING READING RESOURCES RESOURCES PHOENIX PROVIDED TO 9224 NORTH FIFTH STREET UNDERFUNDED PHOENIX, AZ 85020 LITERACY PROGRAMS TO INCREASE READING

(f) Method of valuation

(g) Description of

(h) Purpose of grant

PROFICIENCY LEVELS

AMONG

CHILDREN.

DISADVANTAGED CHILDREN. DONATION OF 1,807 READING SHADOW HILLS HIGH 27-3971419 170(C)(1) 14,459 FMV READING RESOURCES RESOURCES SCHOOLOLIPHANT PROVIDED TO ELEMENTARY SCHOOL UNDERFUNDED 39225 JEFFERSON STREET LITERACY PROGRAMS INDIO, CA 92203 TO INCREASE READING PROFICIENCY LEVELS AMONG DISADVANTAGED

(d) Amount of cash

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(c) IRC section

(a) Name and address of

organization if applicable (book, FMV, appraisal, non-cash assistance grant cash or assistance or government assistance other) EISENHOWER CENTER FOR 86-6000481 170(C)(1) 9,395 FMV DONATION OF 1,587 READING READING RESOURCES RESOURCES INNOVATION PROVIDED TO 848 NORTH MESA DRIVE UNDERFUNDED MESA, AZ 85201 LITERACY PROGRAMS

(f) Method of valuation

(g) Description of

(h) Purpose of grant

TO INCREACE BEADING

AMONG DISADVANTAGED CHILDREN.

(d) Amount of cash

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(c) IRC section

(b) EIN

					PROFICIENCY LEVELS AMONG DISADVANTAGED CHILDREN.
SAN GABRIEL EDUCATIONAL FOUNDATION 408 JUNIPERO SERRA DRIVE SAN GABRIEL, CA 91776	95-4023144	501(C)(3)	12,748	RESOURCES	READING RESOURCES PROVIDED TO UNDERFUNDED LITERACY PROGRAMS TO INCREASE READING PROFICIENCY LEVELS

organization if applicable (book, FMV, appraisal, non-cash assistance grant cash or assistance or government assistance other) V H LASSEN SCHOOL K8 86-6000509 170(C)(1) 5,269 FMV DONATION OF 601 READING READING RESOURCES RESOURCES PROVIDED TO 909 WEST VINEYARD ROAD PHOENIX, AZ 85041 IUNDERFUNDED LITERACY PROGRAMS TO INCREASE READING

(f) Method of valuation

(g) Description of

(h) Purpose of grant

CHILDREN.

(d) Amount of cash

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(c) IRC section

(b) EIN

					PROFICIENCY LEVELS AMONG DISADVANTAGED CHILDREN.
INDIAN WELLS ELEMENTARY SCHOOL 1000 NORTH 8TH AVENUE HOLBROOK, AZ 86025	86-6007505	170(C)(1)	15,238	RESOURCES	READING RESOURCES PROVIDED TO UNDERFUNDED LITERACY PROGRAMS TO INCREASE READING PROFICIENCY LEVELS AMONG DISADVANTAGED

if applicable organization grant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other) 76-0076537 501(C)(3) 6,901 FMV DONATION OF 1,319 READING READING RESOURCES JONES MEMORIAL UNITED RESOURCES METHODIST CHURCH PROVIDED TO 2504 ALMEDA GENOA ROAD UNDERFUNDED LITERACY PROGRAMS

(f) Method of valuation

(g) Description of

(h) Purpose of grant

CHILDREN.

HOUSTON, TX 77047 TO INCREASE READING PROFICIENCY LEVELS AMONG DISADVANTAGED CHILDREN. DONATION OF 4,184 READING NEVITT ELEMENTARY SCHOOL 86-6000480 170(C)(1) 34,973 FMV READING RESOURCES RESOURCES 4525 EAST SAINT ANNE PROVIDED TO AVENUE UNDERFUNDED LITERACY PROGRAMS

PHOENIX, AZ 85042 TO INCREASE READING PROFICIENCY LEVELS AMONG DISADVANTAGED

(d) Amount of cash

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(c) IRC section

(a) Name and address of

organization if applicable (book, FMV, appraisal, non-cash assistance grant cash or assistance or government assistance other) CAMARENA MEMORIAL 95-6000684 170(C)(1) 5,425 FMV DONATION OF 454 READING READING RESOURCES RESOURCES PROVIDED TO LIBRARY 850 ENCINAS AVENUE UNDERFUNDED CALEXICO, CA 92231 LITERACY PROGRAMS

(f) Method of valuation

(g) Description of

(h) Purpose of grant

AMONG DISADVANTAGED CHILDREN.

(d) Amount of cash

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(c) IRC section

(b) EIN

,					TO INCREASE READING PROFICIENCY LEVELS AMONG DISADVANTAGED CHILDREN.
FOOTHILLS FOOD BANK 6038 EAST HIDDEN VALLEY DRIVE CAVE CREEK, AZ 85331	86-0701504	501(C)(3)	6,161	RESOURCES	READING RESOURCES PROVIDED TO UNDERFUNDED LITERACY PROGRAMS TO INCREASE READING PROFICIENCY LEVELS

organization if applicable (book, FMV, appraisal, non-cash assistance grant cash or assistance or government assistance other) PALOMINO PRIMARY SCHOOL 86-6005162 170(C)(1) 12,116 FMV DONATION OF 1,896 READING READING RESOURCES RESOURCES 15833 NORTH 29TH STREET PROVIDED TO PHOENIX, AZ 85032 IUNDERFUNDED LITERACY PROGRAMS TO INCREASE READING

(d) Amount of cash

(f) Method of valuation

(g) Description of

(h) Purpose of grant

DISADVANTAGED CHILDREN.

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(c) IRC section

(b) EIN

					PROFICIENCY LEVELS AMONG DISADVANTAGED CHILDREN.
JB SUTTON ELEMENTARY SCHOOL 1001 NORTH 31ST AVENUE PHOENIX, AZ 85009	86-6000483	170(C)(1)	8,367	RESOURCES	READING RESOURCES PROVIDED TO UNDERFUNDED LITERACY PROGRAMS TO INCREASE READING PROFICIENCY LEVELS AMONG

organization if applicable (book, FMV, appraisal, non-cash assistance grant cash or assistance or government assistance other) LOWELL ELEMENTARY SCHOOL 86-6000481 170(C)(1) 9,649 FMV DONATION OF 1,605 READING READING RESOURCES RESOURCES 920 EAST BROADWAY ROAD PROVIDED TO MESA, AZ 85204 IUNDERFUNDED LITERACY PROGRAMS TO INCREASE READING

(f) Method of valuation

(g) Description of

(h) Purpose of grant

AMONG DISADVANTAGED CHILDREN.

(d) Amount of cash

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(c) IRC section

(b) EIN

					PROFICIENCY LEVELS AMONG DISADVANTAGED CHILDREN.
GUERRERO ELEMENTARY SCHOOL 463 SOUTH ALMA SCHOOL ROAD MESA, AZ 85210	86-6000481	170(C)(1)	5,096	RESOURCES	READING RESOURCES PROVIDED TO UNDERFUNDED LITERACY PROGRAMS TO INCREASE READING PROFICIENCY LEVELS

organization if applicable (book, FMV, appraisal, non-cash assistance grant cash or assistance or government assistance other) EDISON ELEMENTARY SCHOOL 86-6000481 170(C)(1) 41,348 FMV DONATION OF 5,084 READING READING RESOURCES RESOURCES 545 NORTH HORNE AVENUE PROVIDED TO MESA, AZ 85203 UNDERFUNDED LITERACY PROGRAMS

(f) Method of valuation

(g) Description of

(h) Purpose of grant

					TO INCREASE READING PROFICIENCY LEVELS AMONG DISADVANTAGED CHILDREN.
A MIGHTY CHANGE OF HEART 18128 WEST DESERT LANE SURPRISE, AZ 85388	81-3155104	501(C)(3)	25,629	RESOURCES	READING RESOURCES PROVIDED TO UNDERFUNDED LITERACY PROGRAMS TO INCREASE READING PROFICIENCY LEVELS

IAMONG DISADVANTAGED CHILDREN.

(d) Amount of cash

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(c) IRC section

(b) EIN

if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government assistance other) MESA UNITED WAY 86-0198599 501(C)(3) 5,429 FMV DONATION OF 1,236 READING READING RESOURCES RESOURCES 303 NORTH CENTENNIAL WAY PROVIDED TO SUITE 1 UNDERFUNDED MESA, AZ 85201 LITERACY PROGRAMS TO INCREASE READING PROFICIENCY LEVELS

(f) Method of valuation

(g) Description of

(h) Purpose of grant

DISADVANTAGED CHILDREN.

AMONG DISADVANTAGED CHILDREN. DONATION OF 1,486 READING ARIZONA MUSEUM OF 86-6000252 170(C)(1) 10,349 FMV READING RESOURCES RESOURCES NATURAL HISTORY PROVIDED TO 53 NORTH MACDONALD UNDERFUNDED MESA, AZ 85201 LITERACY PROGRAMS TO INCREASE READING PROFICIENCY LEVELS AMONG

(d) Amount of cash

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(c) IRC section

(a) Name and address of

organization if applicable (book, FMV, appraisal, non-cash assistance grant cash or assistance or government assistance other) TEMPE PUBLIC LIBRARY 86-6000262 170(C)(1) 8,005 FMV DONATION OF 1,070 READING READING RESOURCES RESOURCES 3500 SOUTH RURAL ROAD PROVIDED TO TEMPE, AZ 85282 IUNDERFUNDED LITERACY PROGRAMS TO INCREASE READING

(f) Method of valuation

(g) Description of

(h) Purpose of grant

AMONG DISADVANTAGED CHILDREN.

(d) Amount of cash

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(c) IRC section

(b) EIN

					PROFICIENCY LEVELS AMONG DISADVANTAGED CHILDREN.
PENDERGAST ELEMENTARY SCHOOL DISTRICT 3841 NORTH 91ST AVENUE PHOENIX, AZ 85307	86-6000522	170(C)(1)	18,981	RESOURCES	READING RESOURCES PROVIDED TO UNDERFUNDED LITERACY PROGRAMS TO INCREASE READING PROFICIENCY LEVELS

if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government assistance other) 88-6000030 170(C)(1) 6,390 FMV DONATION OF 1,271 READING READING RESOURCES PAT DISKIN ELEMENTARY RESOURCES SCHOOL PROVIDED TO 4220 RAVENWOOD DRIVE UNDERFUNDED LAS VEGAS, NV 89147 LITERACY PROGRAMS TO INCREASE READING

(f) Method of valuation

(g) Description of

(h) Purpose of grant

PROFICIENCY LEVELS

AMONG DISADVANTAGED

CHILDREN.

(d) Amount of cash

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(c) IRC section

(a) Name and address of

(b) EIN

CHILDREN. DONATION OF 786 READING ARIZONA HELPING HANDS 86-0935988 501(C)(3) 6,816 FMV READING RESOURCES RESOURCES 3110 EAST THUNDERBIRD PROVIDED TO ROAD SUITE UNDERFUNDED 100 LITERACY PROGRAMS PHOENIX, AZ 85032 TO INCREASE READING PROFICIENCY LEVELS AMONG DISADVANTAGED

if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government assistance other) PORTER ELEMENTARY SCHOOL 41-2254897 170(C)(1) 12,433 FMV DONATION OF 1,892 READING READING RESOURCES RESOURCES 1350 SOUTH LINDSAY ROAD PROVIDED TO MESA, AZ 85204 UNDERFUNDED LITERACY PROGRAMS

(f) Method of valuation

(g) Description of

(h) Purpose of grant

TO INCREASE READING

AMONG DISADVANTAGED

CHILDREN

(d) Amount of cash

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(c) IRC section

(a) Name and address of

(b) EIN

CHILDREN. DONATION OF 1,733 READING BRUNSON-LEE ELEMENTARY 86-6000495 170(C)(1) 15,845 FMV READING RESOURCES RESOURCES SCHOOL PROVIDED TO 1350 NORTH 48TH STREET UNDERFUNDED PHOENIX, AZ 85008 LITERACY PROGRAMS TO INCREASE READING PROFICIENCY LEVELS AMONG DISADVANTAGED

organization if applicable (book, FMV, appraisal, non-cash assistance grant cash or assistance or government assistance other) COPPER QUEEN LIBRARY 86-6000235 170(C)(1) 7,398 FMV DONATION OF 703 READING READING RESOURCES RESOURCES PROVIDED TO 6 MAIN STREET BISBEE, AZ 85603 UNDERFUNDED

(f) Method of valuation

(g) Description of

(h) Purpose of grant

					LITERACY PROGRAMS TO INCREASE READING PROFICIENCY LEVELS AMONG DISADVANTAGED CHILDREN
SKY VIEW ELEMENTARY SCHOOL 8624 WEST SWEETWATER	86-6000488	170(C)(1)	7,942	RESOURCES	READING RESOURCES PROVIDED TO UNDERFUNDED

AVENUE LITERACY PROGRAMS PEORIA, AZ 85381 TO INCREASE READING PROFICIENCY LEVELS AMONG DISADVANTAGED CHILDREN

(d) Amount of cash

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(c) IRC section

(b) EIN

if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government assistance other) 86-6000480 170(C)(1) 17,653 FMV DONATION OF 3150 READING READING RESOURCES TEMPE ELEMENTARY SCHOOL RESOURCES IDDOVADED TO

(f) Method of valuation

(g) Description of

(h) Purpose of grant

	 		I	
				CHILDREN
				DISADVANTAGED
				AMONG
				PROFICIENCY LEVELS
				TO INCREASE READING
TEMPE, AZ 85282				LITERACY PROGRAMS
3205 SOUTH RURAL ROAD				UNDERFUNDED
DISTRICT NO 3				PROVIDED TO

COPPER VALLEY COMMUNITY 170(C)(1) 7,138 FMV DONATION OF 653 READING 92-6010355 RESOURCES LIBRARY MILE 186 GLENN HIGHWAY PO BOX 173 GLENNALLEN, AK 99588

(d) Amount of cash

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(c) IRC section

(a) Name and address of

(b) EIN

READING RESOURCES PROVIDED TO UNDERFUNDED LITERACY PROGRAMS TO INCREASE READING PROFICIENCY LEVELS AMONG DISADVANTAGED CHILDREN

if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government assistance other) TOK COMMUNITY LIBRARY 23-7209521 170(C)(1) 6,911 FMV DONATION OF 657 READING READING RESOURCES RESOURCES ASSOCIATION PROVIDED TO MILE 1314 ALASKA HIGHWAY UNDERFUNDED PO BOX 227 LITERACY PROGRAMS

(f) Method of valuation

(g) Description of

(h) Purpose of grant

TO INCREASE READING

PROFICIENCY LEVELS

DISADVANTAGED CHILDREN

AMONG

DISADVANTAGED CHILDREN DONATION OF 910 READING IMAGINE SCHOOLS AVONDALE 45-2528346 170(C)(1) 5,121 FMV READING RESOURCES RESOURCES 950 NORTH ELISEO FELIX JR PROVIDED TO WAY UNDERFUNDED AVONDALE, AZ 85323 LITERACY PROGRAMS TO INCREASE READING PROFICIENCY LEVELS AMONG

(d) Amount of cash

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(c) IRC section

(a) Name and address of

227

TOK, AK 99780

if applicable organization grant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other) SOUSA ELEMENTARY SCHOOL 86-1026267 170(C)(1) 6,129 FMV DONATION OF 1,080 READING READING RESOURCES RESOURCES 616 NORTH MOUNTAIN ROAD PROVIDED TO MESA, AZ 85207 UNDERFUNDED LITERACY PROGRAMS

6,775 FMV

(f) Method of valuation

(g) Description of

DONATION OF 1,199 READING

RESOURCES

(h) Purpose of grant

TO INCREASE READING

READING RESOURCES

LITERACY PROGRAMS
TO INCREASE READING
PROFICIENCY LEVELS

PROVIDED TO

UNDERFUNDED

AMONG DISADVANTAGED CHILDREN

AMONG DISADVANTAGED CHILDREN

(d) Amount of cash

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

170(C)(1)

(c) IRC section

BRINTON ELEMENTARY SCHOOL 11455 EAST SUNLAND AVENUE MESA, AZ 85208

(a) Name and address of

(b) EIN

86-6000481

if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government assistance other) IMAGINE PREP SURPRISE 20-4931199 170(C)(1) 6.070 FMV DONATION OF 1,080 READING READING RESOURCES RESOURCES 14850 NORTH 156TH AVENUE PROVIDED TO SURPRISE, AZ 85379 UNDERFUNDED LITERACY PROGRAMS TO INCREASE READING

(f) Method of valuation

(g) Description of

(h) Purpose of grant

DISADVANTAGED CHILDREN

(d) Amount of cash

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(c) IRC section

(a) Name and address of

(b) EIN

PROFICIENCY LEVELS AMONG DISADVANTAGED CHILDREN DONATION OF 1,000 READING WHITMAN ELEMENTARY 86-6000481 170(C)(1) 5,515 FMV READING RESOURCES RESOURCES SCHOOL PROVIDED TO 1829 NORTH GRAND UNDERFUNDED MESA, AZ 85201 LITERACY PROGRAMS TO INCREASE READING PROFICIENCY LEVELS AMONG

efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493304020540 SCHEDULE M OMB No. 1545-0047 **Noncash Contributions** (Form 990) 2019 ▶Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30. ▶ Attach to Form 990. ▶Go to www.irs.gov/Form990 for the latest information. Open to Public Department of the Treasury Internal Revenue Service Inspection Name of the organization **Employer identification number** KIDS NEED TO READ 26-2755631 Part I Types of Property (a) (b) (c) (d) Check if Number of contributions or Noncash contribution Method of determining applicable items contributed amounts reported on noncash contribution amounts Form 990, Part VIII, line 1g 1 Art—Works of art . . Art—Historical treasures Art—Fractional interests Χ 637,208 FMV 4 Books and publications Clothing and household goods Cars and other vehicles **7** Boats and planes . . 8 Intellectual property . . . Securities—Publicly traded . 10 Securities—Closely held stock . 11 Securities—Partnership, LLC, or trust interests 12 Securities—Miscellaneous . . 13 Qualified conservation contribution—Historic structures Qualified conservation contribution—Other . . Real estate—Residential . Real estate—Commercial . Real estate—Other . . . 18 Collectibles 19 Food inventory . . . 20 Drugs and medical supplies . 21 Taxidermy 22 Historical artifacts . 23 Scientific specimens . . 24 Archeological artifacts . . 25 Other ► (___ 26 Other ▶ (______) 27 Other ▶ (______) Number of Forms 8283 received by the organization during the tax year for contributions 29 for which the organization completed Form 8283, Part IV, Donee Acknowledgement Yes No 30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required to be used for exempt 30a Nο **b** If "Yes," describe the arrangement in Part II. Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions? 31 Nο 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash 32a Nο **b** If "Yes," describe in Part II. If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, Schedule M (Form 990) (2019) For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat. No. 51227J

Schedule M (Form 990) (2019)	Page 2					
	tion. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization					
is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.						
Return Reference Explanation						
Schedule M (Form 990) (2019)						

efile GRAPH	efile GRAPHIC print - DO NOT PROCESS As Filed Data -						
SCHEDULE O (Form 990 or 990- EZ) Department of the Treasury Supplemental Information to Form 990 or 990-EZ Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. Attach to Form 990 or 990-EZ. Supplemental Information to Form 990 or 990-EZ Complete to provide information for responses to specific questions on Form 990 or 990-EZ Op MMB OMB OMB OMB OF The supplemental Information to Form 990 or 990-EZ Complete to provide information for responses to specific questions on Form 990 or 990-EZ Op Department of the Treasury							
Namel Setherofg KIDS NEED TO REA 990 Schedule	AD .	oloyer identification number					
Return Reference	Explanation						
FORM 990, PART VI, SECTION A, LINE 2	ROBERT GARY, THE CREATIVE DIRECTOR, IS DENISE GARY'S SON.						

Return Explanation

990 Schedule O, Supplemental Information

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

Return Explanation

990 Schedule O, Supplemental Information

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

990 Schedule O, Supplemental Information Return Explanation

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

THE MEMBERS OF THE KIDS NEED TO READ BOARD OF DIRECTORS CONDUCTED AN INDEPENDENT REVIEW AN D APPROVAL OF THE EXECUTIVE DIRECTOR SALARY. SEVERAL MEETINGS WERE HELD IN RELATION TO THE APPROVAL PROCESS, IN WHICH COMPARATIVE DATA WAS REVIEWED FROM SEVERAL SOURCES. DOCUMENTAT ION HAS BEEN RETAINED REGARDING THE DELIBERATION AND DECISION RESULTING FROM THE INDEPENDE NT REVIEW

Return Explanation
Reference

990 Schedule O, Supplemental Information

LINE 19

FORM 990, THE ORGANIZATION'S GOVERNING DOCUMENTS AND CONFLICT OF INTEREST POLICY ARE AVAILABLE UPON REQUEST. THE FINANCIAL STATEMENTS ARE ON ITS WEBSITE.