May the IRS discuss this return with the preparer shown above? (see instructions) For Paperwork Reduction Act Notice, see the separate instructions.

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.

DLN: 93493039010561 OMB No. 1545-0047

> Open to Public Inspection

Internal Revenue Service For the 2019 calendar year, or tax year beginning 10-01-2019 , and ending 09-30-2020 D Employer identification number B Check if applicable: READING IŠ FUNDAMENTAL INC ☐ Address change ☐ Name change Doing business as ☐ Initial return ☐ Final return/terminated E Telephone number Number and street (or P.O. box if mail is not delivered to street address) Room/suite 750 FIRST STREET NE NO 920 ☐ Amended return ☐ Application pending (877) 743-7323 City or town, state or province, country, and ZIP or foreign postal code WASHINGTON, DC  $\,$  20002 G Gross receipts \$ 20,337,845 Name and address of principal officer: H(a) Is this a group return for ALICIA LEVI □Yes ☑No subordinates? 750 FIRST STREET NE NO 920 H(b) Are all subordinates WASHINGTON, DC 20002 ☐ Yes ☐No included? **☑** 501(c)(3) **☐** 501(c)( ) **◄** (insert no.) 4947(a)(1) or If "No," attach a list. (see instructions) **H(c)** Group exemption number ▶ Website: ► WWW.RIF.ORG L Year of formation: 1973 M State of legal domicile: DC **K** Form of organization: lacktriangle Corporation lacktriangle Trust lacktriangle Association lacktriangle Other Summary 1 Briefly describe the organization's mission or most significant activities: MOTIVATING CHILDREN TO READ BY MAKING READING A FUN AND BENEFICIAL PART OF EVERYDAY LIFE Activities & Governance 2 Check this box ► ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets 3 Number of voting members of the governing body (Part VI, line 1a) . 12 11 4 Number of independent voting members of the governing body (Part VI, line 1b) 4 Total number of individuals employed in calendar year 2019 (Part V, line 2a) 5 31 Total number of volunteers (estimate if necessary) . . . . 6 50,000 Total unrelated business revenue from Part VIII, column (C), line 12 **7**a **b** Net unrelated business taxable income from Form 990-T, line 39 **Prior Year Current Year** 8 Contributions and grants (Part VIII, line 1h) . 9,843,591 5,048,114 Ravenue 1,415,203 1,297,321 9 Program service revenue (Part VIII, line 2g) . 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 416,858 317,424 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 11,675,652 6,662,859 12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3). 2,140,973 1,830,123 0 **14** Benefits paid to or for members (Part IX, column (A), line 4) . . . . . 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10) 2,819,597 3,160,139 Expenses 202,000 262,000 16a Professional fundraising fees (Part IX, column (A), line 11e) . **b** Total fundraising expenses (Part IX, column (D), line 25) ▶1,297,583 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) . 3,749,015 3,430,297 8,682,559 18 Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25) 8,911,585 Revenue less expenses. Subtract line 18 from line 12 . 2,764,067 -2,019,700 Net Assets or Fund Balances Beginning of Current Year End of Year 16,836,002 15,864,759 20 Total assets (Part X, line 16) . 21 Total liabilities (Part X, line 26) . 2,562,432 3,236,713 Net assets or fund balances. Subtract line 21 from line 20 . 14,273,570 12,628,046 Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge Signature of officer Sign Here ALICIA LEVI PRESIDENT AND CEO Type or print name and title Print/Type preparer's name Preparer's signature Check | if 2021-02-05 P00639053 Paid self-employed Firm's name ► MARCUM LLP Firm's EIN > 11-1986323 Preparer Use Only Firm's address ► 1899 STREET NW SUITE 850 Phone no. (202) 227-4000 WASHINGTON, DC 20036

☑ Yes ☐ No

Form	990 (2019)					Page <b>2</b>					
Pa	rt III Statement	of Program Servic	e Accomplis	hments							
	Check if Sched	dule O contains a respo	nse or note to	any line in this Part III		🗹					
1	Briefly describe the o	rganization's mission:									
CHIL EVER SUPP RIF'S DON, LITE	DREN, PROVIDING QUAY Y CHILD THE FUNDAM ORTS THE IMPLEMENT EBOOK PLATFORM AN ATION, HELPING CHILE	ÁLITY CONTENT AND R ENTALS FOR SUCCESS ATION OF THESE PROU DO ARRANGEMENTS WI DREN ACHIEVE THEIR F REACH CHILDREN IN N	ESOURCES TO . RIF CREATES GRAMS TO ENSI TH BOOK PUBL: FULL POTENTIAI	MAKE AN IMPACT, AND INNOVATIVE LITERACY URE THAT CHILDREN H. ISHERS AND DISTRIBU L THROUGH THE LIFE-C	RICA BY INSPIRING A PASSION FO ENGAGING COMMUNITIES IN THI SOLUTIONS THAT ADDRESS KEY AVE THE OPPORTUNITY TO READ TORS, RIF MAXIMIZES THE IMPAC HANGING POWER OF LITERACY. F OF THOUSANDS OF VOLUNTEER:	E SOLUTION TO GIVE LITERACY ISSUES AND AND SUCCEED. THROUGH T OF EVERY DOLLAR AND RIF PROVIDES BOOKS AND					
2	Did the organization of the prior Form 990 or	, ,	nt program ser	vices during the year w	hich were not listed on	□ Yes ☑ No					
						Lifes Lino					
3	•	se new services on Sch		changes in how it cond	usts, any program						
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?										
	If "Yes," describe the	se changes on Schedul	e O.								
4	Section 501(c)(3) and		ns are required	to report the amount of	largest program services, as mea of grants and allocations to others,						
4a	(Code:	) (Expenses \$	2,427,437	including grants of \$	1,830,123 ) (Revenue \$	445,706 )					
	See Additional Data	, (=			_,,, (						
4b	(Code: See Additional Data	) (Expenses \$	2,303,919	including grants of \$	) (Revenue \$	851,615 )					
4c	(Code:	) (Expenses \$	1,394,844	including grants of \$	) (Revenue \$	)					
	See Additional Data										
	Other present comit	es (Describe in Schedu	ıle O.)								
4d	Other program service	es (Describe III Schedi	,								
4d	(Expenses \$	•	uding grants of	\$	) (Revenue \$	)					

Pa	Checklist of Required Schedules			
1 4	the effective of Required benediates		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 2	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	s <b>3</b>		No
4	<b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "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 rigit to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part	ht <b>6</b>		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? <i>If "Yes,"</i> 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, I or X as applicable.	.x,		
	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 tot assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	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 2	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 2	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	Yes	
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i> 9. Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete</i>		Yes	
	Schedule D, Parts XI and XII	12a	Yes	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	<del></del>		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	13 14a		No No
	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
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	0 16		No
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I</i> (see instructions)	17	Yes	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	1.0	1	l

20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H . . . . .

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

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

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

Νo

No

Yes

19

20a

20b

21

Form	990 (2019)			Page <b>4</b>
Par	Checklist of Required Schedules (continued)			
			Yes	No
	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
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? 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		
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	<b>Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L,</i> Part I	25a		No
	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>	25b		No
26	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
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>	27		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
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
c	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	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <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? If "Yes," complete Schedule R, Part I	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, 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	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? 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? <b>Note.</b> All Form 990 filers are required to complete Schedule O	38	Yes	
Pa	Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V	· ;		<u> </u>
1 -	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable   1a   34		Yes	No
	Enter the number reported in Box 3 or Form 1090. Enter -0- if not applicable			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
•	(gambling) winnings to prize winners?	1c	Yes	

Par	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			
b	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	
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		No
b	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)?	4a		No
b	If "Yes," enter the name of the foreign country:  See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
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
С	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
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	<b>7</b> b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year	-		
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No
	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	<b>Sponsoring organizations maintaining donor advised funds.</b> 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:			
_	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 a	Section 501(c)(12) organizations. Enter:  Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other sources	1		
	against amounts due or received from them.)	-		
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
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.	1		
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
	Enter the amount of reserves on hand	]		
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		
	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	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

D-				
	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and f 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	ŕ	onse to	unes ✓
Se	ection A. Governing Body and Management			
		4.5	Yes	No
1a	a Enter the number of voting members of the governing body at the end of the tax year  1a	12		
	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	11		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any officer, director, trustee, or key employee?	other <b>2</b>		No
3	Did the organization delegate control over management duties customarily performed by or under the direct sup of officers, directors or trustees, or key employees to a management company or other person? .	ervision 3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed	1? . 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	a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one o members of the governing body?	r more <b>7a</b>		No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders persons other than the governing body?	, or <b>7b</b>		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the y the following:	ear by		
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	. 8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	. 9		No
Se	ection B. Policies (This Section B requests information about policies not required by the Internal R	evenue Code	∍.)	
			Yes	No
10a	a Did the organization have local chapters, branches, or affiliates?	10a		No
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affili and branches to ensure their operations are consistent with the organization's exempt purposes?	ates,		
11a	a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filin form?	g the <b>11a</b>	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	a Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give ris			
	conflicts?	12b	Yes	
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe Schedule O how this was done	12c	Yes	
13		. 13	Yes	
14		. 14	Yes	
15	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	dent		
	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).			
	a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with 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 partic in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's extatus with respect to such arrangements?			
Se	ection C. Disclosure	100		
17	List the states with which a copy of this Form 990 is required to be filed▶			
	AK , AL , AR , AZ , CA , CT , DE , F KS , KY , LA , MA , MD , ME , MI , N NE , NH , NJ , NM , NY , OH , OK , TX , UT , VA , VT , WA , WI , WV ,	MN, MO, MS, OR, PA, RI, S WY	MT, NO	O, ND,
18	only) available for public inspection. Indicate how you made these available. Check all that apply.	3)s		_
	$lacktriangle$ Own website $\ \Box$ Another's website $\ lacktriangle$ Upon request $\ \Box$ Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interpolicy, 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 recomposed Ferrufino 750 FIRST STREET NE NO 920 WASHINGTON, DC 20002 (877) 743-7323	rds:		

(17) CRAWFORD POUNDS

DIRECTOR

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.

<ul> <li>List all of the organization's former director organization, more than \$10,000 of reportable control</li> </ul>	ompensation fro	m the									
See instructions for the order in which to list the	•										
Check this box if neither the organization no  (A)  Name and title	(B) Average hours per week (list any hours	Position that pers	on (do an on on is	(C) o no le bot	) t cho ox, u h an		ore er	(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) ALICIA LEVI PRESIDENT AND CEO	40.00	х		х				267,620	0	17,681	
(2) EDWARD DE LEON CHIEF PROGRAM & CONTENT OFFICER - UNTIL 02/2020	40.00				х			169,713	0	10,320	
(3) BETH L MEYER FORMER KEY EMPLOYEE - UNTIL 09/2019	40.00						х	152,155	0	14,984	
(4) JODI RUBIN VICE PRESIDENT STRATEGIC INITIATIVES	40.00					х		136,848	0	24,709	
(5) CARLA TEVAULT SR DIRECTOR OF MARKETING - UNTIL 08/2020	40.00					х		112,316	0	18,865	
(6) BRYAN KLOPACK VICE PRESIDENT, DEVELOPMENT	40.00					х		117,784	0	7,572	
(7) JENNIFER MOONE SR DIRECTOR GOVERNMENT RELATIONS	40.00					х		109,958	0	7,592	
(8) CHERYL CLARK VICE PRESIDENT BOOKS FOR OWNERSHIP - UNTIL 08/2020	40.00					х		104,543	0	7,446	
(9) ALICE SINGDAHLSEN CHIEF FINANCIAL OFFICER	40.00			х				107,991	0	1,071	
(10) JOHN REMONDI CHAIRMAN	4.50	х		х				0	0	0	
(11) JJ JOHNSON VICE CHAIRMAN AND SECRETAR	1.50	х		х				0	0	0	
(12) MARC WALBY TREASURER	1.50	х		х				0	0	0	
(13) CAMILLE HYMES DIRECTOR	1.50	х						0	0	0	
(14) KITTY KELLEY DIRECTOR	1.50	х						0	0	0	
(15) EMILY MOORE DIRECTOR	1.50	х						0	0	0	
(16) THOMAS PLATH DIRECTOR	1.50	х						0	0	0	
	4.50	-	<del>                                     </del>	-	1	<del>                                     </del>	+				

1.50

	990 (2019)	Twisters V	av Em	mlass			a u:a	. h	-+ C		-4-4	Employees	(san:	timad)	Page <b>8</b>
Pai	t VII Section A. Officers, Directors  (A)  Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	Position than of is b	on (de	(C o no ox, u in of	) t che unles ficer rust	eck moss pers and a ee)	ore son	Re com fr org (W	(D) Reportable compensation from the organization (W-2/1099-MISC)		(E) Reportable compensation from related organizations (W-2/1099- MISC)		(F) Estimated amount of other compensation from the organization and related organizations	
			Individual trustee or director	onal Trustée		oloyee	Highest compensated employee								
·····	CAROLYN SIMPSON	1.50	×								0		0		0
(19) (	CHRISTINA WIRE														
DIREC	TOR	1.50	×								0		0		0
(20) E	RICK ZIMMERMAN	1.50	V										0		0
DIRE	CTOR		×								0		U		
	Sub-Total					•	•								
	otal from continuation sheets to Part \	•				•	:		1.2	78 928			0		110,240
d Total (add lines 1b and 1c)										110,240					
2	of reportable compensation from the orga		uiose ii	steu i	abov	/e) v	nio re	CEIVE	eu moi	e tilali	ֆ100	,000			
														Yes	No
3	Did the organization list any <b>former</b> offic line 1a? <i>If "Yes," complete Schedule J for</i>	•		key (	emp •	loye •	e, or h	nighe •	est com	npensa • •	ted er	mployee on	3	Yes	
4	For any individual listed on line 1a, is the organization and related organizations grindividual											he • • •	4	Yes	
5	Did any person listed on line 1a receive o services rendered to the organization?If '								ganizat •	ion or	ndivi	dual for	5	165	No
Se	ection B. Independent Contractors	1													110
1	Complete this table for your five highest of from the organization. Report compensat	compensated in											mpen	sation	
	Name and h	(A) ousiness address								С	escrip	(B) tion of services		(C Comper	
TRUE	NORTH INC								F			L FUNDRAISING			563,573
	HIRD AVENUE 12TH FLOOR														
	YORK, NY 10017 ER CAPITAL LLC								F	PROFES:	SIONA	L CONSULTING			151,761
252 N	ASSAU STREET														
	CENTON, NJ 08542 JSA LLP									DDOFES	SIONA	L CONSULTING			150,000
	GREENSBORO DRIVE SUITE 800								ľ	NOI ES.	51014	L CONSOLITING			150,000
MCLE.	AN, VA 22102														
	LD & PORTER LLP								ľ	PROFES:	SIONA	L CONSULTING			126,666
	IASSACHUSETTS AVENUE NW IINGTON, DC 20001														
BITPU	SHER LLC						_		F	PROFES:	SIONA	L CONSULTING			105,047
	INE STREET SUITE 460 RANCISCO, CA 94111														
2 7	otal number of independent contractors (in	ncluding but not	limite	d to t	hose	list	ed abo	ove)	who re	eceived	more	than \$100,00	00 of		
	ompensation from the organization > 5													Form <b>99</b>	0 (2019)
1															<del>-</del> (∠∪⊥⊅)

Part		Statement	of E	Pavanua						Page 9
raii	VIII				a resno	nse or note to any	y line in this Part VIII			П
		Check if Schee	i di C	o contains	<u>a (CSPS)</u>	inse of floce to diff	(A) Total revenue	( <b>B)</b> Related or exempt function	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections
	18	a Federated campa	igns	· .	1a	44,668		revenue		512 - 514
Contributions, Gifts, Grants and Other Similar Amounts		<b>b</b> Membership dues			1b					
3ra nou		c Fundraising even			1c					
ß, ( An		<b>d</b> Related organizat			1d					
Giff		e Government grants			10     1e	10,000				
tributions, Gifts Other Similar					<u>16</u>					
tior sr S		<ul> <li>All other contribution</li> <li>and similar amounts</li> <li>above</li> </ul>	not not	included	1f	4,993,446				
ig #	۱,	Noncash contributio	ns in	ıcluded in						
d C		lines 1a - 1f:\$			<b>1</b> g	273,438				
Contand		<b>h Total.</b> Add lines :	1a-1	f		•	5,048,114			
						Business Code				
	2a	CONTRACT REVENUE				900099	1,177,215	1,177,215		
nue	h	OTHER PROGRAM RE	VENI	IE			120,106	120,106		
Program Service Revenue	D	OMERTROGISTIC		,_		900099				
e B	c									
er vic										
8	d	I								
gran	_									
Proč	е									
	f	All other program	serv	ice revenue						
	g	Total. Add lines 2	2a-2	f	. ▶ ˈ	1,297,321				
	3	Investment income	(inc	luding divid	ends, ir	nterest, and other	183,61	1		183,611
		similar amounts)  . Income from invest				and proceeds 1	<b>•</b>	_		
		Royalties			-	•	•	+		
				(i) Re	al	(ii) Personal				
	6-	Cross ronts	6-							
		Gross rents Less: rental	6a				$\dashv$			
	D	expenses	6b							
	С	Rental income or (loss)	<b>6</b> c							
	c	Net rental income		(loss)			_			
				(i) Secur		(ii) Other				
	7a	Gross amount								
		from sales of assets other	7a	13,	808,799					
	L	than inventory  Less: cost or					$\dashv$			
	b	other basis and sales expenses	7b	13,	674,986					
		sales expenses					_			
		Gain or (loss)	7с		133,813					
		Net gain or (loss)				<u> </u>	133,81	3		133,813
an	oa	Gross income from fu (not including \$		of						
en l		contributions reported See Part IV, line 18								
Rev	L				8a 8b		_			
Other Revenue		Less: direct expen Net income or (los				ents 👆	_			
oth		•	•		Ī					
	9a	Gross income from See Part IV, line 19	gam •	ing activities	.   9a					
	ŀ	Less: direct expen			9a 9b		_			
		: Net income or (los				es •				
		•	,	, ,						
	10	aGross sales of inve returns and allowa	ento	ry, less						
	L	Less: cost of good			10a 10b		4			
		Net income or (los				om.				
	_	Miscellaneo			invento	Business Code				
	11									
	b	,			<b></b>			1		
	c				+					
	c	All other revenue						1		
	e	Total. Add lines 1	1a-:	11d		•				
	12	<b>2 Total revenue.</b> S	ee ir	nstructions			2			2
							6,662,85	9 1,297,32	·[	0 317,424 Form <b>990</b> (2019)

Form 990 (2019)				Page <b>10</b>
Part IX Statement of Functional Expenses				
Section 501(c)(3) and 501(c)(4) organizations must c		=		
Check if Schedule O contains a response or note to ar		(B)	(C)	🗹
Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	1,830,123	1,830,123		
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.				
<b>4</b> Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	725,266	488,031	122,789	114,446
<b>6</b> Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
<b>7</b> Other salaries and wages	2,009,460	1,107,786	612,617	289,057
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)	66,283	36,949	19,832	9,502
9 Other employee benefits	194,193	113,035	52,724	28,434
<b>10</b> Payroll taxes	164,937	96,504	44,220	24,213
11 Fees for services (non-employees):				
a Management				
<b>b</b> Legal	29,802	16,897	12,905	
c Accounting	50,622		50,622	
d Lobbying				
e Professional fundraising services. See Part IV, line 17	262,000			262,000
f Investment management fees	39,476		39,476	
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	1,054,302	885,003	95,508	73,791
12 Advertising and promotion	417,228	276,827	2,536	137,865
13 Office expenses	186,268	99,549	19,160	67,559
<b>14</b> Information technology	241,537	190,678	36,650	14,209
15 Royalties	54,235	54,235		
<b>16</b> Occupancy	325,662	198,341	83,132	44,189
<b>17</b> Travel	43,001	36,904	2,841	3,256
<b>18</b> Payments of travel or entertainment expenses for any federal, state, or local public officials .				
19 Conferences, conventions, and meetings	16,738	6,950	7,394	2,394
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	410,919	363,807	30,499	16,613
23 Insurance	24,393		24,393	
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a PRINTING & PRODUCTION	502,304	290,771	1,478	210,055
	,	·	ŕ	·
b LITERACY MATERIALS	33,810	33,810		
с				
d				
e All other expenses				
25 Total functional expenses. Add lines 1 through 24e	8,682,559	6,126,200	1,258,776	1,297,583
<b>26 Joint costs.</b> Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.	384,450	267,302	0	117,148
Check here ► ☐ if following SOP 98-2 (ASC 958-720).				

Form 990 (2019)

14

15

16

17

18

19

20

21

23

24

25

26

27

28

31

32

33

Liabilities 22

Fund Balances

٥ 29

Assets 30 Intangible assets . . .

Deferred revenue . . . .

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 .

Grants payable .

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

Accounts payable and accrued expenses .

Tax-exempt bond liabilities . . . . .

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 .

**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</a> and

Unsecured notes and loans payable to unrelated third parties .

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,

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

Retained earnings, endowment, accumulated income, or other funds

14

15

16

17

18

19

20

21

22

23

25

26

27

28

29

30

31

32

33

0 24

927,965

2.562.432

7,461,656

6,811,914

14,273,570

16,836,002

165,090

408,543

174.311

1.051.613

16,836,002

Page 11

144,178

587,868

204,032

557,100

847,452

3.236.713

7,529,117

5,098,929

12,628,046

15,864,759

Form 990 (2019)

1.040.261

15,864,759

heck if Schedule O contains a response or note to any line in this Part IX .			🗆
	(A) Beginning of year		<b>(B)</b> End of year
ash-non-interest-bearing	2,319,505	1	5,736,5
avings and temporary cash investments	289,998	2	545,25

2	Savings and temporary cash investments	289,998	2	545,252
3	Pledges and grants receivable, net	2,948,354	3	154,257
4	Accounts receivable, net		4	
5	Loans and other 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		5	

Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B). 6 7 Notes and loans receivable, net . . . . Assets 245.650 241.561 Inventories for sale or use . . . . Prepaid expenses and deferred charges . . . 185,399 344,517 10a Land, buildings, and equipment: cost or other 10a 2.001,397 basis. Complete Part VI of Schedule D 10b 958,498 1,430,073 10c 1,042,899 b Less: accumulated depreciation 11 Investments—publicly traded securities . 9,251,933 11 7,655,591 12 Investments—other securities. See Part IV, line 11 . . . 12 13 13 Investments-program-related. See Part IV, line 11 .

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required

audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.

#### **Additional Data**

Software ID:

Software Version:

EIN: 52-0976257

Name: READING IS FUNDAMENTAL INC

Form 990 (2019)

#### Form 990, Part III, Line 4a:

PRINT PROGRAMS: BOOKS FOR OWNERSHIP IS RIF'S FLAGSHIP READING PROGRAM WHERE CHILDREN CHOOSE NEW BOOKS AND PARTICIPATE IN READING ACTIVITIES WITH TEACHERS, PARENTS, VOLUNTEERS AND COMMUNITY MEMBERS AT READING CELEBRATIONS HELD ACROSS THE COUNTRY. THESE EVENTS EDUCATE, BUILD COMMUNITY AND INSPIRE CHILDREN TO MAKE GREATER CHOICES FOR THEMSELVES TO CHOOSE LEARNING, AND TO CHOOSE SUCCESS IN SCHOOL AND IN LIFE. FUNDED BY A VARIETY OF CORPORATE AND FOUNDATION PARTNERS AND WORKING THROUGH LOCAL COMMUNITY PROGRAMS, RIF DISTRIBUTES BOOKS TO CHILDREN THAT ARE FREE TO THE CHILDREN AND THEIR FAMILIES. CHILDREN CHOOSE THEIR OWN BOOKS FROM A WIDE RANGE OF TITLES APPROPRIATE TO THEIR READING

THAT ARE FREE TO THE CHILDREN AND THEIR FAMILIES. CHILDREN CHOOSE THEIR OWN BOOKS FROM A WIDE RANGE OF TITLES APPROPRIATE TO THEIR READING LEVEL. THE DISTRIBUTIONS, WHICH OCCUR THROUGHOUT THE YEAR, ALSO INCLUDE PARENT AND COMMUNITY ENGAGEMENT AND PROVIDE AN OPPORTUNITY FOR THE EMPLOYEES OF CORPORATE FUNDERS TO ACTIVELY PARTICIPATE. FOCUSING ON ACCESS AND CHOICE, STUDENTS IN COMMUNITIES THROUGHOUT THE COUNTRY PARTICIPATE IN A BOOKS FOR OWNERSHIP PROGRAM SELECTING NEW, AGE-APPROPRIATE BOOKS TO TAKE HOME AND OWN. THE PROGRAM'S INTEGRATED APPROACH TO LITERACY PROVIDES SUPPORTING RESOURCES TO TEACHERS AND INSPIRES CHILDREN TO LEARN THROUGH TWO ANNUAL EVENTS FOCUSED ON BOOK DISTRIBUTION AND READING. THESE BOOKS ARE FURTHER SUPPORTED THROUGH DIGITAL RESOURCES ON RIF'S LITERACY CENTRAL.RIF CONTINUES TO OFFER ITS READ FOR SUCCESS

PROGRAM, AN INNOVATIVE READING INTERVENTION ADDRESSING THE LITERACY BACKSLIDE THAT TRADITIONALLY HAPPENS DURING THE SUMMER MONTHS. READ FOR SUCCESS IS CENTERED AROUND MOTIVATING CHILDREN TO READ BY PROVIDING ACCESS TO HIGH-QUALITY CLASSROOM BOOK COLLECTIONS, SUMMER BOOKS FOR STUDENTS TO CHOOSE AND OWN, ENRICHING STEAM-THEMED CLASSROOM ACTIVITIES, PROFESSIONAL DEVELOPMENT FOR TEACHERS, AND PARENT ENGAGEMENT RESOURCES. TESTED OVER TWO YEARS AMONG 33,000 STUDENTS FROM 16 STATES, RIF'S READ FOR SUCCESS PROGRAM HELPED REVERSE THE TREND OF SUMMER LEARNING LOSS FOR MORE THAN HALF THE PARTICIPATING STUDENTS. IN ADDITION, 57% OF THE STUDENTS SAW GAINS IN READING PROFICIENCY WHEN TESTED FROM SPRING TO FALL.

#### Form 990, Part III, Line 4b:

BOOKS CHILDREN LOVE AND TEACHERS TURN TO EVERY DAY. THE PORTAL PROVIDES TOOLS TO EASILY ORGANIZE AND KEEP READING RESOURCES IN ONE PLACE WITH CUSTOMIZABLE BOOK LISTS, PRINTABLE LESSON PLANS, ACTIVITIES, GAMES, READING PASSAGES, CALENDARS AND VIDEOS, LITERACY NETWORK IS RIF'S COMMUNITY PORTAL DESIGNED TO SUPPORT RIF PROGRAMS AND VOLUNTEERS ACROSS THE COUNTRY AND, MOST IMPORTANTLY, REACH MORE CHILDREN WITH LIFE-CHANGING LITERACY SUPPORT, THIS IS THE DESTINATION FOR ALL OF THE RESOURCES AND SUPPORT NEEDED TO BE AN EFFECTIVE LOCAL LITERACY CHAMPION WHETHER AN INDIVIDUAL WHO WANTS TO VOLUNTEER, ONE OF RIF'S COMMUNITY PARTNERS, A SCHOOL THAT WANTS TO IMPLEMENT A RIF PROGRAM, OR ONE OF OUR LOCAL RIF ORGANIZATIONS. THE LITERACY APP IS A FREE RESOURCE THAT ALLOWS USERS TO SCAN AN ISBN BAR CODE OF A SPECIFIC BOOK AND LAUNCH THE LITERACY CENTRAL WEBPAGE DEDICATED TO ACTIVITIES, GAMES, AND HELPFUL TIPS SPECIFIC TO THE BOOK. CHILDREN ARE MOTIVATED TO STAY ENGAGED WITH READING THROUGH

COUNTLESS ADVENTURES THAT START WITH JUST ONE BOOK, PARENTS AND EDUCATORS HAVE AN EASY, TRUSTED TOOL DESIGNED TO CREATE A CULTURE OF LITERACY FOR LASTING IMPACT. SKYBRARY IS A SUBSCRIPTION-BASED INTERACTIVE, DIGITAL LIBRARY OF MORE THAN 900 HIGH-OUALITY EBOOKS AND VIDEO EXPLORATION FIELD TRIPS THAT ENGAGE READERS AND HELP FOSTER A LIFELONG LOVE OF LEARNING. THIS ONLINE RESOURCE ALLOWS CHILDREN TO EXPLORE THEMATIC COLLECTIONS OF BOOKS THAT INCLUDE AUDIO, ALONG WITH ADDITIONAL GAMES, VIDEOS, AND OTHER ACTIVITIES THAT SUPPORT THE BOOK. SKYBRARY SCHOOL FEATURES A CAREFULLY CURATED LIBRARY OF DIGITAL BOOKS ALONG WITH ADDED FEATURES JUST FOR EDUCATORS, TEACHERS CAN ACCESS LESSON PLANS AND

DIGITAL PROGRAMS: RIF'S DIGITAL PORTFOLIO OF PRODUCTS INCLUDES LITERACY CENTRAL, LITERACY NETWORK, THE LITERACY APP, AND SKYBRARY, LITERACY CENTRAL IS AN ONLINE DESTINATION FOR TEACHERS, PARENTS AND LITERACY VOLUNTEERS TO GET THOUSANDS OF FREE DIGITAL RESOURCES TIED DIRECTLY TO THE

TEACHING GUIDES INSPIRED BY THE BOOKS AND VIDEOS IN THE LIBRARY FOR EXTENDED LEARNING AS WELL AS TRACK AND MANAGE STUDENTS' USAGE OF THE BOOKS AND VIDEOS.

COMMUNITY LITERACY AWARENESS AND OTHER PROGRAMS: RIF PROMOTES AWARENESS OF THE CRITICAL IMPACT OF EARLY LITERACY THROUGH A BROAD RANGE OF ACTIVITIES, SHARING RESOURCES THROUGH ITS WEBSITE AND SOCIAL MEDIA PLATFORMS, DISTRIBUTION OF ITS THEMATIC BOOK COLLECTIONS, AND LEVERAGING

MEDIA THROUGH PUBLIC SERVICE ANNOUNCEMENTS. RIF'S LITERACY SERVICES INCLUDE FAMILY AND COMMUNITY ENGAGEMENT AND LITERACY TRAINING FOR EDUCATORS AND COMMUNITY ORGANIZATIONS. FAMILY AND COMMUNITY ENGAGEMENT ACTIVITIES ARE DESIGNED TO HELP PARENTS TAKE A LEADING ROLE IN

HOSTS OTHER LITERACY EVENTS WHICH PROMOTE LITERACY AND INFORM OTHERS ABOUT ITS MISSION RIF ENGAGES WITH INDEPENDENT OUTSIDE EXPERTS TO

EVALUATE RIF'S PROGRAM ACTIVITIES TO IDENTIFY AREAS OF NEED AND ESTABLISH PROCEDURES FOR CONTINUOUS QUALITY IMPROVEMENT.

Form 990, Part III, Line 4c:

ENCOURAGING THEIR CHILDREN'S LITERACY DEVELOPMENT. WITH THE GUIDANCE OF RIF'S VOLUNTEERS, PARENTS PARTICIPATE IN WORKSHOPS, BOOK DISTRIBUTIONS AND READING CELEBRATIONS. RIF CONDUCTS LITERACY TRAINING FOR EARLY CHILDHOOD EDUCATORS. THIS TRAINING IS DESIGNED TO SUPPORT CHILDREN'S EMERGING LANGUAGE AND LITERACY SKILLS WHILE INCLUDING PARENTS AS THEIR CHILDREN'S FIRST TEACHERS. THE TRAINING IS DONE THROUGH A "TRAIN THE TRAINER" MODEL THAT PREPARES PARTICIPANTS TO RETURN TO THEIR COMMUNITIES AND DELIVER THE TRAINING TO THEIR COLLEGED.

efil	e GR/	APHIC pri	nt - DO NOT PROCESS	As Filed Data -			DLN: 9	3493039010561		
SCI	HED	ULE A	- Dublic (	Charity Statu	e and Dul	hlic Sunn	ort	OMB No. 1545-0047		
	m 99		Complete if the o	rganization is a sect 4947(a)(1) nonexe Attach to Form	ion 501(c)(3) e mpt charitable 990 or Form 99	organization or trust. 00-EZ.	· a section	2019		
		the Treasury	► Go to <u>www.irs</u>	<u>agov/Form990</u> for in	nstructions and	I the latest info	ormation.	Open to Public Inspection		
Nam	e of th	nie Service <b>he organiza</b> FUNDAMENTAL					Employer identific	ation number		
KLADI	140 13 1						52-0976257			
	rt I		for Public Charity State				See instructions.			
1 ne c	rganiz		a private foundation because	•	•		(A)(:)			
		•	onvention of churches, or as							
2			scribed in section 170(b)(		,					
3		·	or a cooperative hospital serv	-			-			
4		A medical r name, city,	esearch organization operator and state:	ed in conjunction with	a hospital descri	ibed in <b>section</b> :	170(b)(1)(A)(iii). E	nter the hospital's		
5			ation operated for the benefi (iv). (Complete Part II.)	t of a college or unive	rsity owned or op	perated by a gov	ernmental unit descri	bed in <b>section 170</b>		
6		A federal, s	tate, or local government or	governmental unit de	scribed in <b>sectio</b>	on 170(b)(1)(A	ı)(v).			
7	<b>✓</b>	_	ation that normally receives ( <b>0(b)(1)(A)(vi).</b> (Complete	,	s support from a	governmental u	nit or from the gener	al public described in		
8		A communi	ty trust described in <b>sectior</b>	170(b)(1)(A)(vi).	(Complete Part I	I.)				
9			ural research organization de rant college of agriculture. S					ege or university or a		
10		from activit investment	ation that normally receives: lies related to its exempt fur income and unrelated busin See section 509(a)(2). (Co	ections—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	d exclusively to test fo	r public safety. S	See <b>section 509</b>	(a)(4).			
12		more public	ation organized and operated ly supported organizations of through 12d that describes	described in <b>section 5</b>	<b>09(a)(1)</b> or sec	ction 509(a)(2	). See <b>section 509(</b> a			
a		<b>Type I.</b> A so	supporting organization oper 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	ervised or controlled i ation vested in the sar						
c		Type III f	unctionally integrated. A sorganization(s) (see instruction)	supporting organizatio				ted with, its		
d		Type III n	on-functionally integrate integrated. The organizatio i). You must complete Pai	<b>d.</b> A supporting organi n generally must satis	ization operated fy a distribution	in connection wi requirement and	th its supported orgar			
e		Check this	box if the organization receiver or Type III non-functionally	ved a written determir	nation 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(	r '			(vi) Amount of		
	(i) N	Name of supported of the second of the secon		(ii) EIN (iii) Type of organization (described on lines 1- 10 above (see instructions)) (iv) Is the organization listed in your governing document? (see instructions)						
					Yes	No				
Tota		l. P. '	tion Act Notice, see the I		Cat. No. 11285		Schedule A (Form 9			

	(or fiscal year beginning in) ▶	(u) 2013	(5) 2010	(0) 2017	(d) 2010	(0) 201	<u> </u>	(i) rotai
1	Gifts, grants, contributions, and membership fees received. (Do not	5,374,338	5,493,347	9,988,351	9,843,591	5,04	8,114	35,747,741
	include any "unusual grant.") .						$\longrightarrow$	
2	Tax revenues levied for the							
	organization's benefit and either paid to or expended on its behalf							
3	The value of services or facilities						-	
,	furnished by a governmental unit to							
	the organization without charge							
1	<b>Total.</b> Add lines 1 through 3	5,374,338	5,493,347	9,988,351	9,843,591	5.04	8,114	35,747,741
5	The portion of total contributions by	-,,	-, ,	-,,	-77	-,-	-,	//-
•	each person (other than a							
	governmental unit or publicly							
	supported organization) included on							9,629,134
	line 1 that exceeds 2% of the							
	amount shown on line 11, column (f)							
5	Public support. Subtract line 5							26,118,607
	from line 4.							20,110,007
S	ection B. Total Support				<u> </u>			
	Calendar year	(a) 2015	<b>(b)</b> 2016	(c) 2017	(d) 2018	(e) 201	9	(f) Total
_	(or fiscal year beginning in) ▶	. ,	. ,	` ,	` '			
7	Amounts from line 4	5,374,338	5,493,347	9,988,351	9,843,591	5,04	8,114	35,747,741
8	Gross income from interest,							
	dividends, payments received on	917,705	905,017	102,488	178,084	18	3,611	2,286,905
	securities loans, rents, royalties and	·		·				
9	income from similar sources						-+	
9	activities, whether or not the							
	business is regularly carried on							
0	Other income. Do not include gain						-+	
.0	or loss from the sale of capital	1,000						1,000
	assets (Explain in Part VI.)	_,						-,
L1	<b>Total support.</b> Add lines 7 through							20.025.646
_	10							38,035,646
.2	Gross receipts from related activities,	etc. (see instruction	ons)			12		4,614,724
.3	First five years. If the Form 990 is fo	or the organization	's first, second, th	ird, fourth, or fifth	tax year as a sect	tion 501(c)(	 3) orga	nization,
	check this box and <b>stop here</b>						. ▶ 🗆	<u> </u>
S	ection C. Computation of Public							
L4	Public support percentage for 2019 (lin	ne 6, column (f) di	ivided by line 11, o	column (f))		14		68.670 %
L5	Public support percentage for 2018 Sc	hedule A, Part II,	line 14			15		65.250 %
	<b>33 1/3% support test—2019.</b> If the					more, chec	k this b	
LUa								▶ 🗸
	and <b>stop here.</b> The organization quali							· - —
b	33 1/3% support test—2018. If th	e organization did	not check a box o	n line 13 or 16a, a	and line 15 is $33.1$	/3% or more	, check	_
	box and stop here. The organization							▶ ∐
.7a	10%-facts-and-circumstances test	<b>—2019.</b> If the or	ganization did not	check a box on lin	e 13, 16a, or 16b,	and line 14		
	is 10% or more, and if the organizatio	n meets the "facts	s-and-circumstance	es" test, check this	s box and stop he	re. Explain		
	in Part VI how the organization meets	the "facts-and-cire	cumstances" test.	The organization o	qualifies as a publi	cly supporte	d	
	organization							▶ 🗆

h 10%-facts-and-circumstances test—2018. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly 18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see Schedule A (Form 990 or 990-EZ) 2019

Р	art III Support Schedule for						
	(Complete only if you cl						er Part II. If
S	the organization fails to ection A. Public Support	quality under	the tests listed i	pelow, please co	ompiete Part II.)		
30	Calendar year	( ) 2015	(1) 2016	( ) 2247	(1) 2010		(O.T.)
	(or fiscal year beginning in) ▶	(a) 2015	<b>(b)</b> 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not include any "unusual grants.").						
2	Gross receipts from admissions,						
	merchandise sold or services						
	performed, or facilities furnished in any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that are						
	not an unrelated trade or business						
4	under section 513  Tax revenues levied for the						
•	organization's benefit and either paid						
_	to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and						
<b>L</b>	3 received from disqualified persons Amounts included on lines 2 and 3						
D	received from other than disqualified						
	persons that exceed the greater of						
	\$5,000 or 1% of the amount on line 13 for the year.						
c	Add lines 7a and 7b						
8	Public support. (Subtract line 7c						
	from line 6.)						
Se	ection B. Total Support		1	<del></del>			Г
	Calendar year (or fiscal year beginning in) ▶	(a) 2015	<b>(b)</b> 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
9	Amounts from line 6						
10a	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties and income from similar sources.						
b	Unrelated business taxable income						
	(less section 511 taxes) from						
	businesses acquired after June 30, 1975.						
С	Add lines 10a and 10b.						
11	Net income from unrelated business						
	activities not included in line 10b,						
	whether or not the business is regularly carried on.						
12	Other income. Do not include gain or						
	loss from the sale of capital assets						
12	(Explain in Part VI.) <b>Total support.</b> (Add lines 9, 10c,						
13	11, and 12.).						
14	First five years. If the Form 990 is for	the organization	n's first, second, th	nird, fourth, or fift	h tax year as a sec	tion 501(c)(3) o	ganization <u>,</u>
	check this box and <b>stop here</b>						▶ ⊔
	ection C. Computation of Public S			! (6))		1 1	
15	Public support percentage for 2019 (lin		•			15	
16	Public support percentage from 2018 S	-	<u> </u>			16	
	ection D. Computation of Investr Investment income percentage for 201			line 13 column (f	:))	17	
17 10	Investment income percentage for 201	-		-		17	
18 10-	331/3% support tests—2019. If the		•			18   33 1/3% and lin	e 17 is not
	more than 33 1/3%, check this box and s						
	more than 33 1/3%, check this box and s 33 1/3% support tests—2018. If the						
ט	not more than 33 1/3%, check this box	-			•		_
20	Private foundation. If the organization	-	-				
	Frivate foundation. If the organization	ni ulu not check a	a DOX ON UNE 14, I	.a, or iad, check	, unis pox and see I	HSGRUCHONS	. 📂 📖

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

5c 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

```
Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting
```

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

```
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.
```

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 <b>Part VI</b> .	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 <b>Part VI</b> 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 <b>Part VI</b> how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting	2		
	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 <b>Part VI</b> 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?			
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 <b>Part VI</b> 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 <b>Part VI</b> 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 instruction)	ions):		
	The organization satisfied the Activities Test. Complete line 2 below.			
	b			
•	The organization supported a governmental entity. Describe in <b>Part VI</b> 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 <b>Part VI identify those supported organizations and explain</b> 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>b</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 <b>Part VI.</b> the role played by the organization in this regard.	3h		

3b

Schedule A (Form 990 or 990-EZ) 2019 Page 6 Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations 1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E. (A) Prior Year (B) Current Year Section A - Adjusted Net Income (optional) Net short-term capital gain 1 2 Recoveries of prior-year distributions 3 Other gross income (see instructions) 3 Add lines 1 through 3 4 4 5 Depreciation and depletion 5 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) 7 Other expenses (see instructions) Adjusted Net Income (subtract lines 5, 6 and 7 from line 4) 8 (A) Prior Year (B) Current Year Section B - Minimum Asset Amount (optional) 1 Aggregate fair market value of all non-exempt-use assets (see instructions for short 1 tax year or assets held for part of year): a 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) **1**d e Discount claimed for blockage or other factors (explain in detail in Part VI): Acquisition indebtedness applicable to non-exempt use assets 2 3 Subtract line 2 from line 1d 3 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see 4 instructions). 5 Net value of non-exempt-use assets (subtract line 4 from line 3) Multiply line 5 by .035 6 6 7 Recoveries of prior-year distributions 7 8 Minimum Asset Amount (add line 7 to line 6) 8 Current Year Section C - Distributable Amount Adjusted net income for prior year (from Section A, line 8, Column A) 1 2 2 Enter 85% of line 1 3 Minimum asset amount for prior year (from Section B, line 8, Column A) Enter greater of line 2 or line 3 4 4 5 5 Income tax imposed in prior year 6 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions) 7 Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see

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 <b>Part VI</b> ). See instructions	
7	Total annual distributions. Add lines 1 through 6.	
_		

7 Total annual distributions. Add lines 1 through 6.			
8 Distributions to attentive supported organizations to who details in <b>Part VI</b> ). 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
		110 2013	Allibant for 2013
1 Distributable amount for 2019 from Section C, line 6		110 2015	Allount for 2013

details in <b>Part VI</b> ). 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 <b>Part VI</b> ). See instructions.			
3 Excess distributions carryover, if any, to 2019:			
a From 2014			
<b>b</b> From 2015			
c From 2016			
<b>d</b> From 2017			
e From 2018.			

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

f Total of lines 3a through e

instructions)

See instructions.

a Excess from 2015. . . . . **b** Excess from 2016. . . . . c Excess from 2017. . . . . **d** Excess from 2018. . . . . e Excess from 2019. . . . .

3j and 4c. 8 Breakdown of line 7:

\$

g Applied to underdistributions of prior years h Applied to 2019 distributable amount i Carryover from 2014 not applied (see

j Remainder. Subtract lines 3g, 3h, and 3i from 3f. 4 Distributions for 2019 from Section D, line 7:

a 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.

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

Schedule A (	Page Page Page Page Page Page Page Page					
Part VI	mation. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part I <sup>*</sup> 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 es 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 and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See					
		Facts And Circumstances Test				
000 Schoo	lule A, Supplemen	tal Information				
JO Sched	idie A, Supplemen					
Ret	Return Reference Explanation					
SCHEDULE A, PART II, LINE 10, OTHER - 2015 AMOUNT: \$ 1,000. 2016 AMOUNT: \$ 0. 2017 AMOUNT: \$ 0. 2018 AMOUNT: \$ 0. 2019						

EXPLANATION OF OTHER AMOUNT: \$ 0.

INCOME:

**SCHEDULE D** 

DLN: 93493039010561

OMB No. 1545-0047

## **Supplemental Financial Statements**

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

Schedule D (Form 990) 2019

Cat. No. 52283D

2019

Department of the Treasury

(Form 990)

terr	nal Revenue Service	► Go to <u>www.irs.gov/Forn</u>	<u>1990</u> for instructions and the latest info	rmation.	Ins	spection
	me of the organ			Employer iden	tification	number
REA	ADING IS FUNDAMEN	ITAL INC		52-0976257		
Ρā	art I Organi	zations Maintaining Donor Advi	sed Funds or Other Similar Funds o	1		
		te if the organization answered "Ye	s" on Form 990, Part IV, line 6.			
			(a) Donor advised funds	(b) Funds	and other a	accounts
•	Total number at	end of year				
2	Aggregate value	of contributions to (during year)				
3	Aggregate value	of grants from (during year)				
ŀ	Aggregate value	at end of year				
5			rs in writing that the assets held in donor ad clusive legal control?			Yes 🗌 No
i	charitable purpo	oses and not for the benefit of the donor	onor advisors in writing that grant funds can or donor advisor, or for any other purpose o	be used only for conferring imperm	issible	Yes 🗌 No
Pa	rt III Conser	vation Easements.				
		te if the organization answered "Ye				
-	Purpose(s) of co	onservation easements held by the orga	nization (check all that apply). —			
	☐ Preservation	on of land for public use (e.g., recreation	n or education) $\qed$ Preservation of an	historically impor	tant land a	irea
	☐ Protection	of natural habitat	Preservation of a c	certified historic st	ructure:	
	☐ Preservation	on of open space				
2		2a through 2d if the organization held a e last day of the tax year.	qualified conservation contribution in the for		on the End o	f the Year
а	Total number of	conservation easements		2a		
b	Total acreage re	stricted by conservation easements		2b		
С		ervation easements on a certified histori		2c		
d		ervation easements included in (c) acqu n the National Register	ired after 7/25/06, and not on a historic	2d		
ł	Number of cons tax year ►	ervation easements modified, transferre	ed, released, extinguished, or terminated by	the organization o	luring the	
ı	Number of state	es where property subject to conservation	on easement is located 🟲			
5		zation have a written policy regarding that of the conservation easements it hold:	he periodic monitoring, inspection, handling of section, handling of section section.		☐ Yes	□ No
5	Staff and volunt	eer hours devoted to monitoring, inspec	cting, handling of violations, and enforcing co			g the year
,	Amount of expe	nses incurred in monitoring, inspecting,	handling of violations, and enforcing conser	vation easements	during the	year
3			above satisfy the requirements of section 1		☐ Yes	□ No
)	balance sheet, a	and include, if applicable, the text of the	rervation easements in its revenue and expe footnote to the organization's financial state			
aı	rt IIII Örgani		of Art, Historical Treasures, or Oth	er Similar Ass	ets.	
_		te if the organization answered "Ye	es" on Form 990, Part IV, line 8.  6 (ASC 958), not to report in its revenue sta	tement and halar	oce sheet "	orks of
.a	art, historical tr	easures, or other similar assets held for	public exhibition, education, or research in facial statements that describes these items.			
b	historical treasu		.6 (ASC 958), to report in its revenue statem lic exhibition, education, or research in furth			
(	(i) Revenue includ	led on Form 990, Part VIII, line 1		<b>&gt;</b> \$_		
2	If the organizati		cal treasures, or other similar assets for fina		the	
а	Revenue include	ed on Form 990, Part VIII, line 1		▶\$		
b						

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

**d** Equipment .

Sch	edule D (Form 990) 2019							Page 2
Pai	rt IIII Organizations Main	ntaining Collections of A	rt, Histori	cal Treas	sures, or Other	Similar Assets	(continued)	
3	Using the organization's acquisi items (check all that apply):	ition, accession, and other rec	cords, check	any of the	following that are a	significant use of	its collection	
а	Public exhibition		d	☐ Loa	in or exchange prog	grams		
b	Scholarly research		е	☐ Oth	er			
С	Preservation for future ge	enerations						
4	Provide a description of the org Part XIII.	anization's collections and ex	plain how the	ey further t	he organization's e	xempt purpose in		
5	During the year, did the organizes assets to be sold to raise funds					_	Yes 🗆 No	1
Pa	Complete if the organ X, line 21.	lial Arrangements. nization answered "Yes" or	n Form 990	, Part IV,	line 9, or reporte	ed an amount or	n Form 990, P	art
<b>1</b> a	Is the organization an agent, tr included on Form 990, Part X?					_	Yes 🗌 No	•
b	If "Yes," explain the arrangeme	ent in Part XIII and complete t	the following	table:		Amour	nt	
c	, ,	· ·	-		1c	Amoun		•
d					· <del>   </del>			•
e	rtaansono aarmig ono your							•
f	Ending balance				· · · <del>    </del>			
<b>2</b> a	Did the organization include an	amount on Form 990, Part X,	, line 21, for	escrow or	custodial account li	ability? 🔲	Yes 🗌 No	)
b	If "Yes," explain the arrangeme	ent in Part XIII. Check here if	the explanati	on has bee	en provided in Part	XIII □		
Pa	art V Endowment Funds.							
	Complete if the organ	nization answered "Yes" or				len =	.1	
4_	Danissis of year balance	(a) Current ye		rior year 739,400	(c) Two years back 740,327	(d) Three years bac 711,18		3 back 31,490
	Beginning of year balance	0,470	7,170			/11,16	00	31,490
	Contributions	474	1,546	5,726,977 80,775		65,39	12	59,607
	Net investment earnings, gains,	and 1033e3	1,340	00,773	33,007	05,55		
	Grants or scholarships	•						
	Other expenditures for facilities and programs		3,146	76,976	36,734	36,24	.5 2	29,917
f	Administrative expenses							
g	End of year balance	6,571	.,576	6,470,176	739,400	740,32	71	11,180
2 a	Provide the estimated percenta Board designated or quasi-endo	owment ► 53.330 %	lance (line 1	g, column (	(a)) held as:			
b	Permanent endowment > 4	46.670 %						
c	Temporarily restricted endown	ent ▶						
·	The percentages on lines 2a, 2b	***************************************						
3a				are held a	and administered fo	r the	Yes	No
	(i) unrelated organizations .					Γ	3a(i)	No
	(ii) related organizations .					Ī	3a(ii)	No
b	If "Yes" on 3a(ii), are the relate	ed organizations listed as requ	iired on Sche	dule R? .		[	3b	
4	Describe in Part XIII the intend	ed uses of the organization's	endowment f	unds.		_		
Pa	rt VI Land, Buildings, an							
		nization answered "Yes" or						
	Description of property	(a) Cost or other basis (investment)	) Cost or other	uasis (otner	(c) Accumulated	uepreciation	(d) Book value	
		l				l		
1a	Land							
	Land							

128,260

1,286,423

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

56,213

562,967

72,047

723,456

Part VII	Investments—Other Securities. Complete if the organization answered "Yes" on Form 990,	Part IV III	111	See Form 000	Part X line 12
	(a) Description of security or category (including name of security)	(b) Book	16 TT	(c) Meth	od of valuation:
		value		COSt or end-(	of-year market value
	ll derivatives				
(A)					
(B)					
(C)					
(D)					
(E)					
(F)					
(G)					
(H)					
Total. (Colum Part VIII	n (b) must equal Form 990, Part X, col. (B) line 12.)  Investments—Program Related.	<b>•</b>			
rait VIII	Complete if the organization answered 'Yes' on Form 990,	Part IV, li	ne 110		_
	(a) Description of investment			(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)					Value
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
Total. (Colum	n (b) must equal Form 990, Part X, col.(B) line 13.)		•		
Part IX	<b>Other Assets.</b> Complete if the organization answered 'Yes' on Form 990,	Part IV, lin	e 11d	. See Form 990, P	art X, line 15.
(1)	(a) Description				(b) Book value
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
	mn (b) must equal Form 990, Part X, col.(B) line 15.)				. •
Part X	Other Liabilities.				'
1.	Complete if the organization answered 'Yes' on Form 990,  (a) Description of liability	Part IV, lin	<u>e 11e</u>	or 11f.See Forn	(b) Book value
(1) Federal (3)	income taxes				
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
	n (b) must equal Form 990, Part X, col.(B) line 25.)				047 453
2. Liability fo	or uncertain tax positions. In Part XIII, provide the text of the footno		_		_
organization	's liability for uncertain tax positions under FIN 48 (ASC 740). Check	here if the	text of	the footnote has	peen provided in Part XIII 🗹

Schedule D (Form 990) 2019

Part XI

2

b

d

3

1

2

C

4

5

b

Part XIII

See Additional Data Table

Return Reference

Part XII

Page 4

3,979,878

6,623,383

39,476 6,662,859

12,248,785

3,605,702

8,643,083

39,476

8.682.559

4	Amounts included on Form 990, Part VIII, line 12, but not on line 1.					
а	Investment expenses not included on Form 990, Part VIII, line 7b .	4a		39,476		
b	Other (Describe in Part XIII.)	4b				
c	Add lines <b>4a</b> and <b>4b</b>				4c	
5	Total revenue. Add lines <b>3</b> and <b>4c.</b> (This must equal Form 990, Part I, line 12.)				5	

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

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

XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part

Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

2a

2b

2c

2d

2a

2b

4a

4b

Explanation

Schedule D (Form 990) 2019

Amounts included on Form 990, Part IX, line 25, but not on line 1:

Investment expenses not included on Form 990, Part VIII, line 7b . . .

Add lines **4a** and **4b** . . . . . . . . . . . . .

Supplemental Information

Amounts included on line 1 but not on Form 990, Part IX, line 25:

Donated services and use of facilities . . . . .

Total expenses and losses per audited financial statements . . . . . .

Amounts included on line 1 but not on Form 990, Part VIII, line 12: Net unrealized gains (losses) on investments . . . .

Donated services and use of facilities . . . . . .

Other (Describe in Part XIII.)

2e

4c

5

1

374.176

2e

3

3.605.702

3,605,702

39.476

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

Schedule D (Form 990) 2019

#### **Additional Data**

Software ID: Software Version:

**EIN:** 52-0976257

Name: READING IS FUNDAMENTAL INC

Explanation

**Supplemental Information** 

Return Reference

PART V, LINE 4:	EARNINGS FROM THE ENDOWMENT FUNDS ARE RECORDED AND MADE AVAILABLE FOR OPERATION: THROUGH A
	N ANNUAL ALLOCATION OF UP TO 5% OF THE FUND. THE ALLOCATION IS BASED ON A THREE-YEAR
	NG AVERAGE OF THE INVESTMENT'S MARKET VALUE, DETERMINED AS OF MARCH 31 OF THE YEAR $\mathfrak l$

NS R ROLLI PRIOR T O THE BUDGET YEAR, EACH YEAR, AS PART OF RIF'S BUDGETING PROCESS, RIF REVIEWS THE APPROPRI ATE LEVEL OF PAYOUT FOR THE FOLLOWING FISCAL YEAR. FUND DISBURSEMENTS ARE PAID AT THE END OF EACH QUARTER IN THE FISCAL YEAR. EACH FUND'S OPERATING INCOME IS UTILIZED AS SET FORTH IN THE SPECIFIC APPLICABLE ENDOWMENT AGREEMENT. THE GENERAL ENDOWMENT FUND'S INCOME IS UTI LIZED FOR GENERAL OPERATIONS.

Supplemental Information	
Return Reference	Explanation
PART X, LINE 2:	RIF EVALUATED ITS UNCERTAINTY IN INCOME TAXES FOR THE YEARS ENDED SEPTEMBER 30, 2020 AND 2 019, AND DETERMINED THAT THERE WERE NO MATTERS THAT WOULD REQUIRE RECOGNITION IN THE FINAN CIAL STATEMENTS OR THAT MAY HAVE ANY EFFECT ON ITS TAX-EXEMPT STATUS.

\_ \_ \_

Department of the Treasury

DLN: 93493039010561

OMB No. 1545-0047

2019

#### 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.

Attach to Form 990 or Form 990-EZ. Go to www.irs.gov/Form990 for instructions and the latest information. Open to Public

**Inspection** Internal Revenue Service Name of the organization **Employer identification number** READING IS FUNDAMENTAL INC 52-0976257 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 ✓ 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 (vi) Amount paid to (v) Amount paid to fundraiser have or entity (fundraiser) from activity (or retained by) (or retained by) custody or fundraiser listed in organization control of col. (i) contributions? Yes No DIRECT MAIL LAUTMAN MASKA NEIL & CO 1730 RHODE ISLAND AVENUE 979,905 102,000 877,705 No WASHINGTON, DC 20036 **FUNDRAISING HUDSON FERRIS** CONSULTING **INCORPORATED** 170 EAST 61ST STREET 4TH 0 52.500 -52,500 No **FLOOR** NEW YORK, NY 10065 FUNDRAISING FOR MOMENTUM LLC CONSULTING 816 INDEPENDENCE SQ SUITE 0 107,500 -107,500 ATLANTA, GA 30338 979,905 262,000 717,705

AK, AL, AR, AZ, CA, CO, CT, DC, DE, FL, GA, HI, IA, ID, IL, IN, KS, KY, LA, MA, MD, ME, MI, MN, MO, MS, MT, NC, ND, NE, NH, NJ, NM, NV, NY, OH, OK, OR, PA, RI, SC, SD, TN, TX, UT, VA, VT, WA, WI, WV, WY 

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

licensina.

	rt II Fundraising Events. Compl				
	than \$15,000 of fundraising of		d gross income on Form	990-EZ, lines 1 and	5b. List events with
	gross receipts greater than \$	(a)Event #1	<b>(b)</b> Event #2	(c)Other events	(d) Total events (add col. (a) through
		(event type)	(event type)	(total number)	col. <b>(c)</b> )
Keverkie					
2 4					
Y					
	1 Gross receipts				
	2 Less: Contributions				
	3 Gross income (line 1 minus line 2)				
	4 Cash prizes				
ņ	5 Noncash prizes				
CADE ISES	6 Rent/facility costs				
Š	7 Food and beverages				
<u> </u>	8 Entertainment				
5	9 Other direct expenses				
	10 Direct expense summary. Add lines 4	-			
)ai	<b>11</b> Net income summary. Subtract line 10 <b>till Gaming.</b> Complete if the org			V line 19 or reported	   more than \$15,000
	on Form 990-EZ, line 6a.	I	1		T
E E		(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col.(a) through col.(c))
Keverkie					
_	1 Gross revenue				
^					
000	2 Cash prizes				
Sperioes	2 Cash prizes				
sec Expenses					
CHACL EXPENSES	3 Noncash prizes				
	3 Noncash prizes		☐ Yes %	☐ Yes %.	
	3 Noncash prizes	☐ Yes <u>%</u> ☐ No	☐ Yes % ☐ No	☐ Yes % ☐ No	
	3 Noncash prizes	□ No	1_		
Section Tobile	3 Noncash prizes	No	□ No	□ No ►	
	3 Noncash prizes	No through 5 in column (d)	No	No	
)	3 Noncash prizes	No through 5 in column (d) thine 7 from line 1, column	No	<ul><li>No</li><li> ▶</li><li> ▶</li></ul>	Vec No
	3 Noncash prizes	through 5 in column (d)  It line 7 from line 1, columnion conducts gaming action	No  nn (d)	<ul><li>No</li><li> ▶</li><li> ▶</li></ul>	☐ Yes ☐ No
) a	3 Noncash prizes	through 5 in column (d)  thine 7 from line 1, columnion conducts gaming activities in each columning activities act	No  mn (d)	No	
	3 Noncash prizes	through 5 in column (d)  thine 7 from line 1, columnion conducts gaming activities in each columning activities in each column (d)	No  mn (d)	No	
a b	3 Noncash prizes	through 5 in column (d)  thine 7 from line 1, columnion conducts gaming activities in each columning activities in each column (d)	No  mn (d)	No	

Sche	dule G (Form 990 or 990-EZ) 20	19				F	age <b>3</b>
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	the person who prepares the organ	nization'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 addre	ss of the third party:					
	Name •						
	Address •						
16	Gaming manager information:						
	Name 🟲						
	Gaming manager compensation	1 ▶ \$	<del></del>				
	Description of services provided	<b>d</b> ▶					
	☐ 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

## 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.

OMB No. 1545-0047

DLN: 93493039010561

Open to Public Inspection

reasury nternal Revenue Service	► Go to <u>www.irs.gov/Form990</u> for the latest information.						Inspection
lame of the organization						Employer ident	tification number
READING IS FUNDAMENTAL INC						52-0976257	
Part I General Inform	nation on Grants	and Assistance					
Does the organization main the selection criteria used					for the grants or assistance	ce, and	☑ Yes 🗆 N
2 Describe in Part IV the org	•	-	=				
Part II Grants and Other that received more			and Domestic Governme ditional space is needed.	ents. Complete if the o	rganization answered "Yes'	on Form 990, Part IV,	line 21, for any recipient
(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]							
<ul><li>Enter total number of sect</li><li>Enter total number of other</li></ul>							71 C

(Form 990)

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

THERE IS NO NEED TO MONITOR THE USE OF FUNDS AS ALL FUNDS ARE IN RIF'S CONTROL AND CAN ONLY BE USED TO PURCHASE APPROVED TITLES MADE

AVAILABLE TO PROGRAMS THROUGH A WEB-BASED PORTAL. BOOKS AVAILABLE FOR PURCHASE ARE LIMITED TO A LIST OF TITLES SCREENED AND APPROVED BY AN

Page **2** 

Schedule I (Form 990) 2019

# (2)

ACADEMIC ADVISORY PANEL WITH EXPERTISE IN LITERACY EDUCATION.

Schedule I (Form 990) 2019

(4)

(5)

(6)

(7)

Part IV

PART I, LINE 2:

Return Reference

Explanation

### **Additional Data**

MUSKINGUM IRA

205 N 7TH STREET ZANESVILLE, OH 43701 BESSEMER CITY SCHOOLS

1621 5TH AVENUE NORTH BESSEMER, AL 35020

Software ID: **Software Version:** 

31-1525731

26-3323883

**EIN:** 52-0976257

Name: READING IS FUNDAMENTAL INC

Form 990,Schedul	le I, Part	II, Grants and	Other Assistance to	Domestic Organiza	tions and Domesti	ic Governments.	

(a) Name and address of	(D) FIN	(c) IRC section	(d) Amount of cash	(e) Amount of non-	<b>(T)</b> Method of Valuation	
organization		if applicable	grant	cash	(book, FMV, appraisal,	
or government				assistance	other)	

# 7 N. N.

N/A

N/A

(h) Purpose of grant

(g) Description of

воокѕ

BOOKS

or assistance

non-cash assistance

71,784 FMV

41,265 FMV

TO FOSTER LITERACY

TO FOSTER LITERACY

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization if applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance assistance other) or government 23-1726414 N/A 36,444 FMV BOOKS LANCASTER SCHOOL DISTRICT TO FOSTER LITERACY 1075 GROFFTOWN ROAD

LANCASTER, PA 17603 EXCEL AFTERSCHOOL N/A 28,800 FMV BOOKS TO FOSTER LITERACY

PROGRAM 20 COOK STREET

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

SAN FRANCISCO, CA 94118

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government N/A 21.444 FMV BOOKS CANDLEWOOD ELEMENTARY TO FOSTER LITERACY 3635 CANDLEGLENN

19,500 FMV

BOOKS

TO FOSTER LITERACY

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

501(C)(3)

SAN ANTONIO, TX 78244

PWC CHARITABLE
FOUNDATION INC

4040 W BOYSCOUT BLVD TAMPA, FL 33607

13-6116238

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization if applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance assistance other) or government BOYS & GIRLS CLUBS OF SAN 94-1156608 501(C)(3) 19,200 FMV BOOKS TO FOSTER LITERACY

380 FULTON STREET SAN FRANCISCO, CA 94102				

LEBANON, PA 17042

N/A 19.188 FMV BOOKS LEBANON SCHOOL DISTRICT TO FOSTER LITERACY 499 E PERSHING AVENUE

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government assistance other) ESCAMBIA COUNTY SCHOOL 59-6000597 N/A 19.023 FMV BOOKS TO FOSTER LITERACY DISTRICT

404 JEFFERSON STREET INDIANOLA, MS 38751

75 NORTH PACE BOULEVARD PENSACOLA, FL 32505						
SUNFLOWER COUNTY CONSOLIDATED SCHOOL DISTRICT	46-4432711	N/A	18,651	FMV	BOOKS	TO FOSTER LITERACY

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government 62-1772026 N/A 17.367 FMV BOOKS JACK ANDERSON ELEMENTARY TO FOSTER LITERACY

250 SHUTE LANE HENDERSONVILLE, TN 37075 COLLEGE HEIGHTS 95-6000671 N/A 17,049 FMV BOOKS

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

BAKERSFIELD, CA 93305

TO FOSTER LITERACY FI FMFNTARY 2551 SUNNY LANE

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) JOHN C FREMONT MAGNET 47-2747735 N/A 17,008 FMV BOOKS TO FOSTER LITERACY

MUSIC CITY FOUNDATION

7020 STONE RUN DRIVE NASHVILLE, TN 37211

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government DOOK CDD INC 74 2542664 E01/01/21 1E OCOLEMY BOOKS TO EOSTED LITERACY

2006 GREENBROOK PARKWAY AUSTIN, TX 78723	74-2542664	501(C)(3)	15,963	FIMV	BOURS	TO FUSTER L
PAGE AHEAD CHILDREN'S	91-1600084	501(C)(3)	15,000	FMV	BOOKS	TO FOSTER L

SEATTLE, WA 98117

LITERACY LITERACY PROGRAM 1130 NW 85TH STREET

(f) Method of valuation (a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(g) Description of (h) Purpose of grant organization if applicable (book, FMV, appraisal, non-cash assistance or assistance grant cash or government assistance other) SMART (START MAKING A 93-1051724 N/A 15 000 FMV BOOKS TO FOSTER LITERACY

READER TODAY) 101 SW MARKET STREET PORTLAND, OR 97201		,,,,	25,555			
CHILDRENS MIRACLE	87-0387205	501(C)(3)	14,913	FMV	BOOKS	TO FOSTER LITERACY

NETWORK 205 W 700 SOUTH SALT LAKE CITY, UT 84101

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, non-cash assistance organization if applicable grant cash or assistance or government assistance other) HANOVER AREA SCHOOL 23-1738341 N/A 14,817 FMV BOOKS TO FOSTER LITERACY DICTRICT

READING SCHOOL DISTRICT	23-6004134	501(C)(3)	14,217	FMV	BOOKS	TO FOSTER LITERACY
1600 SANS SOUCI PARKWAY HANOVER TOWNSHIP, PA 18706						

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

800 WASHINGTON STREET READING, PA 19601

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government 20-2493341 N/A 14.130 FMV BOOKS TO FOSTER LITERACY

MADISON CREEK ELEMENTARY 1040 MADISON CREEK ROAD GOODLETTSVILLE, TN 37072

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

HENDERSONVILLE, TN 37075

BEECH ELEMENTARY 20-3522136 N/A 12,326 FMV BOOKS TO FOSTER LITERACY 3120 LONG HOLLOW PIKE

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

12 000 FMV

IBOOKS

TO FOSTER LITERACY

NORTH / JEW/WECT / JEW/	35 6003530	N/A	11 204	EM)/	BOOKS	TO FOSTER LITERACY
PITTSBURGH 10 CHILDRENS WAY SUITE 300 PITTSBURGH, PA 15212						
KEADING 13 I ONDARIENTAL	25-1550550	301(0)(3)[	12,000	1 1'1 V	DOUNG	I TO LOSTEN ETTENACT

PITTSBURGH, PA 15212

NORTHVIEWWESTVIEW 35-6002529 N/A 11,394 FMV BOOKS TO FOSTER LITERACY FLEMENTARY 725 E NORTH H STREET

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

501(0)(3)

READING IS FUNDAMENTAL

GAS CITY, IN 46933

25-1558336

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization if applicable (book, FMV, appraisal, non-cash assistance or assistance grant cash or government assistance other) OAK GROVE ELEMENTARY 63-6000945 N/A 11,079 FMV BOOKS TO FOSTER LITERACY CCLIOOL

9000 TIGER CUB TRIAL BESSEMER, AL 35023						
ALLEN COUNTY PRIMARY CENTER	61-6001355	N/A	10,890	FMV	BOOKS	TO FOSTER LITERACY

721 NEW GALLATIN ROAD SCOTTSVILLE, KY 42164

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) N/A 10.485 FMV BOOKS TO FOSTER LITERACY FOSTER PARK ELEMENTARY SCHOOL 901 ARTHUR BOULEVARD

UNION.SC 29379 MCADORY ELEMENTARY 63-6000945 N/A 10.464 FMV BOOKS TO FOSTER LITERACY

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

SCHOOL 6251 EASTERN VALLEY ROAD

MC CALLA, AL 35111

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) 51-0268095 N/A 9.864 FMV BOOKS TO FOSTER LITERACY CARRIE DOWNIE ELEMENTARY SCHOOL 1201 DELAWARE STREET NEW CASTLE, DE 19720 NORTH PENN SCHOOL 23-1670665 N/A 9.840 FMV BOOKS TO FOSTER LITERACY

DISTRICT

401 E HANCOCK STREET LANSDALE, PA 19446

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) 59-6000500 N/A 9.624 FMV BOOKS TO FOSTER LITERACY HIGH SPRINGS COMMUNITY SCHOOL 19559 MAIN STREET HIGH SPRINGS, FL 32643

9.368 FMV

BOOKS

TO FOSTER LITERACY

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

N/A

ARTHUR EDWARDS

ELEMENTARY 200 EDUCATION LANE HAVELOCK, NC 28532 56-1286861

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization if applicable (book, FMV, appraisal, non-cash assistance or assistance grant cash or government assistance other) BETHLEHEM AREA COHOOL 24-0962502 NI/A 0 366 EMV BOOKS TO EOSTED LITERACY

DISTRICT 1516 SYCAMORE STREET BETHLEHEM, PA 18017	24-0002592	N/A	9,300	FINV	BOOKS	TO FOSTER LITERACT
AAP-CA3	33-0782521	N/A	9,000	FMV	BOOKS	TO FOSTER LITERACY

3160 CAMINO DEL RIO S

SAN DIEGO, CA 92108

SUITE 101

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government BOOK'FM 58-2000621 501(0)(3) 9 OOO FMV BOOKS TO FOSTER LITERACY

161 RAINS AVENUE NASHVILLE, TN 37203	30 2000021	301(0)(3)	3,000			TO TOSTER EFFERNCE
CLEVELAND KIDS' BOOK BANK 3635 PERKINS AVENUE SUITE	47-5553602	501(C)(3)	9,000	FMV	BOOKS	TO FOSTER LITERACY

CLEVELAND, OH 44114

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization if applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance assistance other) or government READING IS FUNDAMENTAL OF 43-1370828 501(C)(3) 9.000 FMV BOOKS TO FOSTER LITERACY

9.000 FMV

BOOKS

TO FOSTER LITERACY

SPRINGFIELD MO INC 309 E WATER STREET SPRINGFIELD, MO 65806				

HEALTHPARTNERS INC.

8170 33RD AVENUE SOUTH MINNEAPOLIS, MN 55440

41-1693838

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

501(C)(3)

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government B1 / A 0.000 | 500 Inaaka

8.910 FMV

BOOKS

TO FOSTER LITERACY

BUSHWICK COMMUNITY HIGH	N/A	9,000	FMV	BOOKS	ITO FOSTER LITERACY
SCHOOL					
231 PALMETTO STREET					
BROOKLYN, NY 11221					

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

501(C)(3)

BOOK DRIVE FOR KIDS 75-2822224

1301 WATERS RIDGE LEWISVILLE, TX 75057

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) N/A 8.862 FMV BOOKS TO FOSTER LITERACY EASTBROOK SOUTH ELEMENTARY 694 S SECOND STREET

8.594 FMV

BOOKS

TO FOSTER LITERACY

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

N/A

UPLAND, IN 46989 KENDALL ELEMENTARY

2009 W KEM ROAD MARION, IN 46952

SCHOOL

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government assistance other) PLAINVIEW 73-1054849 N/A 8.367 FMV BOOKS TO FOSTER LITERACY

PRIMARYINTERMEDIATE ELEMENTARY 1140 S PLAINVIEW ROAD ARDMORE, OK 73401	, 5 255 15 15	.,,,	0,507			10,100,100
HAZLETON AREA SCHOOL	23-1667968	N/A	7,971	FMV	BOOKS	TO FOSTER LITERACY

HAZLETON AREA SCHOOL 23-1667968 DISTRICT

275 MILL STREET HAZLETON, PA 18201

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government 74-1556846 N/A 7.941 FMV BOOKS JAMES L MASTERS TO FOSTER LITERACY ELEMENTARY

2650 WOODLAKE PARKWAY CONVERSE, TX 78109

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

BUSH FLEMENTARY SCHOOL N/A 7.821 FMV BOOKS TO FOSTER LITERACY

908 WOOD STREET

FULTON, MO 65251

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization if applicable (book, FMV, appraisal, non-cash assistance or assistance grant cash or government assistance other) JOSEPH HOPKINS 74-1556846 N/A 7.524 FMV BOOKS TO FOSTER LITERACY ELEMENTARY SCHOOL

GOODLETTSVILLE	N/A	7,506	FMV	BOOKS	TO FOSTER LITERACY
2440 ACKERMAN ROAD SAN ANTONIO, TX 78219					

ELEMENTARY 514 DONALD STREET

GOODLETTSVILLE, TN 37072

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, non-cash assistance organization if applicable grant cash or assistance or government assistance other) **BOYS & GIRLS CLUB OF WEST** 95-2782501 501(C)(3) 7.200 FMV BOOKS TO FOSTER LITERACY

SAN GABRIEL VALLEY 328 S RAMONA AVENUE MONTEREY PARK, CA 91754

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

SARASOTA, FL 34237

**BOYS & GIRLS CLUBS OF** 59-6211876 501(C)(3) 7.200 FMV BOOKS TO FOSTER LITERACY SARASOTA COUNTY

3100 FRUITVILLE ROAD

(f) Method of valuation (a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(g) Description of (h) Purpose of grant organization if applicable (book, FMV, appraisal, non-cash assistance or assistance grant cash or government assistance other) DOGWOOD FLEMENTARY 54-1679024 501(C)(3) 7 179 FMV BOOKS TO FOSTER LITERACY

SCHOOL LIBRARY 12300 GALDE DRIVE RESTON, VA 20191	31 10/3021	301(0)(3)	,,1,5			TO TOSTEN EITERNET
ALLEN COUNTY INTERMEDIATE	61-6001355	N/A	6,999	FMV	BOOKS	TO FOSTER LITERACY

CENTER 720 OLIVER STREET

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

SCOTTSVILLE, KY 42164

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) GOVERNOR MIFFLIN SCHOOL 23-1671237 N/A 6.798 FMV BOOKS TO FOSTER LITERACY

DISTRICT 10 S WAVERLY STREET SHILLINGTON, PA 19607		·	·			
SOUTH BOSTON ELEMENTARY	54-6001335	N/A	6,684	FMV	BOOKS	TO FOSTER LITERACY

SCHOOL

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

2320 PARKER AVENUE SOUTH BOSTON, VA 24592

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) N/A 6.557 FMV BOOKS TO FOSTER LITERACY BERWICK AREA SCHOOL

DISTRICT 1401 N MARKET STREET BERWICK, PA 18603 JEFFERSON ELEMENTARY N/A 6.387 FMV BOOKS TO FOSTER LITERACY

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

SCHOOL

1831 MT ZION AVENUE JANESVILLE, WI 53545

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government 23-1726731 N/A 6.375 FMV BOOKS EASTON AREA SCHOOL TO FOSTER LITERACY DISTRICT RIF

1801 BUSHKILL DRIVE EASTON, PA 18040

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

209 STARK ROAD JACKSON, GA 30233

STARK FLEMENTARY SCHOOL N/A 6.327 FMV BOOKS TO FOSTER LITERACY

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) 83-1477982 N/A 6.216 FMV BOOKS TO FOSTER LITERACY HARRISON ELEMENTARY SCHOOL 760 PRINCETON ROAD

JANESVILLE, WI 53546 WILKES BARRE AREA SCHOOL 23-1744259 N/A 6.039 FMV BOOKS

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

WILKES BARRE, PA 18702

TO FOSTER LITERACY DISTRICT 730 S MAIN STREET

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government N/A 5.991 FMV BOOKS ADAMS ELEMENTARY SCHOOL TO FOSTER LITERACY

1138 EAST MEMORIAL JANESVILLE, WI 53545 CLUSTER SPRINGS PTO 51-0155758 501(C)(3) 5,742 FMV BOOKS

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

TO FOSTER LITERACY 7091 HUELL MATTHEWS HIGHWAY ALTON, VA 24520

(b) EIN (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government assistance other) LINCOLN ELEMENTARY N/A 5,574 FMV BOOKS TO FOSTER LITERACY

(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

SCHOOL DISTRICT) 1105 BROWNLEE ROAD JACKSON, GA 30233

SCHOOL 1821 CONDE STREET JANESVILLE, WI 53546					
JACKSON ELEMENTARY SCHOOL (BUTTS COUNTY	N/A	5,367	FMV	BOOKS	TO FOSTER LITERACY

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) N/A 5.238 FMV BOOKS TO FOSTER LITERACY HAMPTON L DAUGHTRY ELEMENTARY 150 SHILOH ROAD

150 SHILOH ROAD
JACKSON, GA 30233

JEFFERSON ELEMENTARY
SCHOOL

BOOKS
TO FOSTER LITERACY
SCHOOL

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

PO BOX 1709 ARDMORE, OK 73402

(f) Method of valuation (a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government assistance other) CAPITAL AREA COMMUNITY 38-1791181 501(C)(3) 5.001 FMV BOOKS TO FOSTER LITERACY

SERVICES 101 E WILLOW STREET LANSING, MI 48906		(-)(-)				
PASADENA AREA READING IS	51-0181437	501(C)(3)	5,001	FMV	BOOKS	TO FOSTER LITERACY

PASADENA AREA READ FUN-DAMENTAL CORPORATION PO BOX 5837 PASADENA, CA 91107

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) READING IS FUNDAMENTAL OF 51-0155758 501(C)(3) 5.001 FMV BOOKS TO FOSTER LITERACY NORTHERN VIRGINIA 1834 SATINWOOD COURT

5.001 FMV

BOOKS

TO FOSTER LITERACY

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

501(C)(3)

1834 SATINWOOD COUR VIENNA, VA 22182 TOMPKINS COMMUNITY ACTION

701 SPENCER ROAD ITHACA, NY 14850

16-0910547

efil	e GRAPHIC pr	rint - DO NOT PROCESS	As Filed Data	a -	DLN: 9349	3039	010	561
Sch	nedule J	C	ompensati	ion Information	ОМВ	No. 15	545-0	047
(Fori	m 990)	For certain Office ▶ Complete if the ore	23.	2019				
-	tment of the Treasury al Revenue Service	► Go to <u>www.irs.go</u>	ov/Form990 for	instructions and the latest information		en to Inspe		
Nar	ne of the organiza			Emp	loyer identification			
REA	DING IS FUNDAMEN	ITAL INC		52-0	976257			
Pa	rt I Questi	ons Regarding Compensa	ntion					
	<del></del>					,	Yes	No
1a				the following to or for a person listed on y relevant information regarding these ite				
	First-class	s or charter travel		Housing allowance or residence for person	nal use			
	_	· companions	님	Payments for business use of personal re				
		nification and gross-up paymen	_	Health or social club dues or initiation fee				
	☐ Discretion	nary spending account		Personal services (e.g., maid, chauffeur,	chef)			
b				follow a written policy regarding payment ve? If "No," complete Part III to explain	or	1b		
2				or allowing expenses incurred by all		2		
	directors, truste	ees, officers, including the CEO/	executive Director	r, regarding the items checked on Line 1a	· ·			
3				d to establish the compensation of the				
				not check any boxes for methods CEO/Executive Director, but explain in Par	t III.			
	, 	-		,				
		ation committee ent compensation consultant	✓	Written employment contract Compensation survey or study				
		of other organizations	₹	Approval by the board or compensation	rommittee			
		or other organizations	<u></u>	Approvar by the board or compensation of	.ommicee			
4	During the year related organiza		990, Part VII, Se	ction A, line 1a, with respect to the filing o	organization or a			
а	Receive a sever	ance payment or change-of-cor	ntrol payment? .			4a		No
b	Participate in, o	r receive payment from, a supp	lemental nonqual	ified retirement plan?		4b		No
С			,	nsation arrangement?		4c		No_
	If "Yes" to any o	of lines 4a-c, list the persons an	d provide the app	olicable amounts for each item in Part III.				
	Only 501(c)(3	), 501(c)(4), and 501(c)(29	) organizations	must complete lines 5-9.				
5	For persons liste	ed on Form 990, Part VII, Section	on A, line 1a, did	the organization pay or accrue any				
	compensation c	ontingent on the revenues of:						
а	The organization	n?				5a		No
b						5b		No
	,	5a or 5b, describe in Part III.						
6		ed on Form 990, Part VII, Section ontingent on the net earnings o		the organization pay or accrue any				
а	-	n?				6a		No
b						6b		No_
_	•	6a or 6b, describe in Part III.	A 11 - 2 - 21 - 12					
7	payments not d	escribed in lines 5 and 6? If "Ye	s," describe in Pa	the organization provide any nonfixed rt III		7		No
8	subject to the in	nitial contract exception describe	ed in Regulations	red pursuant to a contract that was section 53.4958-4(a)(3)? If "Yes," describ		8		No
9				presumption procedure described in Regu		9		
For F	Panerwork Redu	uction Act Notice, see the Ins	structions for Fo	orm 990. Cat. No. 50053	T Schedule J (		9901	2019

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed. For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that are not listed on Form 990, Part VII. Note. The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual. (B) Breakdown of W-2 and/or 1099-MISC compensation (A) Name and Title (C) Retirement and (D) Nontaxable (E) Total of columns (F) Compensation in other deferred benefits (B)(i)-(D) column (B) reported (ii) Bonus & incentive (i) Base (iii) Other compensation as deferred on prior compensation compensation reportable Form 990 compensation 1 ALICIA LEVI 267,620 (i) 0 13,316 4,365 285,301 0 PRESIDENT AND CEO 0 0 0 0 0 0 0 (ii) 168,413 (i) 0 1,899 0 1,300 8,421 180,033 EDWARD DE LEON CHIEF PROGRAM 0 0 0 0 0 0 0 (ii) & CONTENT OFFICER -UNTIL 02/2020 3 BETH L MEYER FORMER (i) 151,655 0 0 500 7,583 7,401 167,139 KEY EMPLOYEE - UNTIL 09/2019 0 0 0 0 0 0 0 (ii) 136,198 (i) 0 650 6,810 17,899 161,557 0 JODI RUBIN VICE PRESIDENT 0 (ii) 0 0 0 0 0 0 STRATEGIC INITIATIVES



efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493039010561 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** READING IS FUNDAMENTAL INC 52-0976257 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 266,649 FMV 4 Books and publications Clothing and household goods . . . . . Cars and other vehicles **7** Boats and planes . . 8 Intellectual property . . . Securities—Publicly traded . Χ 3 6,789 FMV 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
is reporting in Part I, co	ation. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization lumn (b), the number of contributions, the number of items received, or a combination of both. Also ny additional information.
Return Reference	Explanation
PART I, COLUMN (B):	RIF REPORTS THE NUMBER OF CONTRIBUTORS IN PART I, COLUMN (B).
	Schedule M (Form 990) (2019)

efile GRAPH	IC print - DC	NOT PROCESS	As Filed Data -		DLN	I: 93493039010561
SCHEDULE O (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 or to provide any additional information.  Attach to Form 990 or 990-EZ.  Go to <a href="https://www.irs.gov/Form990">www.irs.gov/Form990</a> for the latest information.						OMB No. 1545-0047  2019 Open to Public Inspection
Name Betherofg READING IS FUND 990 Schedul	AMENTAL INC	nental Informatio	on		<b>Employer iden</b> 52-0976257	tification number
Return Reference				Explanation		
FORM 990, PART VI, SECTION B, LINE 11B		RIBUTED TO THE E		F DIRECTORS REVIEWS THE RECTORS BEFORE IT IS FILEI		

## 990 Schedule O, Supplemental Information

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

## 990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 15A	TO BEGIN THE ANNUAL EVALUATION OF THE PRESIDENT AND CEO, THE CHAIR OF THE BOARD FIRST SOLI CITS INPUT FROM ALL BOARD MEMBERS CONCERNING THE PRESIDENT'S PERFORMANCE. THE EXECUTIVE CO MMITTEE THEN CONSIDERS THE INPUT OF THE RESPONDING BOARD MEMBERS IN ITS REVIEW OF THE PRES IDENT AND CEO, AND REPORTS TO THE BOARD OF DIRECTORS ITS EVALUATION. THE EXECUTIVE COMMITT EE THEN SHARES ITS EVALUATION WITH THE PRESIDENT AND CEO. THE EXECUTIVE COMMITTEE THEN CON SULTS COMPARABILITY SURVEYS TO DETERMINE THE PRESIDENT AND CEO'S COMPENSATION FOR THE NEXT YEAR.

Return Explanation
Reference

DIE CLIDMITE ITS ALIDITED EINANCIAL STATEMENTS EEDEDAL EODM 000 AND IDS LETTED OF DETERMINA

990 Schedule O, Supplemental Information

EODM 000

FURIVI 990,	RIF SUBMITS ITS AUDITED FINANCIAL STATEMENTS, FEDERAL FURM 990 AND IRS LETTER OF DETERMINA
PART VI,	TION (OF RIF'S TAX EXEMPT STATUS) TO GUIDESTAR FOR PUBLICATION ON THAT SERVICE. RIF ALSO P
SECTION C,	UBLISHES AUDITED FINANCIAL STATEMENTS AND FEDERAL FORM 990 ON ITS OWN WEBSITE. TO DATE, RI
LINE 19	F HAS NOT PUBLISHED ITS CONFLICT OF INTEREST POLICY FOR ACCESS BY THE GENERAL PUBLIC. ALL
	DOCUMENTS, INCLUDING OUR GOVERNING DOCUMENTS AND THE FEDERAL FORM 1023 IS ALSO AVAILABLE U
	PON REQUEST.

Return Explanation

990 Schedule O, Supplemental Information

FORM 990,
PART IX,
LINE 11G

OTHER PROFESSIONAL FEES: PROGRAM SERVICE EXPENSES 306,261. MANAGEMENT AND GENERAL EXPENSES 50,557. FUNDRAISING EXPENSES 73,791. TOTAL EXPENSES 430,609. CONSULTING AND CONTRACT SERV ICES: PROGRAM SERVICE EXPENSES 578,742. MANAGEMENT AND GENERAL EXPENSES 44,951. FUNDRAISIN G EXPENSES 0. TOTAL EXPENSES 623,693.