

Form **990**

Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

▶ Do not enter social security numbers on this form as it may be made public.
▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2017
Open to Public Inspection

A For the 2017 calendar year, or tax year beginning **OCT 1, 2017** and ending **SEP 30, 2018**

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization READING IS FUNDAMENTAL, INC. Doing business as Number and street (or P.O. box if mail is not delivered to street address) Room/suite 750 FIRST STREET, NE 920 City or town, state or province, country, and ZIP or foreign postal code WASHINGTON, DC 20002 F Name and address of principal officer: ALICIA LEVI SAME AS C ABOVE	D Employer identification number 52-0976257 E Telephone number (877) 743-7323 G Gross receipts \$ 11,660,867. H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions) H(c) Group exemption number ▶
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () ◀ (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		
J Website: ▶ WWW.RIF.ORG		
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶		
L Year of formation: 1973		M State of legal domicile: DC

Part I Summary

1	Briefly describe the organization's mission or most significant activities: MOTIVATING CHILDREN TO READ BY MAKING READING A FUN AND BENEFICIAL PART OF EVERYDAY LIFE.	
2	Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.	
3	Number of voting members of the governing body (Part VI, line 1a)	3
4	Number of independent voting members of the governing body (Part VI, line 1b)	9
5	Total number of individuals employed in calendar year 2017 (Part V, line 2a)	33
6	Total number of volunteers (estimate if necessary)	50010
7a	Total unrelated business revenue from Part VIII, column (C), line 12	0.
7b	Net unrelated business taxable income from Form 990-T, line 34	13,828.
8	Contributions and grants (Part VIII, line 1h)	5,493,347.
9	Program service revenue (Part VIII, line 2g)	9,988,351.
10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	522,974.
11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	366,638.
12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	-18,712.
13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	0.
14	Benefits paid to or for members (Part IX, column (A), line 4)	1,537,110.
15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	0.
16a	Professional fundraising fees (Part IX, column (A), line 11e)	2,259,780.
b	Total fundraising expenses (Part IX, column (D), line 25) ▶ 1,536,263.	96,000.
17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	3,076,616.
18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	3,536,356.
19	Revenue less expenses. Subtract line 18 from line 12	6,969,506.
20	Total assets (Part X, line 16)	-605,259.
21	Total liabilities (Part X, line 26)	3,399,452.
22	Net assets or fund balances. Subtract line 21 from line 20	10,345,218.

Part II 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.

Sign Here	Signature of officer ALICIA LEVI, PRESIDENT AND CEO Type or print name and title	Date _____
Paid Preparer Use Only	Print/Type preparer's name FRANK H. SMITH	Preparer's signature <i>Frank H. Smith</i>
	Firm's name ▶ MARCUM LLP	Date 02/04/19
	Firm's address ▶ 1899 STREET, NW, SUITE 850 WASHINGTON, DC 20036	Check if self-employed <input type="checkbox"/> PTIN P00639053
		Firm's EIN ▶ 11-1986323
		Phone no. (202) 227-4000

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

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response or note to any line in this Part III [X]

1 Briefly describe the organization's mission:
READING IS FUNDAMENTAL, INC. (RIF) IS COMMITTED TO A LITERATE AMERICA BY INSPIRING A PASSION FOR READING AMONG CHILDREN, PROVIDING QUALITY CONTENT AND RESOURCES TO MAKE AN IMPACT, AND ENGAGING COMMUNITIES IN THE SOLUTION TO GIVE EVERY CHILD THE FUNDAMENTALS FOR SUCCESS.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? [] Yes [X] No
If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? [] Yes [X] No
If "Yes," describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ 2,013,664. including grants of \$) (Revenue \$ 598,399.)
LITERACY SERVICES AND OTHER PROGRAMS: 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 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

4b (Code:) (Expenses \$ 1,443,354. including grants of \$ 1,403,311.) (Revenue \$ 10,132.)
BOOKS FOR OWNERSHIP: AT READING CELEBRATIONS HELD MULTIPLE TIMES EACH YEAR, CHILDREN CHOOSE NEW BOOKS AND PARTICIPATE IN READING ACTIVITIES WITH TEACHERS, PARENTS, VOLUNTEERS AND COMMUNITY MEMBERS. THE BOOKS ARE FREE TO THE CHILDREN. 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 LEVEL. THE DISTRIBUTIONS, WHICH OCCUR THROUGHOUT THE YEAR, ALSO INCLUDE PARENT AND COMMUNITY ENGAGEMENT AND PROVIDE AN OPPORTUNITY FOR THE EMPLOYEES OF

4c (Code:) (Expenses \$ 991,267. including grants of \$) (Revenue \$)
DIGITAL PROGRAMS: RIF'S DIGITAL PORTFOLIO OF PRODUCTS INCLUDES LITERACY CENTRAL, LITERACY NETWORK AND THE LITERACY APP.

LITERACY CENTRAL IS AN ONLINE DESTINATION FOR TEACHERS, PARENTS, AND LITERACY VOLUNTEERS TO GET THOUSANDS OF FREE DIGITAL RESOURCES TIED DIRECTLY TO THE BOOKS CHILDREN LOVE AND TEACHERS TURN TO EVERYDAY. 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

4d Other program services (Describe in Schedule O.)
(Expenses \$ 699,772. including grants of \$) (Revenue \$ 112,558.)

4e Total program service expenses 5,148,057.

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i>	X	
2 Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> ?	X	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>		X
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>		X
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III</i>		X
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i>		X
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>		X
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? <i>If "Yes," complete Schedule D, Part IV</i>		X
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>	X	
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i>	X	
b Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII</i>		X
c Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII</i>		X
d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX</i>		X
e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>	X	
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i>	X	
12a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i>	X	
b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i>		X
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>		X
14a Did the organization maintain an office, employees, or agents outside of the United States?		X
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV</i>		X
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? <i>If "Yes," complete Schedule F, Parts II and IV</i>		X
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? <i>If "Yes," complete Schedule F, Parts III and IV</i>		X
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>	X	
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>		X
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>		X

Part IV Checklist of Required Schedules (continued)

	Yes	No
20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>		X
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	X	
22 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>		X
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>	X	
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>		X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>		X
b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>		X
26 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? <i>If "Yes," complete Schedule L, Part II</i>		X
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>		X
28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):		
a A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		X
b A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		X
c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>		X
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	X	
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		X
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>		X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>		X
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>		X
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?		X
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)? <i>If "Yes," complete Schedule R, Part V, line 2</i>		
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>		X
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>		X
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	X	

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

Table with columns for question numbers (1a-14b), Yes/No checkboxes, and numerical responses (e.g., 17, 0, 33, 5, 11a, 11b, 12a, 12b, 13a, 13b, 13c, 14a, 14b).

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Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Check if Schedule O contains a response or note to any line in this Part VI [X]

Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include: 1a Enter the number of voting members of the governing body at the end of the tax year; 1b Enter the number of voting members included in line 1a, above, who are independent; 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?; 3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?; 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?; 5 Did the organization become aware during the year of a significant diversion of the organization's assets?; 6 Did the organization have members or stockholders?; 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?; 7b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?; 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? b Each committee with authority to act on behalf of the governing body?; 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.

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

Table with 3 columns: Question, Yes, No. Rows include: 10a Did the organization have local chapters, branches, or affiliates?; 10b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?; 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?; 11b Describe in Schedule O the process, if any, used by the organization to review this Form 990.; 12a Did the organization have a written conflict of interest policy? If "No," go to line 13; 12b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?; 12c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done; 13 Did the organization have a written whistleblower policy?; 14 Did the organization have a written document retention and destruction policy?; 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?; 15a The organization's CEO, Executive Director, or top management official; 15b Other officers or key employees of the organization; 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?; 16b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed AL, AK, AR, AZ, CA, CT, FL, GA, HI, IL, IN, KS
18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. [X] Own website [] Another's website [X] Upon request [] Other (explain in Schedule O)
19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
20 State the name, address, and telephone number of the person who possesses the organization's books and records: ROMEO FERRUFINO - (877) 743-7323 750 FIRST STREET, NE, NO. 920, WASHINGTON, DC 20002

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 year.

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

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

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) JOHN REMONDI CHAIRMAN	4.50	X		X				0.	0.	0.
(2) CHRISTY MOBERLY VICE CHAIRMAN	1.50	X		X				0.	0.	0.
(3) J.J. JOHNSON SECRETARY	1.50	X		X				0.	0.	0.
(4) MARC WALBY TREASURER	1.50	X		X				0.	0.	0.
(5) KITTY KELLEY DIRECTOR	1.50	X						0.	0.	0.
(6) MATTHEW MCCORRY DIRECTOR	1.50	X						0.	0.	0.
(7) EMILY MOORE DIRECTOR	1.50	X						0.	0.	0.
(8) CAROLYN SIMPSON DIRECTOR	1.50	X						0.	0.	0.
(9) RICK ZIMMERMAN DIRECTOR	1.50	X						0.	0.	0.
(10) ALICIA LEVI PRESIDENT AND CEO	40.00			X				287,500.	0.	6,170.
(11) BETH L. MEYER CHIEF MARKETING OFFICER	40.00				X			186,828.	0.	2,150.
(12) EDWARD DE LEON CHIEF PROGRAM AND CONTENT OFFICER	40.00					X		139,272.	0.	0.
(13) MARGARET M. CARTER, DIRECTOR OF ANNUAL GIVING - UNTIL 07/2018	40.00					X		137,172.	0.	7,146.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
1b Sub-total							750,772.	0.	15,466.	
c Total from continuation sheets to Part VII, Section A							0.	0.	0.	
d Total (add lines 1b and 1c)							750,772.	0.	15,466.	

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **4**

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

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
D'VINCI INTERACTIVE, 28 SOUTH POTOMAC STREET, 4TH FLOOR, HAGERSTOWN, MD 21740	PROFESSIONAL CONSULTING	458,310.
ONE SOURCE PRODUCTION 38590 BETTIS DRIVE, HAMILTON, VA 20158	MAILING LIST MANAGEMENT	245,048.
BDO USA, LLP, 8401 GREENSBORO DRIVE, SUITE 800, MCLEAN, VA 22102	PROFESSIONAL CONSULTING	180,000.
LAUTMAN MASKA NEILL & CO, 1730 RHODE ISLAND AVENUE, NW, WASHINGTON, DC 20036	PROFESSIONAL FUNDRAISING	133,800.
DIANE LONSDALE, 3930 WORTHINGTON AVENUE, REITERSTOWN, MD 21136	PROFESSIONAL CONSULTING	106,408.

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization **7**



Part VIII Statement of Revenue

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

		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514	
Contributions, Gifts, Grants and Other Similar Amounts	1 a Federated campaigns	1a 67,513.				
	b Membership dues	1b				
	c Fundraising events	1c				
	d Related organizations	1d				
	e Government grants (contributions)	1e 3,654,956.				
	f All other contributions, gifts, grants, and similar amounts not included above	1f 6,265,882.				
	g Noncash contributions included in lines 1a-1f: \$	448,761.				
	h Total. Add lines 1a-1f	▶ 9,988,351.				
	Program Service Revenue	2 a <u>READ FOR SUCCESS</u>	Business Code 900099	598,399.	598,399.	
b <u>TRAINING PROGRAMS</u>		900099	112,558.	112,558.		
c <u>MANAGEMENT FEES</u>		900099	10,132.	10,132.		
d _____						
e _____						
f All other program service revenue						
g Total. Add lines 2a-2f		▶ 721,089.				
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)	▶ 102,488.			102,488.	
	4 Income from investment of tax-exempt bond proceeds	▶				
	5 Royalties	▶				
	6 a Gross rents	(i) Real				
		(ii) Personal				
		b Less: rental expenses				
		c Rental income or (loss)				
	d Net rental income or (loss)	▶				
	7 a Gross amount from sales of assets other than inventory	(i) Securities	848,939.			
		(ii) Other				
		b Less: cost or other basis and sales expenses	508,387.			
		c Gain or (loss)	340,552.			
	d Net gain or (loss)	▶ 340,552.			340,552.	
	8 a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18	a				
		b Less: direct expenses	b			
c Net income or (loss) from fundraising events		▶				
9 a Gross income from gaming activities. See Part IV, line 19	a					
	b Less: direct expenses	b				
	c Net income or (loss) from gaming activities	▶				
10 a Gross sales of inventory, less returns and allowances	a					
	b Less: cost of goods sold	b				
	c Net income or (loss) from sales of inventory	▶				
Miscellaneous Revenue		Business Code				
11 a _____						
	b _____					
	c _____					
	d All other revenue					
	e Total. Add lines 11a-11d	▶				
12 Total revenue. See instructions.	▶	11152480.	721,089.	0.	443,040.	

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Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 ...	1,403,311.	1,403,311.		
2 Grants and other assistance to domestic individuals. See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	506,603.	326,759.	78,270.	101,574.
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	1,779,402.	1,147,571.	274,937.	356,894.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	45,662.	29,452.	7,055.	9,155.
9 Other employee benefits	141,526.	91,284.	21,866.	28,376.
10 Payroll taxes	168,435.	108,641.	26,023.	33,771.
11 Fees for services (non-employees):				
a Management				
b Legal	50,995.		50,995.	
c Accounting	218,949.		218,949.	
d Lobbying				
e Professional fundraising services. See Part IV, line 17	171,733.			171,733.
f Investment management fees	26,482.		26,482.	
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch. O.)	596,127.	287,081.	182,076.	126,970.
12 Advertising and promotion	243,153.	10,120.	3,027.	230,006.
13 Office expenses	302,291.	187,944.	19,345.	95,002.
14 Information technology	429,864.	345,312.	57,817.	26,735.
15 Royalties				
16 Occupancy	308,198.	198,771.	47,619.	61,808.
17 Travel	90,851.	80,055.	4,295.	6,501.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	47,478.	32,480.	14,348.	650.
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	180,887.	116,661.	27,950.	36,276.
23 Insurance	19,688.	12,698.	3,042.	3,948.
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	580,099.	328,623.	4,612.	246,864.
b BOOKS-LOCAL RIF PRGMS.	441,294.	441,294.		
c _____				
d _____				
e All other expenses _____				
25 Total functional expenses. Add lines 1 through 24e	7,753,028.	5,148,057.	1,068,708.	1,536,263.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				
Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)	174,779.	93,800.	0.	80,979.

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Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing	1,009,569.	1	1,579,571.
	2 Savings and temporary cash investments	633,760.	2	274,489.
	3 Pledges and grants receivable, net	1,932,950.	3	2,018,697.
	4 Accounts receivable, net	17,771.	4	0.
	5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instr). Complete Part II of Sch L		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use	54,000.	8	148,105.
	9 Prepaid expenses and deferred charges	142,276.	9	98,358.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 1,360,319.		
	b Less: accumulated depreciation	10b 208,916.		
	11 Investments - publicly traded securities	1,191,526.	10c	1,151,403.
	12 Investments - other securities. See Part IV, line 11	5,144,350.	11	8,035,681.
	13 Investments - program-related. See Part IV, line 11		12	
	14 Intangible assets		13	
	15 Other assets. See Part IV, line 11	219,016.	14	
16 Total assets. Add lines 1 through 15 (must equal line 34)	10,345,218.	15	84,296.	
		16	13,390,600.	
Liabilities	17 Accounts payable and accrued expenses	985,982.	17	480,913.
	18 Grants payable	284,497.	18	326,992.
	19 Deferred revenue	0.	19	22,607.
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	736,821.	25	889,351.
	26 Total liabilities. Add lines 17 through 25	2,007,300.	26	1,719,863.
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	4,712,104.	27	7,946,063.
	28 Temporarily restricted net assets	3,034,204.	28	3,133,064.
	29 Permanently restricted net assets	591,610.	29	591,610.
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building, or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
33 Total net assets or fund balances	8,337,918.	33	11,670,737.	
34 Total liabilities and net assets/fund balances	10,345,218.	34	13,390,600.	

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	11,152,480.
2	Total expenses (must equal Part IX, column (A), line 25)	2	7,753,028.
3	Revenue less expenses. Subtract line 2 from line 1	3	3,399,452.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	8,337,918.
5	Net unrealized gains (losses) on investments	5	-66,633.
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	11,670,737.

Part XII Financial Statements and Reporting

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

- 1 Accounting method used to prepare the Form 990: Cash Accrual Other _____
If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.
- 2a Were the organization's financial statements compiled or reviewed by an independent accountant? _____
If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:
 Separate basis Consolidated basis Both consolidated and separate basis
- b Were the organization's financial statements audited by an independent accountant? _____
If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:
 Separate basis Consolidated basis Both consolidated and separate basis
- c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? _____
If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.
- 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? _____
- b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits _____

	Yes	No
2a		X
2b	X	
2c	X	
3a		X
3b		

Form 990 (2017)

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	10757756.	5781544.	5374338.	5493347.	9988351.	37395336.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	10757756.	5781544.	5374338.	5493347.	9988351.	37395336.
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						9096975.
6 Public support. Subtract line 5 from line 4.						28298361.

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
7 Amounts from line 4	10757756.	5781544.	5374338.	5493347.	9988351.	37395336.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	928,156.	949,318.	917,705.	905,017.	102,488.	3802684.
9 Net income from unrelated business activities, whether or not the business is regularly carried on	3,158.	5,063.				8,221.
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	783.		1,000.			1,783.
11 Total support. Add lines 7 through 10						41208024.
12 Gross receipts from related activities, etc. (see instructions)					12	2,111,554.
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2017 (line 6, column (f) divided by line 11, column (f))	14	68.67 %
15 Public support percentage from 2016 Schedule A, Part II, line 14	15	63.26 %
16a 33 1/3% support test - 2017. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		<input checked="" type="checkbox"/>
b 33 1/3% support test - 2016. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
17a 10% -facts-and-circumstances test - 2017. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
b 10% -facts-and-circumstances test - 2016. 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 supported organization		<input type="checkbox"/>
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions		<input type="checkbox"/>

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

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						

14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** ►

Section C. Computation of Public Support Percentage

15 Public support percentage for 2017 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2016 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2017 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2016 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests - 2017. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization ►

b 33 1/3% support tests - 2016. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization ►

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

Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of 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 Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

	Yes	No
1 Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>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.</i>		
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer (b) and (c) below.</i>		
b 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)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
4a Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.</i>		
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.</i>		
c 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)? <i>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.</i>		
5a Did the organization add, substitute, or remove any supported organizations during the tax year? <i>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 amendment to the organizing document).</i>		
b 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?		
c Substitutions only. Was the substitution the result of an event beyond the organization's control?		
6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If "Yes," provide detail in Part VI.</i>		
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? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
9a 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))? <i>If "Yes," provide detail in Part VI.</i>		
b Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If "Yes," provide detail in Part VI.</i>		
c 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? <i>If "Yes," provide detail in Part VI.</i>		
10a 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)? <i>If "Yes," answer 10b below.</i>		
b Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>		

Part IV Supporting Organizations (continued)

	Yes	No
11 Has the organization accepted a gift or contribution from any of the following persons?		
a 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?		
b A family member of a person described in (a) above?		
c A 35% controlled entity of a person described in (a) or (b) above? <i>If "Yes" to a, b, or c, provide detail in Part VI.</i>		

Section 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? <i>If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.</i>		
2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? <i>If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.</i>		

Section 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)? <i>If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).</i>		

Section D. All Type III Supporting Organizations

	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? <i>If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).</i>		
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? <i>If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.</i>		

Section 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 instructions).		
a <input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.		
b <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.		
c <input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).		
2 Activities Test. Answer (a) and (b) below.		
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? <i>If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.</i>	Yes	No
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? <i>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.</i>		
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>		
b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? <i>If "Yes," describe in Part VI the role played by the organization in this regard.</i>		

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.

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1	
2	Recoveries of prior-year distributions	2	
3	Other gross income (see instructions)	3	
4	Add lines 1 through 3	4	
5	Depreciation and depletion	5	
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6	
7	Other expenses (see instructions)	7	
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8	

Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):		
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	Total (add lines 1a, 1b, and 1c)	1d	
e	Discount claimed for blockage or other factors (explain in detail in Part VI):		
2	Acquisition indebtedness applicable to non-exempt-use assets	2	
3	Subtract line 2 from line 1d	3	
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by .035	6	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	

Section C - Distributable Amount		(A) Prior Year	Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1	
2	Enter 85% of line 1	2	
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3	
4	Enter greater of line 2 or line 3	4	
5	Income tax imposed in prior year	5	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6	
7	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

Section D - Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required)	
6 Other distributions (describe in Part VI). See instructions.	
7 Total annual distributions. Add lines 1 through 6.	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.	
9 Distributable amount for 2017 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-2017	(iii) Distributable Amount for 2017
1 Distributable amount for 2017 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2017 (reasonable cause required- explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2017			
a			
b From 2013			
c From 2014			
d From 2015			
e From 2016			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2017 distributable amount			
i Carryover from 2012 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4 Distributions for 2017 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2017 distributable amount			
c Remainder. Subtract lines 4a and 4b from 4.			
5 Remaining underdistributions for years prior to 2017, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI . See instructions.			
6 Remaining underdistributions for 2017. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI . See instructions.			
7 Excess distributions carryover to 2018. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2013			
b Excess from 2014			
c Excess from 2015			
d Excess from 2016			
e Excess from 2017			

Part VI **Supplemental Information.** Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information.
(See instructions.)

SCHEDULE A, PART II, LINE 10, EXPLANATION FOR OTHER INCOME:

OTHER

2013 AMOUNT: \$ 783.

2014 AMOUNT: \$ 0.

2015 AMOUNT: \$ 1,000.

2016 AMOUNT: \$ 0.

2017 AMOUNT: \$ 0.

Multiple horizontal lines for providing additional information.

COPY

Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Schedule of Contributors

Attach to Form 990, Form 990-EZ, or Form 990-PF. Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2017

Name of the organization

READING IS FUNDAMENTAL, INC.

Employer identification number

52-0976257

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

[X] 501(c)(3) (enter number) organization

[] 4947(a)(1) nonexempt charitable trust not treated as a private foundation

[] 527 political organization

Form 990-PF

[] 501(c)(3) exempt private foundation

[] 4947(a)(1) nonexempt charitable trust treated as a private foundation

[] 501(c)(3) taxable private foundation

Check if your organization is covered by the General Rule or a Special Rule.

Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

[] For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

[X] For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

[] For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.

[] For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year ... \$

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

LHA For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2017)

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

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>1</u>	<hr/> <hr/> <hr/>	\$ <u>3,504,956.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<u>2</u>	<hr/> <hr/> <hr/>	\$ <u>2,009,500.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<u>3</u>	<hr/> <hr/> <hr/>	\$ <u>285,396.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<u>4</u>	<hr/> <hr/> <hr/>	\$ <u>250,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<hr/> <hr/> <hr/>	<hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<hr/> <hr/> <hr/>	<hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

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

Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$ _____	_____
		\$ _____	_____
		\$ _____	_____
		\$ _____	_____
		\$ _____	_____
		\$ _____	_____
		\$ _____	_____

Name of organization READING IS FUNDAMENTAL, INC.	Employer identification number 52-0976257
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Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) ▶ \$ _____
Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

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.

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

OMB No. 1545-0047

2017

Open to Public Inspection

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

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

Table with 3 columns: Question, (a) Donor advised funds, (b) Funds and other accounts. Rows include total number at end of year, aggregate value of contributions, grants, and end of year, and two yes/no questions about donor property and grant fund usage.

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

Form with multiple questions (1-9) regarding conservation easements, including checkboxes for various purposes, a table for held easements at the end of the tax year, and yes/no questions about monitoring and reporting.

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

Form with questions (1a, 1b, 2) regarding reporting of art and historical treasures, including amounts for revenue and assets.

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

- 3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):
- a Public exhibition
 - b Scholarly research
 - c Preservation for future generations
 - d Loan or exchange programs
 - e Other _____
- 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.
- 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

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

- 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No
- b If "Yes," explain the arrangement in Part XIII and complete the following table:
- | | Amount |
|---------------------------------|--------|
| c Beginning balance | 1c |
| d Additions during the year | 1d |
| e Distributions during the year | 1e |
| f Ending balance | 1f |
- 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No
- b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	740,327.	711,180.	681,490.	712,294.	661,141.
b Contributions					
c Net investment earnings, gains, and losses	35,807.	65,392.	59,607.	-12,271.	60,730.
d Grants or scholarships					
e Other expenditures for facilities and programs	36,734.	36,245.	29,917.	18,533.	9,577.
f Administrative expenses					
g End of year balance	739,400.	740,327.	711,180.	681,490.	712,294.

- 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a Board designated or quasi-endowment _____ %
 - b Permanent endowment 80.01 %
 - c Temporarily restricted endowment 19.99 %
- The percentages on lines 2a, 2b, and 2c should equal 100%.
- 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
- | | Yes | No |
|---|--------------------------|-------------------------------------|
| (i) unrelated organizations | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| (ii) related organizations | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
- 4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements		586,714.	57,120.	529,594.
d Equipment		100,168.	33,650.	66,518.
e Other		673,437.	118,146.	555,291.
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				1,151,403.

Part VII Investments - Other Securities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) ▶		

Part VIII Investments - Program Related.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ▶		

Part IX Other Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) ▶	

Part X Other Liabilities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) DEFERRED RENT AND LEASE INCENTIVES	828,694.
(3) DEPOSITS	60,657.
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶	889,351.

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

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

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

1	Total revenue, gains, and other support per audited financial statements		1	12,076,287.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
a	Net unrealized gains (losses) on investments	2a	-66,633.	
b	Donated services and use of facilities	2b	990,440.	
c	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII.)	2d		
e	Add lines 2a through 2d	2e	923,807.	
3	Subtract line 2e from line 1	3	11,152,480.	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		
c	Add lines 4a and 4b	4c	0.	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	11,152,480.	

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

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

1	Total expenses and losses per audited financial statements		1	8,743,468.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
a	Donated services and use of facilities	2a	990,440.	
b	Prior year adjustments	2b		
c	Other losses	2c		
d	Other (Describe in Part XIII.)	2d		
e	Add lines 2a through 2d	2e	990,440.	
3	Subtract line 2e from line 1	3	7,753,028.	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		
c	Add lines 4a and 4b	4c	0.	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	7,753,028.	

Part XIII Supplemental Information.

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

PART V, LINE 4:

EARNINGS FROM THE ENDOWMENT FUNDS ARE RECORDED AND MADE AVAILABLE FOR OPERATIONS THROUGH AN ANNUAL ALLOCATION OF UP TO 5% OF THE FUND. THE ALLOCATION IS BASED ON A THREE-YEAR ROLLING AVERAGE OF THE INVESTMENT'S MARKET VALUE, DETERMINED AS OF MARCH 31 OF THE YEAR PRIOR TO THE BUDGET YEAR. EACH YEAR, AS PART OF RIF'S BUDGETING PROCESS, RIF REVIEWS THE APPROPRIATE LEVEL OF PAYOUT FOR THE FOLLOWING FISCAL YEAR. FUND DISBURSEMENTS ARE PAID AT THE END OF EACH QUARTER IN THE FISCAL YEAR. EACH FUND'S OPERATING INCOME IS UTILIZED AS SET FORTH IN THE SPECIFIC APPLICABLE ENDOWMENT AGREEMENT. THE GENERAL ENDOWMENT FUND'S INCOME IS UTILIZED FOR GENERAL OPERATIONS.

Part XIII Supplemental Information *(continued)*

PART X, LINE 2:

RIF EVALUATED ITS UNCERTAINTY IN INCOME TAXES FOR THE YEARS ENDED
SEPTEMBER 30, 2018 AND 2017, AND DETERMINED THAT THERE WERE NO MATTERS
THAT WOULD REQUIRE RECOGNITION IN THE FINANCIAL STATEMENTS OR THAT MAY
HAVE ANY EFFECT ON ITS TAX-EXEMPT STATUS.

COPY

Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

Revenue		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events (add col. (a) through col. (c))
		(event type)	(event type)	(total number)	
Revenue	1 Gross receipts				
	2 Less: Contributions				
	3 Gross income (line 1 minus line 2)				
Direct Expenses	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs				
	7 Food and beverages				
	8 Entertainment				
	9 Other direct expenses				
	10 Direct expense summary. Add lines 4 through 9 in column (d)				
11 Net income summary. Subtract line 10 from line 3, column (d)					

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

Revenue		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Revenue	1 Gross revenue				
Direct Expenses	2 Cash prizes				
	3 Noncash prizes				
	4 Rent/facility costs				
	5 Other direct expenses				
	6 Volunteer labor	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	
	7 Direct expense summary. Add lines 2 through 5 in column (d)				
	8 Net gaming income summary. Subtract line 7 from line 1, column (d)				

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

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

b If "No," explain: _____

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

b If "Yes," explain: _____

- 11 Does the organization conduct gaming activities with nonmembers? Yes No
- 12 Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed to administer charitable gaming? Yes No
- 13 Indicate the percentage of gaming activity conducted in:

a The organization's facility	13a	%
b An outside facility	13b	%
- 14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name ▶ _____

Address ▶ _____

- 15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? Yes No
- b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ _____ and the amount of gaming revenue retained by the third party ▶ \$ _____
- c If "Yes," enter name and address of the third party:

Name ▶ _____

Address ▶ _____

16 Gaming manager information:

Name ▶ _____

Gaming manager compensation ▶ \$ _____

Description of services provided ▶ _____

- Director/officer
- Employee
- Independent contractor

17 Mandatory distributions:

- a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? Yes No
- b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ _____

Part IV **Supplemental Information.** Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.

SCHEDULE G, PART I, LINE 2B, LIST OF TEN HIGHEST PAID FUNDRAISERS:

(I) NAME OF FUNDRAISER: LAUTMAN MASKA NEIL & COMPANY

(I) ADDRESS OF FUNDRAISER:

1730 RHODE ISLAND AVENUE, NW, SUITE 301, WASHINGTON, DC 20036

(I) NAME OF FUNDRAISER: TRUE NORTH, INC

(I) ADDRESS OF FUNDRAISER:

630 THIRD AVENUE, 12TH FLOOR, NEW YORK, NY 10017

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Part IV Supplemental Information *(continued)*

Multiple horizontal lines for supplemental information.

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**SCHEDULE I
(Form 990)**

Department of the Treasury
Internal Revenue Service

**Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States**
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

▶ **Attach to Form 990.**

▶ **Go to www.irs.gov/Form990 for the latest information.**

OMB No. 1545-0047

2017

**Open to Public
Inspection**

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

Part I General Information on Grants and Assistance

- 1** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? **Yes** **No**
- 2** Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC 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
READING IS FUNDAMENTAL PITTSBURGH 10 CHILDRENS WAY, SUITE 300 PITTSBURGH, PA 15212	25-1558336	501(C)(3)	0.	75,000.	FMV	BOOKS	TO FOSTER LITERACY
SOUTHWEST HUMAN DEVELOPMENT (BFOS) 2806 N. 24TH STREET PHOENIX, AZ 85008	86-0407179	501(C)(3)	0.	32,625.	FMV	BOOKS	TO FOSTER LITERACY
MERCED COUNTY OFFICE OF EDUCATION, MIGRANT EDUCATION, REGION 3 - 2100 COOPER AVENUE, SUITE B - MERCED, CA 95348	94-6002379	N/A	0.	25,800.	FMV	BOOKS	TO FOSTER LITERACY
MUSKINGUM IRA, RIF 205 N. 7TH STREET ZANESVILLE, OH 43701	31-1525731	N/A	0.	21,278.	FMV	BOOKS	TO FOSTER LITERACY
SUNFLOWER COUNTY CONSOLIDATED SCHOOL DISTRICT - 404 JEFFERSON STREET - INDIANOLA, MS 38751	46-4432711	N/A	0.	15,622.	FMV	BOOKS	TO FOSTER LITERACY
BOOK'EM / RIF NASHVILLE 161 RAINS AVENUE NASHVILLE, TN 37203	58-2000621	N/A	0.	15,142.	FMV	BOOKS	TO FOSTER LITERACY

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ▶ 38.

3 Enter total number of other organizations listed in the line 1 table ▶ 0.

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

Schedule I (Form 990) (2017)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BOOKSPRING 2006 GREENBROOK PARKWAY AUSTIN, TX 78723	74-2542664	501(C)(3)	0.	15,000.	FMV	BOOKS	TO FOSTER LITERACY
BESSEMER CITY SCHOOLS 1621 5TH AVENUE NORTH BESSEMER, AL 35020	26-3323883	N/A	0.	13,814.	FMV	BOOKS	TO FOSTER LITERACY
WYOMING PUBLIC SCHOOLS 3575 GLADIOLA AVENUE SW WYOMING, MI 49519	38-1678660	N/A	0.	13,812.	FMV	BOOKS	TO FOSTER LITERACY
REACH OUT AND READ KANSAS CITY 2100 W. 36TH AVENUE - 116 SUPPORT SERVICES FACILITY - KANSAS CITY, KS 66160	48-0547734	501(C)(3)	0.	12,000.	FMV	BOOKS	TO FOSTER LITERACY
READING SCHOOL DISTRICT 800 WASHINGTON STREET READING, PA 19601	23-6004134	N/A	0.	11,338.	FMV	BOOKS	TO FOSTER LITERACY
LEHIGH VALLEY PUBLIC TELECOMMUNICATION CORPORATION - 839 SESAME STREET - BETHLEHEM, PA 18015	23-1642883	501(C)(3)	0.	11,140.	FMV	BOOKS	TO FOSTER LITERACY
HAZLETON AREA SCHOOL DISTRICT 1515 W. 23RD STREET HAZLE TOWNSHIP, PA 18202	23-1667968	N/A	0.	11,022.	FMV	BOOKS	TO FOSTER LITERACY
HANOVER AREA SCHOOL DISTRICT 1600 SANS SOUCI PARKWAY HANOVER TOWNSHIP, PA 18706	23-1738341	N/A	0.	10,614.	FMV	BOOKS	TO FOSTER LITERACY
FIRST 5 SOLANO 601 TEXAS STREET, SUITE 210 FAIRFIELD, CA 94533	94-6000538	N/A	0.	10,000.	FMV	BOOKS	TO FOSTER LITERACY

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNITED WAY OF TUCSON AND SOUTHERN ARIZONA - 330 N. COMMERCE PARK LOOP, SUITE 200 - TUCSON, AZ 85745	86-0098932	501(C)(3)	0.	10,000.	FMV	BOOKS	TO FOSTER LITERACY
CANDLEWOOD ELEMENTARY 3635 CANDLEGLENN SAN ANTONIO, TX 78244	74-1556846	N/A	0.	8,476.	FMV	BOOKS	TO FOSTER LITERACY
SCHOOL DISTRICT OF LANCASTER 251 S. PRINCE STREET LANCASTER, PA 17603	23-1726414	N/A	0.	7,914.	FMV	BOOKS	TO FOSTER LITERACY
MCADORY ELEMENTARY SCHOOL 6251 EASTERN VALLEY ROAD MCCALLA, AL 35111	63-6000945	N/A	0.	7,590.	FMV	BOOKS	TO FOSTER LITERACY
NORTHVIEW/WESTVIEW ELEMENTARY 725 E. NORTH H STREET GAS CITY, IN 46933	35-6002529	N/A	0.	7,590.	FMV	BOOKS	TO FOSTER LITERACY
NORTH PENN SCHOOL DISTRICT 401 E. HANCOCK STREET LANSDALE, PA 19446	23-1670665	N/A	0.	7,476.	FMV	BOOKS	TO FOSTER LITERACY
ALLEN COUNTY PRIMARY CENTER 721 NEW GALLATIN ROAD SCOTTSVILLE, KY 42164	61-6001355	N/A	0.	7,294.	FMV	BOOKS	TO FOSTER LITERACY
BETHLEHEM AREA SCHOOL DISTRICT 1516 SYCAMORE STREET BETHLEHEM, PA 18017	24-0862592	N/A	0.	6,812.	FMV	BOOKS	TO FOSTER LITERACY
MONTELLO SCHOOL 407 EAST AVENUE LEWISTON, ME 04240	01-0447384	N/A	0.	6,670.	FMV	BOOKS	TO FOSTER LITERACY

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SAN RAFAEL CITY SCHOOL DISTRICT 310 NOVA ALBION WAY SAN RAFAEL, CA 94903	68-0194365	N/A	0.	6,325.	FMV	BOOKS	TO FOSTER LITERACY
SAYRE PUBLIC LIBRARY 113 E. POPLAR AVENUE SAYRE, OK 73662	73-1195641	N/A	0.	6,000.	FMV	BOOKS	TO FOSTER LITERACY
HIGH SPRINGS COMMUNITY SCHOOL 1015 N. MAIN STREET HIGH SPRINGS, FL 32643	59-6000500	N/A	0.	5,840.	FMV	BOOKS	TO FOSTER LITERACY
JOHN C. FREEMONT MAGNET SCHOOL 607 TEXAS STREET BAKERSFIELD, CA 93307	47-2747735	N/A	0.	5,728.	FMV	BOOKS	TO FOSTER LITERACY
JOSEPH HOPKINS ELEMENTARY SCHOOL 2440 ACKERMAN ROAD KIRBY, TX 78219	74-1556846	N/A	0.	5,702.	FMV	BOOKS	TO FOSTER LITERACY
COLLEGE HEIGHTS ELEMENTARY 2551 SUNNY LANE BAKERSFIELD, CA 93305	95-6000671	N/A	0.	5,656.	FMV	BOOKS	TO FOSTER LITERACY
PLAINVIEW PRIMARY/INTERMEDIATE ELEMENTARY - 1140 S. PLAINVIEW ROAD - ARDMORE, OK 73401	75-1583261	N/A	0.	5,612.	FMV	BOOKS	TO FOSTER LITERACY
JACK ANDERSON ELEMENTARY 250 SHUTE LANE HENDERSONVILLE, TN 37075	62-1772026	501(C)(3)	0.	5,598.	FMV	BOOKS	TO FOSTER LITERACY
WYOMING VALLEY WEST SD 450 N. MAPLE AVENUE KINGSTON, PA 18704	23-1669498	N/A	0.	5,570.	FMV	BOOKS	TO FOSTER LITERACY

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ARIN INTERMEDIATE UNIT 28 2895 W. PIKE ROAD INDIANA, PA 15701	25-1213649	N/A	0.	5,400.	FMV	BOOKS	TO FOSTER LITERACY
JAMES L. MASTERS ELEMENTARY 2650 WOODLAKE PARKWAY CONVERSE, TX 78109	74-1556846	N/A	0.	5,294.	FMV	BOOKS	TO FOSTER LITERACY
SOUTH BOSTON ELEMENTARY SCHOOL 2320 PARKER AVENUE SOUTH BOSTON, VA 24592	54-6001335	N/A	0.	5,280.	FMV	BOOKS	TO FOSTER LITERACY
GEIGER ELEMENTARY 601 COLLEGE STREET LEWISTON, ME 04240	01-0447384	N/A	0.	5,122.	FMV	BOOKS	TO FOSTER LITERACY
EASTON AREA SCHOOL DISTRICT RIF 1801 BUSHKILL DRIVE EASTON, PA 18040	23-1726731	N/A	0.	5,116.	FMV	BOOKS	TO FOSTER LITERACY

Part III **Grants and Other Assistance to Domestic Individuals.** Complete if the organization answered "Yes" on Form 990, Part IV, line 22.
Part III can be duplicated if additional space is needed.

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

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

PART I, LINE 2:

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. BOOK AWARDS ARE LIMITED TO A LIST OF TITLES SCREENED AND APPROVED BY AN ACADEMIC ADVISORY PANEL WITH EXPERTISE IN LITERACY EDUCATION.

**SCHEDULE J
(Form 990)**

Compensation Information

OMB No. 1545-0047

2017

Open to Public Inspection

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees
 ▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.
 ▶ Attach to Form 990.
 ▶ Go to www.irs.gov/Form990 for instructions and the latest information.

Department of the Treasury
Internal Revenue Service

Name of the organization: **READING IS FUNDAMENTAL, INC.**
 Employer identification number: **52-0976257**

Part I Questions Regarding Compensation

1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.

- | | |
|--|---|
| <input type="checkbox"/> First-class or charter travel | <input type="checkbox"/> Housing allowance or residence for personal use |
| <input type="checkbox"/> Travel for companions | <input type="checkbox"/> Payments for business use of personal residence |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees |
| <input type="checkbox"/> Discretionary spending account | <input type="checkbox"/> Personal services (such as, maid, chauffeur, chef) |

b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain **1b**

2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a? **2**

3 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.

- | | |
|---|---|
| <input checked="" type="checkbox"/> Compensation committee | <input type="checkbox"/> Written employment contract |
| <input checked="" type="checkbox"/> Independent compensation consultant | <input checked="" type="checkbox"/> Compensation survey or study |
| <input type="checkbox"/> Form 990 of other organizations | <input checked="" type="checkbox"/> Approval by the board or compensation committee |

4 During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:

- a** Receive a severance payment or change-of-control payment? **4a**
- b** Participate in, or receive payment from, a supplemental nonqualified retirement plan? **4b**
- c** Participate in, or receive payment from, an equity-based compensation arrangement? **4c**
- If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.

5 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:

- a** The organization? **5a**
- b** Any related organization? **5b**
- If "Yes" on line 5a or 5b, describe in Part III.

6 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:

- a** The organization? **6a**
- b** Any related organization? **6b**
- If "Yes" on line 6a or 6b, describe in Part III.

7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III **7**

8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III **8**

9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)? **9**

	Yes	No
1b		
2		
4a		<input checked="" type="checkbox"/>
4b		<input checked="" type="checkbox"/>
4c		<input checked="" type="checkbox"/>
5a		<input checked="" type="checkbox"/>
5b		<input checked="" type="checkbox"/>
6a		<input checked="" type="checkbox"/>
6b		<input checked="" type="checkbox"/>
7	<input checked="" type="checkbox"/>	
8		<input checked="" type="checkbox"/>
9		

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

Schedule J (Form 990) 2017

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 aren't 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.

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) ALICIA LEVI PRESIDENT AND CEO	(i)	250,000.	37,500.	0.	4,349.	1,821.	293,670.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) BETH L. MEYER CHIEF MARKETING OFFICER	(i)	185,528.	0.	1,300.	2,150.	0.	188,978.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

PART I, LINE 7:

ALICIA LEVI, PRESIDENT AND CEO, RECEIVED A BONUS OF \$37,500 BASED ON HER PERFORMANCE DURING THE YEAR ENDING DECEMBER 31, 2017.

**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No. 1545-0047

2017

Open To Public Inspection

Department of the Treasury
Internal Revenue Service

- ▶ 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.

Name of the organization: **READING IS FUNDAMENTAL, INC.** Employer identification number: **52-0976257**

Part I Types of Property	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art - Works of art				
2 Art - Historical treasures				
3 Art - Fractional interests				
4 Books and publications	X		441,294.	FMV
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities - Publicly traded	X	4	7,467.	FMV
10 Securities - Closely held stock				
11 Securities - Partnership, LLC, or trust interests				
12 Securities - Miscellaneous				
13 Qualified conservation contribution - Historic structures				
14 Qualified conservation contribution - Other				
15 Real estate - Residential				
16 Real estate - Commercial				
17 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 ()				
28 Other ()				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement **29**

	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 purposes for the entire holding period?		X
b If "Yes," describe the arrangement in Part II.		
31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?		X
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?		X
b If "Yes," describe in Part II.		
33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.		

COPY

Part II **Supplemental Information.** Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

SCHEDULE M, PART I, COLUMN (B):

RIF REPORTS THE NUMBER OF CONTRIBUTORS IN PART I, COLUMN (B).

Multiple horizontal lines for supplemental information.

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

▶ Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2017

Open to Public
Inspection

Name of the organization

READING IS FUNDAMENTAL, INC.

Employer identification number

52-0976257

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

RIF CREATES INNOVATIVE LITERACY SOLUTIONS TO ENSURE ALL CHILDREN HAVE THE OPPORTUNITY TO READ AND SUCCEED. THROUGH ARRANGEMENTS WITH BOOK PUBLISHERS AND DISTRIBUTORS, RIF MAXIMIZES THE IMPACT OF EVERY DOLLAR AND DONATION, HELPING CHILDREN ACHIEVE THEIR FULL POTENTIAL THROUGH THE LIFE-CHANGING POWER OF LITERACY. RIF PROVIDES BOOKS AND SUPPORTING LITERACY RESOURCES TO REACH CHILDREN WHERE THEY ARE IN NEED WITH THE HELP OF THOUSANDS OF VOLUNTEERS AND LOCAL PROGRAMS THROUGHOUT THE COUNTRY.

FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:

PREPARES PARTICIPANTS TO RETURN TO THEIR COMMUNITIES AND DELIVER THE TRAINING TO THEIR COLLEAGUES AND COMMUNITIES.

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 IN AMONG 33,000 STUDENTS FROM 16 STATES, RIF'S READ FOR SUCCESS 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.

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule O (Form 990 or 990-EZ) (2017)

732211 09-07-17

Name of the organization READING IS FUNDAMENTAL, INC.	Employer identification number 52-0976257
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RIF HOSTS OTHER LITERACY EVENTS WHICH HELP PROMOTE LITERACY AND INFORM OTHERS ABOUT ITS MISSION.

RIF CONTRACTS 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 4B, PROGRAM SERVICE ACCOMPLISHMENTS:
CORPORATE FUNDERS TO ACTIVELY PARTICIPATE. FOCUSING ON ACCESS AND CHOICE, STUDENTS IN COMMUNITIES THROUGHOUT THE COUNTRY PARTICIPATE IN RIF'S FLAGSHIP PROGRAM, BOOKS FOR OWNERSHIP, 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.

FORM 990, PART III, LINE 4C, PROGRAM SERVICE ACCOMPLISHMENTS:
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 OUR 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.

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

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:
 COMMUNITY LITERACY AWARENESS: RIF IS THE LEADING CHAMPION FOR CHILDREN'S LITERACY THROUGH MEANINGFUL RESEARCH, QUALITY CONTENT AND EQUAL ACCESS TO IMPACT ALL CHILDREN WITH THE POWER OF READING. RIF BELIEVES THAT EVERY CHILD DESERVES AN OPPORTUNITY TO OWN BOOKS, LEARN HOW TO READ AND OBTAIN THE FUNDAMENTAL BUILDING BLOCKS TO ACHIEVE HIS OR HER HIGHEST POTENTIAL. RIF PROMOTES AWARENESS OF THE CRITICAL IMPACT OF EARLY LITERACY THROUGH A BROAD RANGE OF ACTIVITIES, SHARING RESOURCES THROUGH ITS WEB SITE AND SOCIAL MEDIA PLATFORMS, DISTRIBUTION OF ITS MULTICULTURAL BOOK COLLECTIONS, AND LEVERAGING MEDIA THROUGH PUBLIC SERVICE ANNOUNCEMENTS. THROUGH COMMUNITY ENGAGEMENT, RIF IS EXPANDING ITS REACH AND INFLUENCE THROUGHOUT THE ENTIRE RIF COMMUNITY.
 EXPENSES \$ 699,772. INCLUDING GRANTS OF \$ 0. REVENUE \$ 112,558.

FORM 990, PART VI, SECTION B, LINE 11B:
 RIF'S FINANCE/AUDIT COMMITTEE OF THE BOARD OF DIRECTORS REVIEWS THE FEDERAL FORM 990. IT IS THEN DISTRIBUTED TO THE ENTIRE BOARD OF DIRECTORS BEFORE IT IS FILED WITH THE INTERNAL REVENUE SERVICE (IRS).

FORM 990, PART VI, SECTION B, LINE 12C:
 RIF'S CONFLICT OF INTEREST POLICY ("POLICY") APPLIES TO BOARD MEMBERS, OFFICERS AND RIF SENIOR MANAGERS (COLLECTIVELY "RIF INSIDERS"). THE POLICY REQUIRES THAT A RIF INSIDER DISCLOSES ANY POTENTIAL CONFLICT TO THE BOARD

COPY

Name of the organization READING IS FUNDAMENTAL, INC.	Employer identification number 52-0976257
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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 AFFIRMING THAT HE OR SHE:

- HAS RECEIVED A COPY OF THE POLICY,
- HAS READ AND UNDERSTANDS THE POLICY,
- HAS AGREED TO COMPLY WITH, AND HAS COMPLIED WITH THE POLICY,
- UNDERSTANDS THAT RIF IS A CHARITABLE AND EDUCATIONAL ORGANIZATION AND THAT, IN ORDER TO MAINTAIN ITS FEDERAL TAX EXEMPTION AND PRESERVE RIF'S VALUABLE REPUTATION, RIF MUST ENGAGE PRIMARILY IN ACTIVITIES THAT ACCOMPLISH ITS TAX EXEMPT PURPOSE.

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

TO BEGIN THE ANNUAL EVALUATION OF THE PRESIDENT AND CEO, THE CHAIR OF THE BOARD FIRST SOLICITS INPUT FROM ALL BOARD MEMBERS CONCERNING THE PRESIDENT'S PERFORMANCE. THE EXECUTIVE COMMITTEE THEN CONSIDERS THE INPUT OF THE RESPONDING BOARD MEMBERS IN ITS REVIEW OF THE PRESIDENT AND CEO, AND REPORTS BACK TO THE BOARD OF DIRECTORS ITS EVALUATION. THE EXECUTIVE COMMITTEE THEN SHARES ITS EVALUATION WITH THE PRESIDENT AND CEO.

THE EXECUTIVE COMMITTEE THEN CONSULTS COMPARABILITY SURVEYS TO DETERMINE THE PRESIDENT AND CEO'S COMPENSATION FOR THE NEXT YEAR.

FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY OF FORM 990:

AL, AK, AR, AZ, CA, CT, FL, GA, HI, IL, IN, KS, KY, ME, MD, MA, MI, MN, MS, NH, NJ, NM, NY, NC, ND

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OH, OK, PA, RI, SC, TN, UT, VA, WA, WV, WI

FORM 990, PART VI, SECTION C, LINE 19:

RIF SUBMITS ITS AUDITED FINANCIAL STATEMENTS, FEDERAL FORM 990 AND IRS LETTER OF DETERMINATION (OF RIF'S TAX EXEMPT STATUS) TO GUIDESTAR FOR PUBLICATION ON THAT SERVICE. RIF ALSO PUBLISHES ITS FEDERAL FORM 990 ON ITS OWN WEBSITE. TO DATE, RIF HAS NOT PUBLISHED ITS CONFLICT OF INTEREST POLICY FOR ACCESS BY THE GENERAL PUBLIC. ALL DOCUMENTS, INCLUDING OUR GOVERNING DOCUMENTS, THE FEDERAL FORMS 1023 AND 990-T ARE ALSO AVAILABLE UPON REQUEST.