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.

2017
Open to Public Inspection

A F	or the	2017 calendar year, or tax year beginning $OCT 1, 2017$ and	ending S	EP 30, 2018	
B c	heck if pplicable	C Name of organization		D Employer identifie	cation number
	Addres	READING IS FUNDAMENTAL, INC.			
	Name change	Doing business as		52-0	976257
	Initial return	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	E Telephone number	r
	Final return/		920	(877	
	termin- ated	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	11,660,867.
	Amendereturn	WASHINGTON, DC 20002		H(a) Is this a group re	
	Applica tion pending	,		for subordinates	
		SAME AS C ABOVE	507	H(b) Are all subordinates in	
		mpt status: X 501(c)(3)	or 527	1	list. (see instructions)
		organization: X Corporation Trust Association Other	I Voor	H(c) Group exemption 1973	N State of legal domicile: DC
		Summary	L TEAL	or formation. ± 2 7 3 N	a State of legal dominine. DC
		Briefly describe the organization's mission or most significant activities: MOTI	VATING	CHILDREN TO	READ BY
ce		MAKING READING A FUN AND BENEFICIAL PART			
Activities & Governance	-	Check this box if the organization discontinued its operations or dispos			sets.
Ve				3	9
Ğ	4 1	Number of independent voting members of the governing body (Part VI, line 1b)			9
es &	5 7	Fotal number of individuals employed in calendar year 2017 (Part V, line 2a)			33
viţi.		Fotal number of volunteers (estimate if necessary)			50010
Λcti		Total unrelated business revenue from Part VIII, column (C), line 12			0.
_	1 d	Net unrelated business taxable income from Form 990-T, line 34	·····		13,828.
				Prior Year	Current Year
ne		Contributions and grants (Part VIII, line 1h)		5,493,347. 522,974.	9,988,351. 721,089.
Revenue		Program service revenue (Part VIII, line 2g)		366,638.	443,040.
Re		nvestment income (Part VIII, column (A), lines 3, 4, and 7d)		-18,712.	443,040.
		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) Fotal revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		6,364,247.	11,152,480.
		Grants and similar amounts paid (Part IX, column (A), lines 1-3)		1,537,110.	1,403,311.
		Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.
"	45 0	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		2,259,780.	2,641,628.
Expenses	16 a F	Professional fundraising fees (Part IX, column (A), line 11e)		96,000.	171,733.
ber	b∃	Fotal fundraising expenses (Part IX, column (D), line 25)	63.		
ũ	17 (Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		3,076,616.	3,536,356.
	18 7	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		6,969,506.	7,753,028.
	19 F	Revenue less expenses. Subtract line 18 from line 12		-605,259.	3,399,452.
Net Assets or Fund Balances				ginning of Current Year	End of Year
sset: 3alar	20 7	Total assets (Part X, line 16)		10,345,218.	13,390,600.
et A	21	Fotal liabilities (Part X, line 26)		2,007,300. 8,337,918.	1,719,863.
Z_	22 N	Net assets or fund balances. Subtract line 21 from line 20		0,337,910.	11,670,737.
		ties of perjury, I declare that I have examined this return, including accompanying schedules	and stateme	ents, and to the hest of my	knowledge and helief it is
	-	, and complete. Declaration of preparer (other than officer) is based on all information of wh			knowledge and boller, it is
,	-	L Compositor Designation of property (containing smooth) to become on an information of the	non proparor	nae any anemeager	
Sigr	n	Signature of officer		Date	
Her		ALICIA LEVI, PRESIDENT AND CEO			
		Type or print name and title			
		Print/Type preparer's name Preparer's signature		Date Check Check	PTIN
Paid	-	FRANK H. SMITH Frank H. on	wth_ 0	2/04/19 self-employ	
		Firm's name MARCUM LLP		Firm's EIN ▶	11-1986323
Use	Only	Firm's address 1899 STREET, NW, SUITE 850			02\ 227 4000
N.A.c.	. +6 - 17	WASHINGTON, DC 20036		Phone no. (2	
ividy	์ แเษ IK	S discuss this return with the preparer shown above? (see instructions)			X Yes No

Check if Schedule Contains a response or note to any line in this Part III	Form	990 (2017) READING IS FUNDAMENTAL, INC.	52-0976257	Page 2
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 proof form 800 r890;27 If "Yes," describe these new services on Schedule O. 2 Did the organization case conducting, or make significant changes in how it conducts, any program services, as measured by expenses. 3 Did the organization sprame service specificant changes in how it conducts, any program services, as measured by expenses. 4 Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses. 4 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 resented, if any for each program service reports. 5 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 resented, if any for each program service reports. 5 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 resented, if any for each program service space and resented in the services. 5 Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses. 5 Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses. 5 Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses. 5 Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses. 5 Section 5	Pai	rt III Statement of Program Service Accomplishments		
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Form **990** (2017)

732002 11-28-17

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		Х
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? If "Yes," complete Schedule C, Part II	4		х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
_	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to	<u> </u>		
Ü	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	-		
′		7		х
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	- ′-		
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			х
_	Schedule D, Part III	8		
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?			3.7
	If "Yes," complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	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.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	Х	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		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? If "Yes," complete Schedule D, Part IX	11d		Х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	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)? If "Yes," complete Schedule D, Part X	11f	Х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes." complete			
	Schedule D. Parts XI and XII	12a	Х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
~	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,	- 14		
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
		14b		x
15	or more? If "Yes," complete Schedule F, Parts I and IV Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any	שדו		
13		45		х
16	foreign organization? If "Yes," complete Schedule F, Parts II and IV Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	15		-22
16		4.0		Х
4-	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		
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? If "Yes," complete Schedule G, Part I	17	X	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			77
	1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G. Part III	19	000	X
		Form	990	(クロ17)

Part IV Checklist of Required Schedules (continued)

			Yes	
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		_X_
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
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? If "Yes," complete Schedule I, Parts I and II	21	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? If "Yes," complete Schedule I, Parts I and III	22		_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? If "Yes," complete		v	
•	Schedule J	23	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? If "Yes," answer lines 24b through 24d and complete	24a		х
h	Schedule K. If "No", go to line 25a	24a 24b		
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	240		
C	, , ,	24c		
А	any tax-exempt bonds? Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	270		
200	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		Х
h	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and	200		
-	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes." complete			
	Schedule L. Part I	25b		Х
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? If "Yes."			
	complete Schedule L, Part II	26		Х
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? If "Yes," complete Schedule L, Part III	27		_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 current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		_X_
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		_X_
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	X	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			37
	contributions? If "Yes," complete Schedule M	30		<u> </u>
31	Did the organization liquidate, terminate, or dissolve and cease operations?			v
20	If "Yes," complete Schedule N, Part I Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes." complete	31		_X_
32	, ,	32		х
33	Schedule N, Part II Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	32		
55	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
٠.	Part V, line 1	34		Х
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		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? If "Yes," complete Schedule R, Part VI	37		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	38	X	<u> </u>
		_	agn.	(001=

Form 990 (2017) READING IS FUNDAMENTAL, INC. Part V Statements Regarding Other IRS Filings and Tax Compliance

a Gross income from members or shareholders b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 13 Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O. b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans c Enter the amount of reserves on hand 13b 13c 14a Did the organization receive any payments for indoor tanning services during the tax year? b If "Yes," has it filed a Form 720 to report these payments? If "No." provide an explanation in Schedule O. 14b		Check if Schedule O contains a response or note to any line in this Part V										
be Enter the number of Forms W2C included in line 1a. Enter-O if not applicable in Old the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambing) winnings to prize winness? 2a. Enter the number of employees reported on Form W3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 2b if at least one is reported on line 2a, did the organization file all required federal employment tax returns? 2b if a least one is reported on line 2a, did the organization file all required federal employment tax returns? 2c if was a least one is reported on line 2a, did the organization file all required federal employment tax returns? 2c if was a least one is reported on line 2a, did the organization flave in the control of the organization for the was a line organization and the control of the organization for the was a line organization for the payment of the organization for the was an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial accounts (FBAF). 5a Was the organization aparty to a prohibited tax shelter transaction at any time during the tax year? 5b Was the organization aparty to a prohibited tax shelter transaction at any time during the tax year? 5c If Yes, 1 of line Sa or Sb, did the organization file Form 8886.7? 5d Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charlable contributions? 6d Did the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that was required to the organization file form 8886.7? 7c Organizations that may receive deductible contributions under section 170(c). 8d If Yes, did the organization have excess of Si5 made pantly sa contributions and p				Yes	No							
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732005 11-28-17

READING IS FUNDAMENTAL, INC. 52-0976257 Form 990 (2017) 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 Section A. Governing Body and Management Yes No **1a** Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O. 9 **b** Enter the number of voting members included in line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other X officer, director, trustee, or key employee? 2 Did the organization delegate control over management duties customarily performed by or under the direct supervision 3 of officers, directors, or trustees, or key employees to a management company or other person? 3 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 Did the organization become aware during the year of a significant diversion of the organization's assets? Did the organization have members or stockholders? 6 Х 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? Х 7a b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? 8a **b** Each committee with authority to act on behalf of the governing body? 8b 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.) Did the organization have local chapters, branches, or affiliates?

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b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X	
b	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	12a	Х	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Х	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	in Schedule O how this was done	12c	Х	
13	Did the organization have a written whistleblower policy?	13	Х	
14	Did the organization have a written document retention and destruction policy?	14	Х	
15	Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Х	
b	Other officers or key employees of the organization	15b		X
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
	taxable entity during the year?	16a		Х
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b		

Section C. Disclosure

17	List the states with which a copy of this Form 990 is required to be filed $\triangleright P$	łL	, AK	, AR	,A2	I,CA	1,C	T,F	L,GA	HI,	,IL,	ΙN,	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.
	V

X Own website	Another's website	X Upon request		Other <i>(explain in Schedule</i> (
---------------	-------------------	----------------	--	-------------------------------------

20	State the name, address, and telephone number of the person who possesses the organization's books and records:
	ROMEO FERRUFINO - (877) 743-7323

STREET, NE, NO. 920, WASHINGTON, DC 20002 SEE SCHEDULE O FOR FULL LIST OF STATES

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.

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		orga T	niza			nper	sate			<u> </u>
(A)	(B)	(C) Position						(D)	(E)	(F)
Name and Title	Average		not c	heck	more	than o		Reportable	Reportable	Estimated
	hours per week			ss person is both an nd a director/trustee)				compensation from	compensation from related	amount of other
	(list any	tor						the	organizations	compensation
	hours for	r direc				ь		organization	(W-2/1099-MISC)	from the
	related	tee or	ustee			ensat		(W-2/1099-MISC)		organization
	organizations	altrus	nal tr		loyee	comp				and related
	below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			organizations
(1) JOHN REMONDI	4.50	트	트	5	포	王吉	7.			
CHAIRMAN	1130	х		х				0.	0.	0.
(2) CHRISTY MOBERLY	1.50	ļ —								
VICE CHAIRMAN		Х		х				0.	0.	0.
(3) J.J. JOHNSON	1.50									
SECRETARY		Х		Х				0.	0.	0.
(4) MARC WALBY	1.50									
TREASURER		Х		Х				0.	0.	0.
(5) KITTY KELLEY	1.50	1						_	_	_
DIRECTOR		Х						0.	0.	0.
(6) MATTHEW MCCORRY	1.50	J								
DIRECTOR		Х				_		0.	0.	0.
(7) EMILY MOORE	1.50	ļ								
DIRECTOR	1.50	Х				┝		0.	0.	0.
(8) CAROLYN SIMPSON	1.50	.,							_	
DIRECTOR	1 50	Х				┝		0.	0.	0.
(9) RICK ZIMMERMAN DIRECTOR	1.50	x						0.	0.	0.
(10) ALICIA LEVI	40.00	Λ				\vdash		· ·	0.	· ·
PRESIDENT AND CEO	40.00			х				287,500.	0.	6,170.
(11) BETH L. MEYER	40.00							207,300.	<u></u>	0,170.
CHIEF MARKETING OFFICER	40.00	1			Х			186,828.	0.	2,150.
(12) EDWARD DE LEON	40.00							100,0200	•	2,1300
CHIEF PROGRAM AND CONTENT OFFICER	1000					x		139,272.	0.	0.
(13) MARGARET M. CARTER, DIRECTOR	40.00					 				
OF ANNUAL GIVING - UNTIL 07/2018						X		137,172.	0.	7,146.
										,
		1								
		1								
		<u> </u>	_	_	_	₩				
		-								
										000

Par	Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)												
	(A)	(B)		(C)					(D)	(E)		(F)	
	Name and title	Average	(do			ition	າ than d	one	Reportable	Reportable	Es	stimate	ed
		hours per	box,	, unles	ss per	rson i	s both	n an	compensation	compensation	ar	nount	of
		week		cer an	id a di	lirecto	r/trus	tee)	from	from related		other	
		(list any	rector						the	organizations	l	npensa	
		hours for related	or di	96			ated		organization	(W-2/1099-MISC)	l .	rom th	
		organizations	ustee	trust		9	bens		(W-2/1099-MISC)		ı ~	janizat d relat	
		below	ual tr	tional		ploye	t con	_				u reiai anizati	
		line)	Individual trustee or director	nstitutional trustee	Officer	sy employee	Highest compensated employee	Former			l ola	ailizati	0113
				-			1 0						
1b	Sub-total								750,772.	0.	1	5,4	66.
	Total from continuation sheets to Part VII								0.	0.			0.
d	Total (add lines 1b and 1c)								750,772.	0.	1	5,4	66.
2	Total number of individuals (including but no	ot limited to th	ose	liste	d ab	oove) wh	o re	ceived more than \$100,	000 of reportable			
	compensation from the organization												4
												Yes	No
3	Did the organization list any former officer,	director, or tru	stee	e, ke	y en	nplo	yee,	or h	nighest compensated er	nployee on			
	line 1a? If "Yes," complete Schedule J for su	uch individual									3_		X
4	For any individual listed on line 1a, is the su												
	and related organizations greater than \$150	0,000? If "Yes,	" co	mple	ete S	Sche	edule	Jf	or such individual		4	Х	
5	Did any person listed on line 1a receive or a	ccrue compen	satio	on fr	om	any	unre	elate	ed organization or individ				
	rendered to the organization? If "Yes." com	plete Schedule	Jf	or su	ıch <u>ı</u>	oers	on .				5		X
	tion B. Independent Contractors												
1	Complete this table for your five highest cor	•	-							· · · · ·	tion fr	om	
	the organization. Report compensation for t	he calendar ye	ear e	ndir	ng w	ith c	or wi	thin T	the organization's tax y	ear.			

(A)	(B)	(C)
Name and business address	Description of services	Compensation
D'VINCI INTERACTIVE, 28 SOUTH POTOMAC	PROFESSIONAL	
STREET, 4TH FLOOR, HAGERSTOWN, MD 21740	CONSULTING	458,310.
ONE SOURCE PRODUCTION	MAILING LIST	
38590 BETTIS DRIVE, HAMILTON, VA 20158	MANAGEMENT	245,048.
BDO USA, LLP, 8401 GREENSBORO DRIVE, SUITE	PROFESSIONAL	
800, MCLEAN, VA 22102	CONSULTING	180,000.
LAUTMAN MASKA NEILL & CO, 1730 RHODE	PROFESSIONAL	
ISLAND AVENUE, NW, WASHINGTON, DC 20036	FUNDRAISING	133,800.
DIANE LONSDALE, 3930 WORTHINGTON AVENUE,	PROFESSIONAL	
REITERSTOWN, MD 21136	CONSULTING	106,408.
2 Total number of independent contractors (including but not limited to those liste	d above) who received more than	
\$100,000 of compensation from the organization \blacktriangleright		
	<u> </u>	000

Form 990 (2017) READ ING Part VIII Statement of Revenue

		Check if Schedule O cont	ains a response	or note to any lin	e in this Part VIII			
		3.33.4 23	<u></u>	<u> </u>	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
(0.10	4 -	Fadanatad sananaiana	 a_	67,513.		Teveride	Tevende	512 - 514
ints		Federated campaigns		07,313.				
Gra		Membership dues						
Contributions, Gifts, Grants and Other Similar Amounts		Fundraising events						
ia i		Related organizations	1d	654 056				
ns, Sim		Government grants (contributi		654,956.				
er S	f	All other contributions, gifts, gran		265 002				
현된		similar amounts not included above						
ont od (Noncash contributions included in lines	•	448,761.	0 000 251			
<u>0</u> <u>6</u>	h	Total. Add lines 1a-1f		1	9,988,351.			
				Business Code		E00 200		
<u>ic</u>		READ FOR SUCCES		900099	598,399.	598,399.		
erv		TRAINING PROGRA		900099	112,558.	112,558.		
n S	С	MANAGEMENT FEES		900099	10,132.	10,132.		
iran 3ev	d							
Program Service Revenue	е							
		All other program service reve			701 000			
		Total. Add lines 2a-2f			721,089.			
	3	Investment income (including			102 400			102 400
	_	other similar amounts)			102,488.			102,488.
	4	Income from investment of tax						
	5	Royalties						
		_	(i) Real	(ii) Personal				
		Gross rents						
		Less: rental expenses						
		Rental income or (loss)						
		Net rental income or (loss)						
	7 a	Gross amount from sales of	(i) Securities	(ii) Other				
		•	848,939.					
	D	Less: cost or other basis	509 397					
		and sales expenses Gain or (loss)	240 552					
	С.	Gain or (loss)	540,552.		340,552.			340,552.
		Net gain or (loss)		>	340,332.			340,332.
ne	8 а	Gross income from fundraising	`					
/en		including \$						
Re		contributions reported on line	•					
Other Revenu	h	Part IV, line 18						
ᅙ		Less: direct expenses Net income or (loss) from fund						
		Gross income from gaming ac						
	Эа	• •						
	h	Part IV, line 19						
		Net income or (loss) from gam						
		Gross sales of inventory, less	-					
	и а	• •						
	h	and allowances Less: cost of goods sold						
		Net income or (loss) from sale						
ŀ		Miscellaneous Revenue		Business Code				
ŀ	11 2			Duomiess Oode				
	n a							
	c							
		All other revenue						
		Total. Add lines 11a-11d						
	12	Total revenue. See instructions.			11152480.	721,089.	0.	443,040.

Form 990 (2017) READING IS FU. Part IX Statement of Functional Expenses

Do not include amounts reported on lines 60, 26, 80, 90, and 100 of Part VIII.	Secti	ion 501(c)(3) and 501(c)(4) organizations must comp Check if Schedule O contains a respon		-	nplete column (A).	
1 Grants and other assistance to domestic organizations and dimensite powerments. See Part IV, line 21 1,403,311. 1,403,311. 1,40		not include amounts reported on lines 6b,	(A)	(B) Program service	Management and	Fundraising
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 officens, directors, trustees, and key employees 6 Compensation on included above, to disqualified persons (as defined under section 4958(I)(1)) and persons described in section 4958(I)(1)) and persons described in section 4958(I)(1)) and persons described and lines and varges 8 Pension plan accrusis and contributions (include section 4958(I)(1)) and 409(b) employer contributions) 9 Other employee benefits 141,526. 29,452. 7,055. 9,155 9 Other employee benefits 141,526. 91,284. 21,866. 28,376 10 Payyotil taxes 168,435. 108,641. 26,023. 33,771 11 Fees for services (non-employees): 18 Management 19 Logal 50,995. 50,995. 218,949. 328,949. 328,949. 218,949. 328,949. 328,949. 218,949. 328,949. 328,949. 218,949. 328,949. 328,949. 218,949. 328,949. 328,949. 218,949. 328,949. 328,949. 328,949. 218,949. 328,949. 328,949. 328,949. 218,949. 328,949. 328,949. 328,949. 218,949. 328,949. 328,949. 328,949. 218,949. 328,949. 328,949. 328,949. 218,949. 328,949. 328,949. 328,949. 218,949. 328,949. 328,949. 328,949. 218,949. 328,949. 328,949. 328,949. 218,949. 328,949. 328,949. 328,949. 218,949. 328,949. 328,949. 328,949. 218,949. 328,949. 328,949. 328,949. 218,949. 328,949. 328,949. 328,949. 218,949. 328,949. 3	1	Grants and other assistance to domestic organizations			-	
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 pad to or for members 5 Compensation of current officers, directors, trustees, and key emptyoges 6 Compensation or included above, to disqualified persons (as defined under section 4860f(1)) and persons described in section 4958(n)(3)(8) 7 Other salaries and wages 8 Persiotin pilal accruals and contributions (include section 401(k)) and 40(b) employer contributions section 401(k) and 40(b) employer contributions 141,526. 91,284. 21,866. 28,376 10 Payroll taxes 10 Payroll taxes 11 Fees for services (non-employees): 12 Management 13 Logal 14 Logal 15 O, 995. 50,995. 16 Accounting 16 Logal 17 Protestional fundasing services. See Part IV, line 17 17 Investment management fees 17 Other (in the 11g amount exceeds 10% of line 25, column (A) amount, list lite 11g expenses on Sch Q, 243,153. 10,120. 3,027. 230,006 13 Office expenses 13 O2,291. 187,944. 19,345. 95,002 14 Advertising and promotion to chnology 14 Advertising and promotion to chnology 15 Poynetis of travel or entertainment expenses for any feedral, adeptic, and meetings 17 Tavel 16 Occupancy 17 Tavel 18 Payments of travel or entertainment expenses for any feedral, adeptic, and meetings 17,478. 32,480. 14,348. 650 18 Payments of travel or entertainment expenses for any feedral, adeptic, or local public officials 19 Conferences, conventions, and meetings 19,688. 12,698. 3,042. 3,948 19 Poyments to affiliates 10 Deposition, depletion, and amortization 19,688. 12,698. 3,042. 3,948 10 Interest. Intrinse depenses. Rod lines 1 through 246. 344,1294. 441,29		and domestic governments. See Part IV, line 21	1,403,311.	1,403,311.		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16	2	Grants and other assistance to domestic				
Compensation of current officers, directors, trustees, and key employees trustees and key employees trustees and key employees and key employees trustees and key employees trustees and key employees and key employees and key employees trustees and key employees		individuals. See Part IV, line 22				
Individuals, See Part W, lines 15 and 16 See Heart W, lines 15 See Heart W, lines 17 See Heart W, lines 18 See Heart W, lines 18 See Heart W, lines 19 See H	3	Grants and other assistance to foreign				
## Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees Compensation of current officers, directors, trustees, and key employees Compensation not included above, to disqualified persons (as defined under section 4586(k)(3)(8) Persons described in section 4586(k)(3)(8) Person plan accruals and contributions (include section 401(k) and 405(k) employer contributions section 401(k) and 405(k) employer contributions (section 401(k) and 405(k) employer contributions section 401(k) and 405(k) employer contributions (section 401(k) and 401(k) employer contributions (section 401(k) employer contributions (section 401(k) employer contributions (section 401(k) employer contributions (section 401(organizations, foreign governments, and foreign				
5 Compensation of current officers, directors, trustees, and key employees trustees, and key employees persons (as defined under section 4958(f)(1)) and persons described in section 4958(f)(1)) and 493(f) employer contributions (include section 401(k) and 493(f) employer contributions (include section 401(k) and 493(f) employer contributions (include section 401(k) and 493(f) employer contributions (include section 4958(f)(1)) and 493(f) employer contributions (include section 4958(f)(1) and 493(f) employer contributions (include section 4958(f)(1) and 493(f) employer contributions (include section 4958(f) employer contrib						
trustees, and key employees	4					
6 Compensation not included above, to disqualified persons (as defined under section 4958(r)(3)(8) 7 Other salaries and wages 8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions (include section 401(k) employer employer entribution (included section 401(k) employer employer (included section 401(k) employer (included section 401(k) employer (included 401(k) employer (included section 401(k) employer (includ	5		-06 600	225	50.050	404 554
persons (as defined under section 4958(c)(3)(B) 7 Other salaries and wages 8 Pension plan accruals and contributions (include section 40)(E) and 400(b) employer contributions) 9 Other employee benefits 1			506,603.	326,759.	78,270.	101,574.
persons described in section 4958(c)(3)(B) 7 Other salaries and wages 8 Pension plan accruals and wages 9 Pension plan accruals and valotic brillotions (include section 401(k) and 401(k) employer contributions) 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 1	6					
7 Other salaries and wages 8 Pension plan accruals and contributions (include section 401k) and 400t) employer contributions) 9 Other employee benefits 1 41,526. 29,452. 7,055. 9,155 1 41,526. 91,284. 21,866. 28,376 1 7,005. 9,155 1 141,526. 91,284. 21,866. 28,376 1 184,435. 108,641. 26,023. 33,771 1 Fees for services (non-employees): a Management b Legal 50,995. 50,995. c Accounting 1 218,949. 218,949. d Lobbying 2 218,949. 218,949. d Lobbying 2 218,949. 218,949. d Lobbying 1 19 mount exceeds 10% of line 25, column (A) amount, list line 11g expenses on School, 243,153. 10,120. 3,027. 230,006 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 16 Royaltes 9 0,851. 80,055. 4,295. 6,501 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 1 line 24e. Fline 24e amount exceeds 10% of line 25, column (A) amount, list line 24e. Fline 24e amount exceeds 10% of line 25, column (A) amount, list line 24e. Expenses on School, 247,478. 32,480. 14,348. 650 1 Interest 1 Payments to affiliates 1 Payments of travel or entertainment expenses for any federal, state, or local public officials 1 line 24e. Fline 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule () a PRINTING & PRODUCTION 580,099. 328,623. 4,612. 246,864 24 Other expenses. Line 24e. Fline 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule () A amount, list line 24e. Schedule () A line 24e. Fline 24e amount exceeds 10% of line 25, column (A) amount, list line 24e. Fline 24e amount exceeds 10% of line 25, column (A) amount, list line 24e. Fline 24e amount exceeds 10% of line 25, column (A) amount, list line 24e. Fline 24e amount exceeds 10% of line 25, column (A) amount, list line 24e. Fline 24e amount exceeds 10% of line 25, column (A) amount, list line 24e. Fline 24e amount exceeds 10% of l						
8 Pension plan accruals and contributions (include section 401(k) employer contributions) 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 150,995. 50,995. c Accounting 4 Lobbying Professional fundralising services. See Part IV, line 17 Investment management fees 9 Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch 0.) 1243,153. 10,120. 3,027. 230,006 13 Office expenses 106 Occupancy 17 Travel 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 19 Conferences, conventions, and meetings 10 Interest 11 Payments to affiliates 12 Payments to affiliates 18 Payments of travel or, and meetings 19 Conferences, conventions, and meetings 10 Interest 11 Payments to affiliates 20 Depreciation, depletion, and amortization 11 Insurance 21 Payments of timilates 22 Depreciation, depletion, and amortization 23 John costs. Complete this line 24e, penses on Sch 0.) 24 John costs. Complete this line only if the organization reported in column (B) joint costs from a combined		. , , , , ,	1 770 400	1 1 4 7 5 7 1	274 027	256 004
Section 401(k) and 403(b) employer contributions 45,662			1,//9,402.	1,14/,5/1.	2/4,93/•	330,894.
9 Other employee benefits	8	· · · · · · · · · · · · · · · · · · ·	15 662	20 452	7 055	0 155
10	_				7,055.	7,100.
11 Fees for services (non-employees): a Management						20,370.
a Management b Legal			100,433.	100,041.	20,023.	JJ, 1111•
Description Superint Superi		-				
c Accounting d Lobbying Professional fundraising services. See Part IV, line 17			50 995.		50 995.	
d Lobbying e Professional fundraising services. See Part IV, line 17 f Investment management fees g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch 0.) 12 Advertising and promotion 13 Office expenses 13 02, 291. 187, 944. 19, 345. 95, 002 14 Information technology 15 Royalties 16 Occupancy 17 Travel 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 19 Conferences, conventions, and meetings 10 Interest 11 Payments to affiliates 12 Depreciation, depletion, and amortization 18 Insurance 19 Depreciation, depletion, and amortization 19 Agrantis of travel or expenses in line 24e, if line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses shot covered above, (List miscellaneus expenses in line 24e, if line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses and covered adverses on School of the expenses and covered above, (List miscellaneus expenses in line 24e, if line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses and covered adverses on School of the expenses on School of the expense of School of						
e Professional fundraising services. See Part IV, line 17 f Investment management fees g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch 0.) 2 Advertising and promotion 2 43, 153. 10, 120. 3, 027. 230, 006 3 Office expenses 3 02, 291. 187, 944. 19, 345. 95, 002 4 Information technology 4 29, 864. 345, 312. 57, 817. 26, 735 Royalties 6 Occupancy 3 08, 198. 198, 771. 47, 619. 61, 808 17 Travel 9 0, 851. 80, 055. 4, 295. 6, 501 8 Payments of travel or entertainment expenses for any federal, state, or local public officials Conferences, conventions, and meetings 47, 478. 32, 480. 14, 348. 650 2 Interest 1 Payments to affiliates 2 Depreciation, depletion, and amortization 1 Insurance 1 Payments to affiliates 2 Depreciation, depletion, and amortization 1 Insurance 2 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 Schoule 0.) a PRINTING & PRODUCTION b BOOKS-LOCAL RIF PRGMS. c c d e All other expenses Total functional expenses. Add lines 1 through 24e 5 Total functional expenses. Add lines 1 through 24e 26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined			210 / 3 13 1		210/3131	
The street management fees 26,482. 26,482. 3 26,482. 3 3 3 3 3 3 3 3 3			171.733.			171.733.
Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch 0.) 596,127. 287,081. 182,076. 126,970					26.482.	
column (A) amount, list line 11g expenses on Sch 0.) Advertising and promotion 243,153. 10,120. 3,227. 230,006 302,291. 187,944. 19,345. 95,002 Information technology 429,864. 345,312. 57,817. 26,735 Royalties Cocupancy 308,198. 198,771. 47,619. 61,808 Travel 90,851. 80,055. 4,295. 6,501 Payments of travel or entertainment expenses for any federal, state, or local public officials Conferences, conventions, and meetings 47,478. 32,480. 14,348. 650 Interest Payments to affiliates Payments to affiliates Depreciation, depletion, and amortization 180,887. 116,661. 27,950. 36,276 Insurance 19,688. 12,698. 3,042. 3,948 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 19% of line 25, column (A) amount, list line 24e expenses on Schedule 0.) PRINTING & PRODUCTION 580,099. 328,623. 4,612. 246,864 BOOKS-LOCAL RIF PRGMS. 441,294. 441,294. All other expenses 25 Total functional expenses. Add lines 1 through 24e All other expenses 25 Total functional expenses. Add lines 1 through 24e All other expenses 25 Total functional expenses. Add lines 1 through 24e All other expenses 25 Total functional expenses. Add lines 1 through 24e All other expenses 25 Total functional expenses. Add lines 1 through 24e All other expenses 25 Total functional expenses. Add lines 1 through 24e All other expenses 25 Total functional expenses. Add lines 1 through 24e All other expenses 25 Total functional expenses. Add lines 1 through 24e All other expenses 25 Total functional expenses. Add lines 1 through 24e All other expenses 25 Total functional expenses. Add lines 1 through 24e All other expenses 25 Total functional expenses. Add lines 1 through 24e All other expenses 25 Total functional expenses. Add lines 1 through 24e All other expenses 25 Total functional expenses. Add lines 1 through 24e						
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	9		596,127.	287,081.	182,076.	126,970.
13 Office expenses 302,291. 187,944. 19,345. 95,002 14 Information technology 429,864. 345,312. 57,817. 26,735 15 Royalties 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 10 Interest 20 Interest 27,950. 36,276 21 Payments to affiliates 20 Expenses Interest 24. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.) 2	12	· ·				
Information technology						95,002.
15 Royalties 308,198. 198,771. 47,619. 61,808 17 Travel 90,851. 80,055. 4,295. 6,501 8 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 14 14,348. 650 15 15 15 15 15 15 15	14		429,864.	345,312.	57,817.	26,735.
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 10 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 0.) a PRINTING & PRODUCTION 580,099. 328,623. 4,612. 246,864 b BOKS-LOCAL RIF PRGMS. 441,294. 441,294. c d e All other expenses 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	15					
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 10 Interest	16		308,198.	198,771.	47,619.	61,808.
18	17		90,851.	80,055.	4,295.	6,501.
19 Conferences, conventions, and meetings	18					
20		for any federal, state, or local public officials				
Payments to affiliates Depreciation, depletion, and amortization 180,887	19	Conferences, conventions, and meetings	47,478.	32,480.	14,348.	650.
Depreciation, depletion, and amortization 180,887. 116,661. 27,950. 36,276 19,688. 12,698. 3,042. 3,948 19,688. 12,698. 3,042. 3,948 19,688. 12,698. 3,042. 3,948 19,688. 12,698. 3,042. 3,948 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 0.) PRINTING & PRODUCTION 580,099. 328,623. 4,612. 246,864 BOOKS-LOCAL RIF PRGMS. 441,294. 441,294. C d All other expenses Total functional expenses. Add lines 1 through 24e 7,753,028. 5,148,057. 1,068,708. 1,536,263 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined	20					
19,688. 12,698. 3,042. 3,948	21		100 00=	44.5.55	05.000	
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 0.) a PRINTING & PRODUCTION b BOOKS-LOCAL RIF PRGMS. c d	22	Depreciation, depletion, and amortization				
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 0.) a PRINTING & PRODUCTION b BOOKS-LOCAL RIF PRGMS. c d e All other expenses 25 Total functional expenses. Add lines 1 through 24e 26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined			19,688.	12,698.	3,042.	3,948.
a PRINTING & PRODUCTION b BOOKS-LOCAL RIF PRGMS. c	24	above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A)				
b BOOKS-LOCAL RIF PRGMS. d	а		580.099.	328,623.	4,612.	246,864.
c d d d d d d d d d d d d d d d d d d d	-				-,	
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						
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		All other expenses				
Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined			7,753,028.	5,148,057.	1,068,708.	1,536,263.
			-	-	-	-
		reported in column (B) joint costs from a combined				
educational campaign and fundraising solicitation.		educational campaign and fundraising solicitation.				
			174,779.	93,800.	0.	80,979.
732010 11-28-17 Form 990 (201)	732010	0 11-28-17				Form 990 (2017)

Pai	rt X	Balance Sheet					
		Check if Schedule O contains a response or not	e to an	y line in this Part X			
					(A) Beginning of year		(B) End of year
	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 fo			·		
	-	trustees, key employees, and highest compensa		, , , , , , , , , , , , , , , , , , ,			
		Part II of Schedule L		· ·		5	
	6	Loans and other receivables from other disqualit					
		section 4958(f)(1)), persons described in section	-	· ·			
		employers and sponsoring organizations of sect					
w		employees' beneficiary organizations (see instr).		·		6	
Assets	7	Notes and loans receivable, net				7	
As	8	Inventories for sale or use			54,000.	8	148,105.
	9				142,276.	9	148,105. 98,358.
	10a	Land, buildings, and equipment: cost or other			·		,
		basis. Complete Part VI of Schedule D	10a	1,360,319.			
	ь	basis. Complete Part VI of Schedule D Less: accumulated depreciation	10b	208,916.	1,191,526.	10c	1,151,403.
	11	Investments - publicly traded securities			1,191,526. 5,144,350.	11	1,151,403. 8,035,681.
	12	Investments - other securities. See Part IV, line 1				12	
	13	Investments - program-related. See Part IV, line				13	
	14	Intangible assets				14	
	15	Other assets. See Part IV, line 11			219,016.	15	84,296.
	16	Total assets. Add lines 1 through 15 (must equal			10,345,218.	16	13,390,600.
	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 I				21	
ű	22	Loans and other payables to current and former	officer	s, directors, trustees,			
<u>i</u> tie		key employees, highest compensated employee	s, and	disqualified persons.			
Liabilities		Complete Part II of Schedule L				22	
⋍	23	Secured mortgages and notes payable to unrela				23	
	24	Unsecured notes and loans payable to unrelated	d third	oarties		24	
	25	Other liabilities (including federal income tax, pa	yables	to related third			
		parties, and other liabilities not included on lines	17-24)	. Complete Part X of			
		Schedule D			736,821.	25	889,351. 1,719,863.
	26				2,007,300.	26	1,719,863.
		Organizations that follow SFAS 117 (ASC 958		k here ▶ X and			
es		complete lines 27 through 29, and lines 33 an	d 34.		4 510 104		T 046 060
ů	27				4,712,104.	27	7,946,063.
3ak	28	•			3,034,204.	28	3,133,064.
둳	29	•			591,610.	29	591,610.
Ξ	Organizations that do not follow SFAS 117 (ASC 958), check here						
ō		and complete lines 30 through 34.					
ets	30	Capital stock or trust principal, or current funds				30	
Ass	31	Paid-in or capital surplus, or land, building, or ed				31	
Net Assets or Fund Balances	32	Retained earnings, endowment, accumulated in			0 227 010	32	11 670 727
~	33				8,337,918.	33	11,670,737.
	34	Total liabilities and net assets/fund balances			10,345,218.	34	13,390,600.

Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI		<u></u>		
1	Total revenue (must equal Part VIII, column (A), line 12)	1	11,15	2,4	<u>80.</u>
2	Total expenses (must equal Part IX, column (A), line 25)	2	7,75		
3	Revenue less expenses. Subtract line 2 from line 1	3	3,39		
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	8,33		
5	Net unrealized gains (losses) on investments	5	- 6	6,6	<u>33.</u>
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	11,67	0,7	<u>37.</u>
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	Э.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	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?		2b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate				
	consolidated basis, or both:				
	X Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	audit,			
	review, or compilation of its financial statements and selection of an independent accountant?		2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sche				
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sin				
	Act and OMB Circular A-133?	-	3a		Х
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	ed audit			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		

SCHEDULE A

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

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

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Open to Public Inspection

Employer identification number Name of the organization READING IS FUNDAMENTAL, 52-0976257 Reason for Public Charity Status (All organizations must complete this part.) See instructions Part I The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). X An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or 10 An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations Provide the following information about the supported organization(s). (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other n your governing document? (described on lines 1-10 organization support (see instructions) support (see instructions) above (see instructions))

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

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

Sec	etion A. Public Support	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	1	,			_
	ndar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
	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 organ-						
	ization'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	10757756	E701E44	E274220	E402247	0000251	27205226
	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.
Sec	tion B. Total Support						
Cale	ndar 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,	000 156	040 210	017 705	005 017	100 400	2002604
	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	3,158.	5,063.				8,221.
10	business is regularly carried on Other income. Do not include gain	3,130.	3,003.				0,221.
10	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.
	Gross receipts from related activities,	etc. (see instruction	ns)				,111,554.
13	First five years. If the Form 990 is fo	r the organization's	first, second, third	d, fourth, or fifth ta	x year as a section	501(c)(3)	
	organization, check this box and sto						>
	tion C. Computation of Publ						
	Public support percentage for 2017 (14	68.67 %
	Public support percentage from 2016					15	63.26 %
16a	33 1/3% support test - 2017. If the						▶ [₹]
	stop here. The organization qualifies		-				
b	33 1/3% support test - 2016. If the						
47-	and stop here. The organization qua						
1/a	10% -facts-and-circumstances test	_					
	and if the organization meets the "fact meets the "facts-and-circumstances"				· · · · · · · · · · · · · · · · · · ·	-	
h	10% -facts-and-circumstances test						
J	more, and if the organization meets the	_					
	organization meets the "facts-and-circ						
18	Private foundation. If the organization			•			. —
	J		,				

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.)

Se	ction A. Public Support						
Cale	ndar 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 per- formed, 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 organ- ization'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						
7	Amounts included on lines 1, 2, and 3 received from disqualified persons						
ı	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						
•	Add lines 7a and 7b						
	Public support. (Subtract line 7c from line 6.) ction B. Total Support						L
Cale	ndar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
	Amounts from line 6						
ŀ	Unrelated business taxable income (less section 511 taxes) from businesses						
	acquired after June 30, 1975						
	Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)				1		<u> </u>
14	First five years. If the Form 990 is for	•		*	•		
<u>C-</u>	check this box and stop here						>
	ction C. Computation of Publi					 	
15	Public support percentage for 2017 (I			olumn (f))		15	<u>%</u>
16	Public support percentage from 2016					16	%
_	ction D. Computation of Inves			40		14-1	
	Investment income percentage for 20					17	<u>%</u>
	Investment income percentage from					18	<u>%</u>
19	a 33 1/3% support tests - 2017. If the						. —
ı	more than 33 1/3%, check this box ar 33 1/3% support tests - 2016. If the	organization did r	not check a box on	line 14 or line 19a	a, and line 16 is mo	ore than 33 1/3%, a	and
	line 18 is not more than 33 1/3%, che	ck this box and st	t op here. The orga	nization qualifies a	as a publicly suppo	orted organization	
20	Drivate foundation If the organization	n did not chack a	boy on line 14, 10	or 10h chock th	nic boy and soo in	etructions	▶ 7

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

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- **3a** Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.
- **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)? If "Yes," describe in **Part VI** when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- **4a** Was any supported organization not organized in the United States ("foreign supported organization")? *If* "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in **Part VI** how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- 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)? 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.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **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? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 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))? If "Yes," provide detail in Part VI.
- **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? *If* "Yes," provide detail in **Part VI.**
- 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? If "Yes," provide detail in Part VI.
- 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)? If "Yes," answer 10b below.
 - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

	Yes	No
1		
2		
3a		
3b		
3с		
4a		
4b		
4c		
10		
5a		
- Ch		
5b 5c		
30		
6		
7		
8		
9a		
9b		
0-		
9c		
40		
10a		
10b		
990 or 99	0-EZ)	2017

Pai	Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
	below, the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		
Sec	ction B. Type I Supporting Organizations			
	·		Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Sec	ction C. Type II Supporting Organizations			
	· ·		Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Sec	ction 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	4		
_	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how	_		
2	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard	3		
Sec	supported organizations played in this regard. Stion 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				
b				
c		uctions)		
2	Activities Test. Answer (a) and (b) below.	401.07.07	Yes	No
а				
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
b				
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			
	reasons for the organization's position that its supported organization(s) would have engaged in these			
	activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer (a) and (b) below.			
а				
	trustees of each of the supported organizations? Provide details in Part VI.	3a		
b				
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		

Pai	rt V Type III Non-Functionally Integrated 509(a)(3) Supportin	g Organi	izations	
1	Check here if the organization satisfied the Integral Part Test as a qualifyin	g trust on N	Nov. 20, 1970 (explain in F	Part VI.) See instructions. Al
	other Type III non-functionally integrated supporting organizations must co	mplete Sec	ctions A through E.	
Sect	ion 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		
Sect	ion 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		
с	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	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		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions)	6		
7	Check here if the current year is the organization's first as a non-functional	ly integrate	d Type III supporting orga	nization (see

Schedule A (Form 990 or 990-EZ) 2017

instructions).

Par	TV │ Type III Non-Functionally Integrated 509(a)(3) Supporting Orga	nizations _(continued)	
Secti	on D - Distributions			Current Year
1	Amounts paid to supported organizations to accomplish exer	mpt purposes		
2	Amounts paid to perform activity that directly furthers exemp	t purposes of supported		
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purpose	es of supported organizations	3	
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	ne 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			
Secti	on 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 (reason-			
	able cause required- explain in Part VI). See instructions.			
3	Excess distributions carryover, if any, to 2017			
а				
b	From 2013			
С	From 2014			
d	From 2015			
е	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: \$			
а	Applied to underdistributions of prior years			
b	Applied to 2017 distributable amount			
С	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:			
а	Excess from 2013			
b	Excess from 2014			
С	Excess from 2015			
d	Excess from 2016			
е	Excess from 2017			

Schedule A (Form 990 or 990-EZ) 2017

Part IV, Section A, li line 1; Part IV, Section	nformation. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; nes 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, on 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, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information.
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.

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

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

Organiza	ation type (check or	ie):
Filers of	:	Section:
Form 99	0 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 99	0-PF	501(c)(3) exempt private foundation
		4947(a)(1) nonexempt charitable trust treated as a private foundation
		501(c)(3) taxable private foundation
	nly a section 501(c)(7	covered by the General Rule or a Special Rule. 7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.
	-	filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.
Special	Rules	
X	sections 509(a)(1) a any one contributor	described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under nd 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 , 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; line 1. Complete Parts I and II.
	year, total contribut	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the ions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for uelty to children or animals. Complete Parts I, II, and III.
	year, contributions is checked, enter he purpose. Don't com	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box ere the total contributions that were received during the year for an exclusively religious, charitable, etc., uplete any of the parts unless the General Rule applies to this organization because it received nonexclusively, etc., contributions totaling \$5,000 or more during the year
but it mu	ust answer "No" on I	at isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), 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 le filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

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

Name of organization Employer identification number

READING IS FUNDAMENTAL, INC.

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		
1		\$ 3,504,956.	Person X Payroll Noncash (Complete Part II for noncash contributions.)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
2		\$ 2,009,500.	Person X Payroll Noncash (Complete Part II for noncash contributions.)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
3		\$ 285,396.	Person X Payroll		
(a)	(b)	(c)	(d)		
No. 4	Name, address, and ZIP + 4	Total contributions \$ 250,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)		

Name of organization Employer identification number

READING IS FUNDAMENTAL, INC.

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
		 	_
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
—			
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
	17		990 990-F7 or 990-PF\ (2017)

lame of orga	nization		Employer identification number					
READIN	G IS FUNDAMENTAL, INC.			52-0976257				
Part III	Exclusively religious, charitable, etc., contributhe year from any one contributor. Complete colu	tions to organizations described	in section 501(c)(7), (8), or	(10) that total more than \$1,000 for				
	completing Part III, enter the total of exclusively religious, c	haritable, etc., contributions of \$1,000 or	r less for the year. (Enter this info. onc	e.) > \$				
(a) No.	Use duplicate copies of Part III if additional s	pace is needed.						
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	cription of how gift is held				
.								
-								
		(e) Transfer of gi	ft					
	Transferee's name, address, and	ZIP + 4	Relationship of tra	nsferor to transferee				
(a) No.								
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	cription of how gift is held				
.								
-								
		(e) Transfer of gi	ft					
	Transferee's name, address, and	Relationship of tra	nsferor to transferee					
(a) No.								
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	cription of how gift is held				
	(e) Transfer of gift							
	Transferee's name, address, and	7ID ± 1/1	Relationship of tra	nsferor to transferee				
	Transièree 3 name, audress, and		Heladoliship of tra					
-								
(a) No. from	(h) Duman a Call	(-)11 (-)2	(05	minution of horse of the Late				
Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	cription of how gift is held				
	-							
— ·	-							
_								
		(e) Transfer of gi	ft					
	Transferee's name, address, and	7IP + 4	Relationship of transferor to transferee					
	mandiere o manie, audress, dilu	<u> </u>	Heladonalily of tra					
1								

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 Open to Public Inspection

Name of the organization

READING IS FUNDAMENTAL, INC.

Employer identification number 52-0976257

Pai	rt I Organizations Mair	ntaining Donor Advised	Funds or Other Similar Funds	or Accounts	Complete if the
	organization answered "Y	es" on Form 990, Part IV, line	6.		
			(a) Donor advised funds	(b) Funds	and other accounts
1	Total number at end of year				
2	Aggregate value of contributions				
3	Aggregate value of grants from (during year)			
4	Aggregate value at end of year				
5	Did the organization inform all de	onors and donor advisors in w	riting that the assets held in donor advis	ed funds	
	are the organization's property,	subject to the organization's e	xclusive legal control?		Yes No
6	Did the organization inform all gr	rantees, donors, and donor ad	visors in writing that grant funds can be	used only	
	for charitable purposes and not	for the benefit of the donor or	donor advisor, or for any other purpose	conferring	
					Yes No
Pai	rt II Conservation Ease	ments. Complete if the organic	anization answered "Yes" on Form 990,	Part IV, line 7.	
1	Purpose(s) of conservation ease	ments held by the organizatio	n (check all that apply).		
	Preservation of land for pu	iblic use (e.g., recreation or ec	lucation) Preservation of a his	torically importan	t land area
	Protection of natural habit	at	Preservation of a cer	tified historic stru	ıcture
	Preservation of open space	е			
2	Complete lines 2a through 2d if	the organization held a qualific	ed conservation contribution in the form	of a conservation	easement on the last
	day of the tax year.				eld at the End of the Tax Year
а	Total number of conservation ea	sements		2a	
b	, , , , , , , , , , , , , , , , , , , ,				
С			cture included in (a)		
d			ter 7/25/06, and not on a historic structu		
3		ents modified, transferred, rele	ased, extinguished, or terminated by the	organization dur	ring the tax
	year ▶				
4	Number of states where property	•			
5			odic monitoring, inspection, handling of		
_	violations, and enforcement of the				
6	Starr and volunteer nours devote	ea to monitoring, inspecting, r	andling of violations, and enforcing cons	servation easeme	ents during the year
7	Amount of overages incomed in	monitoring inapacting bandli	ng of violations, and enforcing conserva	tion occoments d	luring the year
7		monitoring, inspecting, nandi	ng of violations, and enforcing conserva	tion easements c	luring the year
	Door such consequation accome	— unt reported on line 2(d) above	satisfy the requirements of section 170	'b\/4\/D\/i\	
8					Yes No
9			n easements in its revenue and expense		
3			on's financial statements that describes		
	conservation easements.	the rectificte to the organization	on a mandal statements that describes	the organization	o dooddraing for
Pai		taining Collections of	Art, Historical Treasures, or Ot	her Similar A	ssets.
	Complete if the organizat	ion answered "Yes" on Form 9	990, Part IV, line 8.		
1a	If the organization elected, as pe	ermitted under SFAS 116 (ASC	0 958), not to report in its revenue staten	nent and balance	sheet works of art.
		•	bition, education, or research in furthera		, , , , , , , , , , , , , , , , , , ,
	the text of the footnote to its fina	·		·	,, , , , ,
b	If the organization elected, as pe	ermitted under SFAS 116 (ASC	958), to report in its revenue statement	and balance she	et works of art, historical
		•	ucation, or research in furtherance of pu		
	relating to these items:		•	• •	-
		990, Part VIII, line 1		> \$	
	(ii) Assets included in Form 990				
2	If the organization received or he		sures, or other similar assets for financia		
	the following amounts required t	o be reported under SFAS 11	6 (ASC 958) relating to these items:		
а	Revenue included on Form 990,	Part VIII, line 1	······	> \$_	
b	Assets included in Form 990, Pa				
LHA	For Paperwork Reduction Act	Notice, see the Instructions	for Form 990.	Sc	hedule D (Form 990) 2017

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

	t III Organizations Maintaining Co	15 FUNDAME			Other		Δ-U9			age Z
	•							,		—
3										
	(check all that apply):									
а										
b	b Scholarly research e Other									
С	c Preservation for future generations									
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 o	f art, historical trea	sures, or othe	r similar	assets		_		_
_	to be sold to raise funds rather than to be ma							Yes		No
Par	t IV Escrow and Custodial Arrang		te if the organization	on answered "	Yes" on	Form 990	, Part IV, I	ine 9, or		
	reported an amount on Form 990, Par	· ·								
1a	Is the organization an agent, trustee, custodia	an or other intermedi	ary for contributior	s or other ass	ets not ir	ncluded		_		-
	on Form 990, Part X?						L	Yes		No
b	If "Yes," explain the arrangement in Part XIII a	and complete the foll	owing table:							
								Amount		
С	Beginning balance					1c				
d	Additions during the year					1d				
е	Distributions during the year					1e				
f	Ending balance					1f				
	Did the organization include an amount on Fo							Yes		No
b	If "Yes," explain the arrangement in Part XIII.	Check here if the exp	olanation has been	provided on F	Part XIII]
Par	T V Endowment Funds. Complete if	the organization ans	swered "Yes" on F	orm 990, Part	IV, line 1	0.				
		(a) Current year	(b) Prior year	(c) Two year		(d) Three y	ears back	(e) Four	years	back
1a	Beginning of year balance	740,327.	711,180	681	,490.	7	12,294.		661,	141.
	Contributions									
	Net investment earnings, gains, and losses	35,807.	65,392.	. 59	,607.	-	12,271.		60,	730.
	Grants or scholarships									
	Other expenditures for facilities									
_	and programs	36,734.	36,245	. 29	,917.		18,533.		9.	577.
f	Administrative expenses	,	,		,		,			
	End of year balance	739,400.	740,327	711	,180.	6	81,490.		712,	294.
2	Provide the estimated percentage of the curre	· · · · · ·	· · · · · · · · · · · · · · · · · · ·	<u> </u>	, -		,			
	Board designated or quasi-endowment	ent year end balance	oz	ij) rield as.						
	Permanent endowment 80.01	%								
	Temporarily restricted endowment 19									
C	The percentages on lines 2a, 2b, and 2c shou									
2-		•	tion that are hold a	nd administar	ad far th		tion			
Sa	Are there endowment funds not in the posses	ssion of the organiza	uon mat are neid a	na aaministen	ea for the	e organiza	llion	Г	V	
	by:								Yes	No X
	***							3a(i)		X
								3a(ii)		
	If "Yes" on line 3a(ii), are the related organization							3b		
Do:	Describe in Part XIII the intended uses of the tVI Land, Buildings, and Equipment		vment funds.							
Fai										
	Complete if the organization answered									
	Description of property	(a) Cost or of basis (investment)	` '	t or other (other)		ocumulate preciation	ed	(d) Book	value	
1a	Land									
	Buildings	I								
	Leasehold improvements			36,714.		57,12			, 59	
	Equipment		10	00,168.		33,65	50.	66	5,51	L8.
	Other			73,437.	1	18,14			5,29	
	l. Add lines 1a through 1e. (Column (d) must ed							1,151		
	3··· · (Oolullii) (a) must et	, <u>, , , , , , , , , , , , , , , , , , </u>	** ^^!* IIII	, ······					_	

	(Form 990) 2017	KEADING I
Part VII	Investments -	Other Securities

(a) Description of security or category (including name of security)	(b) Book value	e 11b. See Form 990, Part X, line 12 (c) Method of valuation: Cost	
(1) Financial derivatives			
(2) Closely-held equity interests			
3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
otal. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) ▶			
Part VIII Investments - Program Related.			
	n Form 000 Port IV line	a 11 a Saa Farm 000 Dart V lina 12	
Complete if the organization answered "Yes" o (a) Description of investment	(b) Book value	(c) Method of valuation: Cost	
	(b) Book value	(c) Method of Valuation. Cost	or crid or year market value
(1)		+	
(2)		+	
(3)		+	
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Part IX Other Assets. Complete if the organization answered "Yes" of (a) D	n Form 990, Part IV, line Description	e 11d. See Form 990, Part X, line 15	. (b) Book value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
\-/			
(7)			
(7) (8)			
(8)			
(8) (9)	15 \		.
(8) (9) iotal. (Column (b) must equal Form 990, Part X, col. (B) line Part X Other Liabilities.	,	e 11e or 11f See Form 990 Part X)
(8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line Part X Other Liabilities. Complete if the organization answered "Yes" of the complete in the organization of the bility.	,		> ine 25.
(8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line Part X Other Liabilities. Complete if the organization answered "Yes" of the image of the complete if the organization of liability	,	e 11e or 11f. See Form 990, Part X, (b) Book value	> ine 25.
(8) (9) Total. (Column (b) must equal Form 990. Part X. col. (B) line Part X Other Liabilities. Complete if the organization answered "Yes" of the image of th	n Form 990, Part IV, line	(b) Book value	\ ine 25.
(8) (9) Fotal. (Column (b) must equal Form 990, Part X, col. (B) line Part X Other Liabilities. Complete if the organization answered "Yes" of the image of the complete if the organization of liability (1) Federal income taxes (2) DEFERRED RENT AND LEASE IN	,	(b) Book value 828,694.	> ine 25.
(8) (9) (otal. (Column (b) must equal Form 990, Part X, col. (B) line Part X Other Liabilities. Complete if the organization answered "Yes" o . (a) Description of liability (1) Federal income taxes (2) DEFERRED RENT AND LEASE IN (3) DEPOSITS	n Form 990, Part IV, line	(b) Book value	> ine 25.
(8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line Part X Other Liabilities. Complete if the organization answered "Yes" of the image of the	n Form 990, Part IV, line	(b) Book value 828,694.	\ ine 25.
(8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line Part X Other Liabilities. Complete if the organization answered "Yes" of the image of the	n Form 990, Part IV, line	(b) Book value 828,694.	\ ine 25.
(8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line Part X Other Liabilities. Complete if the organization answered "Yes" of the image of the	n Form 990, Part IV, line	(b) Book value 828,694.	> ine 25.
(8) (9) Fotal. (Column (b) must equal Form 990, Part X, col. (B) line Part X Other Liabilities. Complete if the organization answered "Yes" of the image of the	n Form 990, Part IV, line	(b) Book value 828,694.	> ine 25.
(8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line Part X Other Liabilities. Complete if the organization answered "Yes" of the incomplete in the organization of liability (1) Federal income taxes (2) DEFERRED RENT AND LEASE IN (3) DEPOSITS (4) (5) (6)	n Form 990, Part IV, line	(b) Book value 828,694.	\ ine 25.

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

990,440.

7,753,028.

4c

Sche	dule D (Form 990) 2017 READING IS FUNDAMENTAL, INC	•		<u> 52-</u>	0976257	Page 4
Paı	t XI Reconciliation of Revenue per Audited Financial Statemen	ts Wi	th Revenue per Re	turn.		
	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:					
а	Net unrealized gains (losses) on investments	2a	-66,633.			
b	Donated services and use of facilities	2b	990,440.			
С	Recoveries of prior year grants	2c				
	Other (Describe in Part XIII.)	2d				
	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:					
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a				
b	Other (Describe in Part XIII.)	4b				
С	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.
Pa	t XII Reconciliation of Expenses per Audited Financial Statemen	nts W	ith Expenses per F	Retur	n.	
	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:		1			
а	Donated services and use of facilities	2a	990,440.			
L	Dijan yang adjustmente	Oh				

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

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

Subtract line **2e** from line **1** Amounts included on Form 990, Part IX, line 25, but not on line 1:

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.

4a_

PART V, LINE 4:

Other (Describe in Part XIII.)

b Other (Describe in Part XIII.)

Add lines 2a through 2d

Part XIII Supplemental Information.

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.

SCHEDULE G

Department of the Treasury Internal Revenue Service

(Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

► Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

READING IS FUNDAMENTAL, INC Employer identification number

52-0976257

required to complete this pa	 Complete if the organization answ rt. 	ered "Y	es" or	i Form 990, Part IV, I	ine 17. Form 990-EZ	filers are not
 1 Indicate whether the organization rail a X Mail solicitations b X Internet and email solicitation c X Phone solicitations d X In-person solicitations 	e X Solicita	ation of ation of	non-g gover	overnment grants nment grants		
2 a Did the organization have a written	Part VII) or entity in connection with p	orofessi	onal fu	undraising services?	X Yes	
compensated at least \$5,000 by the	e organization.					
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) fundr have cr or con contribu	ıstody trol of	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
LAUTMAN MASKA NEIL & COMPANY		Yes	No			
- 1730 RHODE ISLAND AVENUE,	DIRECT MAIL		Х	427,250.	33,000.	394,250.
TRUE NORTH, INC - 630 THIRD						
AVENUE, 12TH FLOOR, NEW YORK,	DIRECT MAIL		X	422,120.	100,000.	322,120.
_						
Total			•	849,370.	133,000.	716,370.
3 List all states in which the organizati or licensing.	on is registered or licensed to solicit	contrib	utions	or has been notified	it is exempt from req	gistration
AL, AK, AZ, AR, CA, CO, CT,	DC.FL.GA.TL.TN.KS.	KY.M	F. M	ID MA MT MN	MS MO NH I	N.T.NM.NY
NC, ND, OH, OK, OR, PA, RI,			,	, , , , , ,	7220 7220 723272	/ 1.11 / 1.1 1
,,,,,,						

Schedule G (Form 990 or 990-EZ) 2017

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SEE PART IV FOR CONTINUATIONS

Pa	art I					
		of fundraising event contributions and gro	(a) Event #1	(b) Event #2	(c) Other events	(d) Total events (add col. (a) through
4)			(event type)	(event type)	(total number)	- col. (c))
Revenue						
Rev	1	Gross receipts				
	2	Less: Contributions				
	3	Gross income (line 1 minus line 2)				
	4	Cash prizes				
Ø	5	Noncash prizes				
bense	6	Rent/facility costs				
Direct Expenses	7	Food and beverages				
	8	Entertainment				
	9	Other direct expenses				
	10	,				
Pa	ırt I	Net income summary. Subtract line 10 from li Gaming. Complete if the organization a	ne 3, column (d)	990 Part IV line 19 or	reported more than	
		\$15,000 on Form 990-EZ, line 6a.	answered res on rollin	1990, 1 art IV, line 19, 01	reported more than	
		\$ 10,000 cm cm coo LL, into ca.	() 5:	(b) Pull tabs/instant		(d) Total gaming (add
nue			(a) Bingo	bingo/progressive bingo	(c) Other gaming	col. (a) through col. (c))
Revenue	1	Gross revenue				
Se	2	Cash prizes				
xpens	3	Noncash prizes				
Direct Expenses	4	Rent/facility costs				
_	5	Other direct expenses				
		Volunteer labor	Yes % No	Yes % No	Yes % 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)		>	
_	_					
а	ls t	ter the state(s) in which the organization condu the organization licensed to conduct gaming ac No," explain:	tivities in each of these s	states?		Yes No
		110, OAPIGITI.				
		ere any of the organization's gaming licenses re Yes," explain:				Yes No
7320	82 09	9-13-17			Schedule G (Fo	rm 990 or 990-EZ) 2017

Schedule G (Form 990 or 990-EZ) 2017 READING IS FUNDAMENTAL, INC.	52-0976257 Page 3
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	
14 Enter the name and address of the person who prepares the organization's gaming/special events books and rec	ords:
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 a	mount
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 sper	nt 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 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.	d Part III, lines 9, 9b, 10b, 15b,
SCHEDULE G, PART I, LINE 2B, LIST OF TEN HIGHEST PAID FUNDED	AISERS:
(I) NAME OF FUNDRAISER: LAUTMAN MASKA NEIL & COMPANY	
(I) ADDRESS OF FUNDRAISER:	
1730 RHODE ISLAND AVENUE, NW, SUITE 301, WASHINGTON, DC 20	036
(I) NAME OF FUNDRAISER: TRUE NORTH, INC	
(I) ADDRESS OF FUNDRAISER:	
630 THIRD AVENUE, 12TH FLOOR, NEW YORK, NY 10017	

Schedule G	G (Form 990 or 990-EZ)	READING IS	FUNDAMENTAL,	INC.	52-0976257	Page 4
Part IV	G (Form 990 or 990-EZ) Supplemental Infor	mation (continued)				
					Schedule G (Form 990 or	r 990-EZ)

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.

2017
Open to Public Inspection

Employer identification number Name of the organization 52-0976257 READING IS FUNDAMENTAL, INC. Part I General Information on Grants and Assistance 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 1 X Yes criteria used to award the grants or assistance? 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. (f) Method of 1 (a) Name and address of organization (b) EIN (c) IRC section (d) Amount of (e) Amount of (g) Description of (h) Purpose of grant valuation (book, or government (if applicable) cash grant non-cash noncash assistance or assistance FMV, appraisal, assistance other) READING IS FUNDAMENTAL PITTSBURGH 10 CHILDRENS WAY, SUITE 300 25-1558336 501(C)(3) PITTSBURGH, PA 15212 0 75,000.FMV BOOKS TO FOSTER LITTERACY SOUTHWEST HUMAN DEVELOPMENT (BFOS) 2806 N. 24TH STREET PHOENIX, AZ 85008 86-0407179 501(C)(3) 32,625.FMV 0. 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 15,622.FMV 46-4432711 N/A STREET - INDIANOLA, MS 38751 0. BOOKS TO FOSTER LITERACY

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

58-2000621 N/A

Enter total number of other organizations listed in the line 1 table

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Schedule I (Form 990) (2017)

38.



TO FOSTER LITERACY

BOOK'EM / RIF NASHVILLE

161 RAINS AVENUE NASHVILLE, TN 37203

0.

15 142. FMV

BOOKS

(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	воокѕ	TO FOSTER LITERACY
READING SCHOOL DISTRICT							
800 WASHINGTON STREET							
	23-6004134	NT / 7\	0.	11,338.	EMT7	BOOKS	TO FOSTER LITERACY
READING, PA 19601 LEHIGH VALLEY PUBLIC	23-0004134	N/A	1 0.	11,330.	r m v	POOKS	TO FOSTER LITERACT
TELECOMMUNICATION CORPORATION -							
839 SESAME STREET - BETHLEHEM, PA							
18015	23-1642883	501/C\/3\	0.	11,140.	EMT7	BOOKS	TO FOSTER LITERACY
10010	25 1042005	501(0)(3)	<u> </u>	11,140.	I II V	DOGRE	TO TOBIEK BITEKACI
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
PIDOM 5 COLANO							
FIRST 5 SOLANO 601 TEXAS STREET, SUITE 210							
OUT TEMMS STREET, SOTTE 210	94-6000538		0.	10,000.		BOOKS	TO FOSTER LITERACY



Part II Continuation of Grants and Other		•	nizations in the Un	ited States (Sch	edule I (Form 990), Pa		
(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	NT / 7	0.	7,590.	EM7	BOOKS	TO FOSTER LITERACY
MCCALLA, AL 33111	03 0000343	N/ A	· · ·	7,330.	PHV	BOOKS	TO FOSTER BITERACT
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



(b) EIN 68-0194365 73-1195641		(d) Amount of cash grant 0.	(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 TO FOSTER LITERACY
73-1195641			,	FMV	BOOKS	TO FOSTER LITERACY
73-1195641			,	FMV	BOOKS	TO FOSTER LITERACY
73-1195641			,	FMV	BOOKS	TO FOSTER LITERACY
	N/A	0.				
	N/A	0.				1
	N/A	0.		l		
59-6000500			6,000.	FMV	BOOKS	TO FOSTER LITERACY
59-6000500						
59-6000500						
33 0000300	N/A	0.	5,840.	FMV	BOOKS	TO FOSTER LITERACY
47-2747735	N/A	0.	5,728.	FMV	BOOKS	TO FOSTER LITERACY
74-1556846	N/A	0.	5,702.	FMV	BOOKS	TO FOSTER LITERACY
95-6000671	N/A	0.	5,656.	FMV	BOOKS	TO FOSTER LITERACY
75-1583261	N/A	0.	5 612.	FMV	BOOKS	TO FOSTER LITERACY
			7,322			
62-1772026	501(C)(3)	0.	5,598.	FMV	BOOKS	TO FOSTER LITERACY
23-1669498	N/A	0.	E E70		BOOKS	TO FOSTER LITERACY
5	47-2747735 74-1556846 95-6000671 75-1583261	59-6000500 N/A 47-2747735 N/A 74-1556846 N/A 95-6000671 N/A 75-1583261 N/A 62-1772026 501(C)(3)	47-2747735 N/A 0. 74-1556846 N/A 0. 95-6000671 N/A 0. 75-1583261 N/A 0.	47-2747735 N/A 0. 5,728. 74-1556846 N/A 0. 5,702. 95-6000671 N/A 0. 5,656. 75-1583261 N/A 0. 5,612. 62-1772026 501(C)(3) 0. 5,598.	47-2747735 N/A 0. 5,728. FMV 74-1556846 N/A 0. 5,702. FMV 95-6000671 N/A 0. 5,656. FMV 75-1583261 N/A 0. 5,612. FMV 62-1772026 501(C)(3) 0. 5,598. FMV	47-2747735 N/A 0. 5,728.FMV BOOKS 74-1556846 N/A 0. 5,702.FMV BOOKS 95-6000671 N/A 0. 5,656.FMV BOOKS 75-1583261 N/A 0. 5,612.FMV BOOKS 62-1772026 501(C)(3) 0. 5,598.FMV BOOKS

Schedule I (Form 990)



(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							
SOUTH BOSTON, VA 24592	54-6001335	N/A	0.	5,280.	FMV	BOOKS	TO FOSTER LITERACY
GEIGER ELEMENTARY 501 COLLEGE STREET							
LEWISTON, ME 04240	01-0447384	N/A	0.	5,122.	FMV	BOOKS	TO FOSTER LITERACY
EASTON AREA SCHOOL DISTRICT RIF							
EASTON, PA 18040	23-1726731	N/A	0.	5,116.	FMV	воокѕ	TO FOSTER LITERACY

Schedule I (Form 990)

(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 assistanc
rt IV Supplemental Information. Provide the information	tion required in Part I, line	e 2; Part III, columr	n (b); and any other ad	ditional information.	
RT I, LINE 2:					
ERE IS NO NEED TO MONITOR THE	USE OF FUND	S AS ALL 1	FUNDS ARE I	N RIF'S	
NTROL AND CAN ONLY BE USED TO) PURCHASE AP	PROVED TI	TLES MADE A	VAILABLE TO	
OGRAMS THROUGH A WEB-BASED PO					
TLES SCREENED AND APPROVED BY	AN ACADEMIC	ADVISORY	PANEL WITH	EXPERTISE	
LITERACY EDUCATION.					

SCHEDULE J (Form 990)

Compensation Information

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.

201/

OMB No. 1545-0047

Open to Public Inspection

Internal Revenue Service Name of the organization

Department of the Treasury

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

READING IS FUNDAMENTAL, INC.

Employer identification number 52-0976257

Pa	art I Questions Regarding Compensation			
			Yes	No
1 a	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.			
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account 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		<u> </u>
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.			
	X Compensation committee Written employment contract			
	Independent compensation consultant Independent compensation consultant Independent compensation consultant Independent compensation consultant			
	Form 990 of other organizations X 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:			
а	Receive a severance payment or change-of-control payment?	4a		X
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		<u> X</u>
С	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		Х
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	0.1 11 504/ V0) 504/ V4) 1504/ V00) 1 11 11 5 0			
_	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:	En		y
a	The organization?	5a		X
a	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:	6-		х
	The organization?	6a		X
D	Any related organization?	6b		
7	If "Yes" on line 6a or 6b, describe in Part III. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments			
′		7	х	
8	not described on lines 5 and 6? If "Yes," describe in Part III		21	
3		8		х
9	Initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in			
3	Regulations section 53.4958-6(c)?	9		
	Regulations section 55.4956-6(c)?	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.

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

Schedule J (Form 990) 2017

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

Open To Public

Department of the Treasury Internal Revenue Service

Name of the organization

▶ 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.

Inspection Employer identification number

	READING IS FUNDAMENTAL, INC. 52-0976							257	
Pai	t 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	no	(d) Method of de ncash contribu	termin		s
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 $_{\dots}$								
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 organi	,	,						
	for which the organization completed Form 82	.83, Part IV, I	Donee Acknowledg	gement 29					
								Yes	No
30a	During the year, did the organization receive b	-	• • • • •			at it			
	must hold for at least three years from the date	e of the initia	l contribution, and	which isn't required to be u	sed for				
	exempt purposes for the entire holding period	?					30a		X
b	If "Yes," describe the arrangement in Part II.								
31	Does the organization have a gift acceptance	policy that re	equires the review	of any nonstandard contribu	tions?		31		X
32a	Does the organization hire or use third parties	or related or	ganizations to soli	cit, process, or sell noncash					
	contributions?						32a		Х
b	If "Yes," describe in Part II.								
33	If the organization didn't report an amount in o	column (c) for	r a type of property	for which column (a) is che	cked,				
	describe in Part II.								

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule M (Form 990) 2017

Schedule M (Form 990) 2017

SCHEDULE O

(Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. ▶ Attach to Form 990 or 990-EZ. ► Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service 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.

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 SUMMER BOOKS FOR STUDENTS TO HIGH-QUALITY CLASSROOM BOOK COLLECTIONS, 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, 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)

Name of the organization **Employer identification number** 52-0976257 READING IS FUNDAMENTAL, INC. 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. Schedule O (Form 990 or 990-EZ) (2017)

Schedule O (Form 990 or 990-EZ) (2017) Page 2 Name of the organization **Employer identification number** 52-0976257 READING IS FUNDAMENTAL, INC. 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,

REQUIRES THAT A RIF INSIDER DISCLOSES ANY POTENTIAL CONFLICT TO THE BOARD Schedule O (Form 990 or 990-EZ) (2017)

OFFICERS AND RIF SENIOR MANAGERS (COLLECTIVELY "RIF INSIDERS"). THE POLICY

Name of the organization READING IS FUNDAMENTAL, INC.	Employer identification number 52-0976257						
OF DIRECTORS OR A DESIGNATED COMMITTEE OF THE BOARD. VIOLA	TIONS OF THE						
POLICY WILL RESULT IN APPROPRIATE DISCIPLINARY AND CORRECTIVE ACTION, UP TO							
AND INCLUDING DISMISSAL.							
RIF INSIDERS ARE REQUIRED TO ANNUALLY SIGN A STATMENT AFFI	RMING THAT HE OR						
SHE:							
- HAS RECEIVED A COPY OF THE POLICY,							
- HAS READ AND UNDERSTANDS THE POLICY,							
- HAS AGREED TO COMPLY WITH, AND HAS COMPLIED WITH THE POL	ICY,						
- 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, T	HE CHAIR OF THE						
BOARD FIRST SOLICITS INPUT FROM ALL BOARD MEMBERS CONCERNI	NG THE						
PRESIDENT'S PERFORMANCE. THE EXECUTIVE COMMITTEE THEN CONS	IDERS THE INPUT						
OF THE RESPONDING BOARD MEMBERS IN ITS REVIEW OF THE PRESI	DENT AND CEO, AND						
REPORTS BACK TO THE BOARD OF DIRECTORS ITS EVALUATION. THE	EXECUTIVE						
COMMITTEE THEN SHARES ITS EVALUATION WITH THE PRESIDENT AN	D CEO.						
THE EXECUTIVE COMMITTEE THEN CONSULTS COMPARABILITY SURVEY	S TO DETERMINE						
THE PRESIDENT AND CEO'S COMPENSATION FOR THE NEXT YEAR.							

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

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

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

732212 09-07-17

READING IS FUNDAMENTAL, INC.	Employer identification number 52-0976257
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, FEDE	RAL FORM 990 AND IRS
LETTER OF DETERMINATION (OF RIF'S TAX EXEMPT STATE	S) TO GUIDESTAR FOR
PUBLICATION ON THAT SERVICE. RIF ALSO PUBLISHES IT	S FEDERAL FORM 990 ON ITS
OWN WEBSITE. TO DATE, RIF HAS NOT PUBLISHED ITS CO	NFLICT OF INTEREST POLICY
FOR ACCESS BY THE GENERAL PUBLIC. ALL DOCUMENTS,	NCLUDING OUR GOVERNING
DOCUMENTS, THE FEDERAL FORMS 1023 AND 990-T ARE AI	SO AVAILABLE UPON
REQUEST.	