### Part I: Summary

1. Briefly describe the organization's mission or most significant activities: **SEE PART III, LINE 1.**

### Activities & Governance

<table>
<thead>
<tr>
<th>Line</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>3</td>
<td>Number of voting members of the governing body (Part VI, line 1a)</td>
</tr>
<tr>
<td>4</td>
<td>Number of independent voting members of the governing body (Part VI, line 1b)</td>
</tr>
<tr>
<td>5</td>
<td>Total number of individuals employed in calendar year 2014 (Part V, line 2a)</td>
</tr>
<tr>
<td>6</td>
<td>Total number of volunteers (estimate if necessary)</td>
</tr>
<tr>
<td>7a</td>
<td>Total unrelated business revenue from Part VIII, column (C), line 12</td>
</tr>
<tr>
<td>7b</td>
<td>Net unrelated business taxable income from Form 990-T, line 34</td>
</tr>
</tbody>
</table>

### Revenue

<table>
<thead>
<tr>
<th>Line</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>8</td>
<td>Contributions and grants (Part VIII, line 1h)</td>
</tr>
<tr>
<td>9</td>
<td>Program service revenue (Part VIII, line 2g)</td>
</tr>
<tr>
<td>10</td>
<td>Investment income (Part VIII, column (A), lines 3, 4, and 7d)</td>
</tr>
<tr>
<td>11</td>
<td>Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)</td>
</tr>
<tr>
<td>12</td>
<td>Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)</td>
</tr>
</tbody>
</table>

### Expenses

<table>
<thead>
<tr>
<th>Line</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>13</td>
<td>Grants and similar amounts paid (Part IX, column (A), lines 1-3)</td>
</tr>
<tr>
<td>14</td>
<td>Benefits paid to or for members (Part IX, column (A), line 4)</td>
</tr>
<tr>
<td>15</td>
<td>Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)</td>
</tr>
<tr>
<td>16a</td>
<td>Professional fundraising fees (Part IX, column (A), line 11e)</td>
</tr>
<tr>
<td>16b</td>
<td>Total fundraising expenses (Part IX, column (D), line 25)</td>
</tr>
<tr>
<td>17</td>
<td>Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)</td>
</tr>
<tr>
<td>18</td>
<td>Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)</td>
</tr>
<tr>
<td>19</td>
<td>Less expenses. Subtract line 18 from line 12</td>
</tr>
</tbody>
</table>

### Part II: Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

**Signature of officer**

CHRISTINA SCIABICA, EXECUTIVE DIRECTOR

**Type of print name and title**

**************

### Sign Here

**Signature of officer**

CHRISTINA SCIABICA, EXECUTIVE DIRECTOR

**Date**

----

### Paid

**Firm's name**

GELMAN, ROSENBERG & FREEDMAN

**Firm's EIN**

52-1392008

**Firm's address**

4550 MONTGOMERY AVE SUITE 650N

**Phone no.**

(301) 951-9090

**PTIN**

-----

May the IRS discuss this return with the preparer shown above? (see instructions)

**Yes**

X **No**

**Form 990 (2014)**

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**Part III | Statement of Program Service Accomplishments**

1. Briefly describe the organization’s mission:

   READ GLOBAL PARTNERS WITH RURAL VILLAGES TO ESTABLISH COMMUNITY LIBRARY AND RESOURCE CENTERS (READ CENTERS) AS VEHICLES FOR SOCIAL AND ECONOMIC TRANSFORMATION. READ CENTERS OFFER TRAINING PROGRAMS IN EDUCATION, ECONOMIC EMPOWERMENT, TECHNOLOGY, AND WOMEN’S EMPOWERMENT.

2. Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? ☑ Yes ☐ No

   If "Yes," describe these new services on Schedule O.

3. Did the organization cease conducting, or make significant changes in how it conducts, any program services? ☑ Yes ☐ No

   If "Yes," describe these changes on Schedule O.

4. Describe the organization’s program service accomplishments for each of its three largest program services, as measured by expenses.

   Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

   **4a**
   
   (Code: __________) Expenses $_________ including grants of $_________ Revenue $_________  
   
   IN 2014, READ DOUBLED THE NUMBER OF NEW CENTERS IT ESTABLISHED IN 2013 BY COMPLETING 10 NEW CENTERS (COMMUNITY LIBRARIES): 1 IN BHUTAN, 4 IN INDIA AND 5 IN NEPAL. READ ALSO OFFERED PROGRAMS ON WOMEN’S EMPOWERMENT, LITERACY, ECONOMIC EMPOWERMENT AND OTHER LIFE-CHANGING PROGRAMS TO MORE THAN 50,000 RURAL VILLAGERS ACROSS ITS THREE COUNTRIES OF OPERATION.

   IN ADDITION TO THE RESOURCES AVAILABLE AT ALL READ CENTERS, READ OFFERED THE FOLLOWING TARGETED TRAININGS AND PROGRAMS ACROSS ITS CENTERS: 14,832 PEOPLE RECEIVED LEGAL RIGHT/ADVOCACY TRAINING, 6773 RECEIVED HEALTH SERVICES/TRAINING, 6142 YOUTH PARTICIPATING IN SPECIALIZED TRAININGS, 5359 ADULTS PARTICIPATED IN LITERACY CLASSES,

   **4b**
   
   (Code: __________) Expenses $_________ including grants of $_________ Revenue $_________  
   
   **4c**
   
   (Code: __________) Expenses $_________ including grants of $_________ Revenue $_________

   **4d** Other program services (Describe in Schedule O.)

   (Expenses $_________ including grants of $_________ Revenue $_________)

   **4e** Total program service expenses ▶ 1,704,663.

SEE SCHEDULE O FOR CONTINUATION(S)
<table>
<thead>
<tr>
<th>Part IV Checklist of Required Schedules</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?</td>
</tr>
<tr>
<td>- If &quot;Yes,&quot; complete Schedule A</td>
</tr>
<tr>
<td>1 X</td>
</tr>
<tr>
<td>2. Is the organization required to complete Schedule B, Schedule of Contributors?</td>
</tr>
<tr>
<td>2 X</td>
</tr>
<tr>
<td>3. Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office?</td>
</tr>
<tr>
<td>- If &quot;Yes,&quot; complete Schedule C, Part I</td>
</tr>
<tr>
<td>3 X</td>
</tr>
<tr>
<td>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?</td>
</tr>
<tr>
<td>- If &quot;Yes,&quot; complete Schedule C, Part II</td>
</tr>
<tr>
<td>4 X</td>
</tr>
<tr>
<td>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?</td>
</tr>
<tr>
<td>- If &quot;Yes,&quot; complete Schedule C, Part III</td>
</tr>
<tr>
<td>5 X</td>
</tr>
<tr>
<td>6. Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts?</td>
</tr>
<tr>
<td>- If &quot;Yes,&quot; complete Schedule D, Part I</td>
</tr>
<tr>
<td>6 X</td>
</tr>
<tr>
<td>7. Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures?</td>
</tr>
<tr>
<td>- If &quot;Yes,&quot; complete Schedule D, Part II</td>
</tr>
<tr>
<td>7 X</td>
</tr>
<tr>
<td>8. Did the organization maintain collections of works of art, historical treasures, or other similar assets?</td>
</tr>
<tr>
<td>- If &quot;Yes,&quot; complete Schedule D, Part III</td>
</tr>
<tr>
<td>8 X</td>
</tr>
<tr>
<td>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?</td>
</tr>
<tr>
<td>- If &quot;Yes,&quot; complete Schedule D, Part IV</td>
</tr>
<tr>
<td>9 X</td>
</tr>
<tr>
<td>10. Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments?</td>
</tr>
<tr>
<td>- If &quot;Yes,&quot; complete Schedule D, Part V</td>
</tr>
<tr>
<td>10 X</td>
</tr>
<tr>
<td>11. If the organization's answer to any of the following questions is &quot;Yes,&quot; then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.</td>
</tr>
<tr>
<td>a. Did the organization report an amount for land, buildings, and equipment in Part X, line 10?</td>
</tr>
<tr>
<td>- If &quot;Yes,&quot; complete Schedule D, Part VI</td>
</tr>
<tr>
<td>11a X</td>
</tr>
<tr>
<td>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?</td>
</tr>
<tr>
<td>- If &quot;Yes,&quot; complete Schedule D, Part VII</td>
</tr>
<tr>
<td>11b X</td>
</tr>
<tr>
<td>c. Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16?</td>
</tr>
<tr>
<td>- If &quot;Yes,&quot; complete Schedule D, Part VIII</td>
</tr>
<tr>
<td>11c X</td>
</tr>
<tr>
<td>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?</td>
</tr>
<tr>
<td>- If &quot;Yes,&quot; complete Schedule D, Part IX</td>
</tr>
<tr>
<td>11d X</td>
</tr>
<tr>
<td>e. Did the organization report an amount for other liabilities in Part X, line 25?</td>
</tr>
<tr>
<td>- If &quot;Yes,&quot; complete Schedule D, Part X</td>
</tr>
<tr>
<td>11e X</td>
</tr>
<tr>
<td>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)?</td>
</tr>
<tr>
<td>- If &quot;Yes,&quot; complete Schedule D, Part X</td>
</tr>
<tr>
<td>11f X</td>
</tr>
<tr>
<td>12a. Did the organization obtain separate, independent audited financial statements for the tax year?</td>
</tr>
<tr>
<td>- If &quot;Yes,&quot; complete Schedule D, Parts XI and XII</td>
</tr>
<tr>
<td>12a X</td>
</tr>
<tr>
<td>b. Was the organization included in consolidated, independent audited financial statements for the tax year?</td>
</tr>
<tr>
<td>- If &quot;Yes,&quot; and if the organization answered &quot;No&quot; to line 12a, then completing Schedule D, Parts XI and XII is optional</td>
</tr>
<tr>
<td>12b X</td>
</tr>
<tr>
<td>13. Is the organization a school described in section 170(b)(1)(A)(ii)?</td>
</tr>
<tr>
<td>- If &quot;Yes,&quot; complete Schedule E</td>
</tr>
<tr>
<td>13 X</td>
</tr>
<tr>
<td>14a. Did the organization maintain an office, employees, or agents outside of the United States?</td>
</tr>
<tr>
<td>- If &quot;Yes,&quot; complete Schedule F, Parts I and IV</td>
</tr>
<tr>
<td>14a X</td>
</tr>
<tr>
<td>14b. Did the organization have aggregate revenues or expenses of more than $10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at $100,000 or more?</td>
</tr>
<tr>
<td>- If &quot;Yes,&quot; complete Schedule F, Parts I and IV</td>
</tr>
<tr>
<td>14b X</td>
</tr>
<tr>
<td>15. Did the organization report on Part IX, column (A), line 3, more than $5,000 of grants or other assistance to or for any foreign organization?</td>
</tr>
<tr>
<td>- If &quot;Yes,&quot; complete Schedule F, Parts II and IV</td>
</tr>
<tr>
<td>15 X</td>
</tr>
<tr>
<td>16. Did the organization report on Part IX, column (A), line 3, more than $5,000 of aggregate grants or other assistance to or for foreign individuals?</td>
</tr>
<tr>
<td>- If &quot;Yes,&quot; complete Schedule F, Parts III and IV</td>
</tr>
<tr>
<td>16 X</td>
</tr>
<tr>
<td>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?</td>
</tr>
<tr>
<td>- If &quot;Yes,&quot; complete Schedule G, Part I</td>
</tr>
<tr>
<td>17 X</td>
</tr>
<tr>
<td>18. Did the organization report more than $15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a?</td>
</tr>
<tr>
<td>- If &quot;Yes,&quot; complete Schedule G, Part II</td>
</tr>
<tr>
<td>18 X</td>
</tr>
<tr>
<td>19. Did the organization report more than $15,000 of gross income from gaming activities on Part VIII, line 9a?</td>
</tr>
<tr>
<td>- If &quot;Yes,&quot; complete Schedule G, Part III</td>
</tr>
<tr>
<td>19 X</td>
</tr>
<tr>
<td>20a. Did the organization operate one or more hospital facilities?</td>
</tr>
<tr>
<td>- If &quot;Yes,&quot; complete Schedule H</td>
</tr>
<tr>
<td>20a X</td>
</tr>
<tr>
<td>b. If &quot;Yes&quot; to line 20a, did the organization attach a copy of its audited financial statements to this return?</td>
</tr>
<tr>
<td>20b X</td>
</tr>
</tbody>
</table>
### Part IV Checklist of Required Schedules (continued)

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>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</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>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</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>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 Schedule J</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than $100,000 as of the last day of the year, that was issued after December 31, 2002? If “Yes,” answer lines 24b through 24d and complete Schedule K. If “No”, go to line 25a</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>d Did the organization act as an “on behalf of” issuer for bonds outstanding at any time during the year?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If “Yes,” complete Schedule L, Part I</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization’s prior Forms 990 or 990-EZ? If “Yes,” complete Schedule L, Part I</td>
<td></td>
<td></td>
</tr>
<tr>
<td>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</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>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</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>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):</td>
<td></td>
<td></td>
</tr>
<tr>
<td>a A current or former officer, director, trustee, or key employee? If “Yes,” complete Schedule L, Part IV</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>b A family member of a current or former officer, director, trustee, or key employee? If “Yes,” complete Schedule L, Part IV</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>c An entity of which a current or former officer, director, trustee, or key employee or (a family member thereof) was an officer, director, trustee, or direct or indirect owner? If “Yes,” complete Schedule L, Part IV</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>29 Did the organization receive more than $25,000 in non-cash contributions? If “Yes,” complete Schedule M</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If “Yes,” complete Schedule M</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>31 Did the organization liquidate, terminate, or dissolve and cease operations? If “Yes,” complete Schedule N, Part I</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If “Yes,” complete Schedule N, Part II</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If “Yes,” complete Schedule R, Part I</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>34 Was the organization related to any tax-exempt or taxable entity? If “Yes,” complete Schedule R, Part II, III, or IV, and Part V, line 1</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 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</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>b If “Yes” to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If “Yes,” complete Schedule R, Part V, line 2</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>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</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>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</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?</td>
<td></td>
<td>X</td>
</tr>
</tbody>
</table>

**Note:** All Form 990 filers are required to complete Schedule O.
Part V Statements Regarding Other IRS Filings and Tax Compliance

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

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

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

c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?

2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return

b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?

Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)

3a Did the organization have unrelated business gross income of $1,000 or more during the year?

b If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O

4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?

b If "Yes," enter the name of the foreign country: BHUTAN

5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?

b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?

c If "Yes," to line 5a or 5b, did the organization file Form 8886-T?

6a Does the organization have annual gross receipts that are normally greater than $100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?

b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?

7 Organizations that may receive deductible contributions under section 170(c).

a Did the organization receive a payment in excess of $75 made partly as a contribution and partly for goods and services provided to the payor?

b If "Yes," did the organization notify the donor of the value of the goods or services provided?

c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required
to file Form 8282?

7d If "Yes," indicate the number of Forms 8282 filed during the year

e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?

f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?

g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?

h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?

8 Sponsoring organizations maintaining donor directed funds. Did a donor advised fund maintained by the
sponsoring organization have excess business holdings at any time during the year?

9 Sponsoring organizations maintaining donor advised funds.

d Did the sponsoring organization make any taxable distributions under section 4966?

b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?

10 Section 501(c)(7) organizations. Enter:

a Initiation fees and capital contributions included on Part VIII, line 12

b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities

11 Section 501(c)(12) organizations. Enter:

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?

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

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
### 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.

#### Section A. Governing Body and Management

1a Enter the number of voting members of the governing body at the end of the tax year.

<table>
<thead>
<tr>
<th>1a</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>11</td>
<td>X</td>
<td></td>
</tr>
</tbody>
</table>

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.

1b Enter the number of voting members included in line 1a, above, who are independent.

<table>
<thead>
<tr>
<th>1b</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>11</td>
<td>X</td>
<td></td>
</tr>
</tbody>
</table>

2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?

| 2  | X   |

3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?

| 3  | X   |

4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?

| 4  | X   |

5 Did the organization become aware during the year of a significant diversion of the organization's assets?

| 5  | X   |

6 Did the organization have members or stockholders?

| 6  | X   |

7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?

| 7a | X   |

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 | X   |

8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:

| 8a | X   |

b Each committee with authority to act on behalf of the governing body?

| 8b | X   |

9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If “Yes,” provide the names and addresses in Schedule O.

| 9  | X   |

#### Section B. Policies

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

10a Did the organization have local chapters, branches, or affiliates?

| 10a | X   |

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 | X   |

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.

| 11b | X   |

12a Did the organization have a written conflict of interest policy? If “No,” go to line 13

| 12a | X   |

b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?

| 12b | X   |

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?

| 12c | X   |

13 Did the organization have a written whistleblower policy?

| 13 | X   |

14 Did the organization have a written document retention and destruction policy?

| 14 | X   |

15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?

| 15a | X   |

b Other officers or key employees of the organization

| 15b | X   |

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 | X   |

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 | X   |

#### Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed.

- [X] CA

18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.

- [X] Own website
- [X] Another’s website
- [X] Upon request
- [ ] Other (explain in Schedule O)

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

20 State the name, address, and telephone number of the person who possesses the organization’s books and records:

GANI LAGUISMA – (415) - 373-7688

180 9TH AVENUE, SAN FRANCISCO, CA 94118
### Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

#### Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a. Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. 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 all of the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than $100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than $100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than $10,000 of reportable compensation from the organization and any related organizations.

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

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

#### Table

<table>
<thead>
<tr>
<th>(A) Name and Title</th>
<th>(B) Average hours per week</th>
<th>(C) Position</th>
<th>(D) Reportable compensation from the organization (W-2/1099-MISC)</th>
<th>(E) Reportable compensation from related organizations (W-2/1099-MISC)</th>
<th>(F) Estimated amount of other compensation from the organization and related organizations</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) JANICE BERTOZZI</td>
<td>3.00</td>
<td>CHAIR</td>
<td>X X 0. 0. 0.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(2) DEBORAH JACOBS</td>
<td>5.00</td>
<td>VICE CHAIR</td>
<td>X X 0. 0. 0.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(3) SABINA AHMED</td>
<td>3.00</td>
<td>TREASURER</td>
<td>X X 0. 0. 0.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(4) ANTONIA NEUBAUER</td>
<td>5.00</td>
<td>FOUNDER</td>
<td>X 0. 0. 0.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(5) BRIAN BANNON</td>
<td>3.00</td>
<td>DIRECTOR</td>
<td>X 0. 0. 0.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(6) EDWARD LHEE</td>
<td>4.00</td>
<td>DIRECTOR</td>
<td>X 0. 0. 0.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(7) SEAN WALLACE</td>
<td>1.00</td>
<td>DIRECTOR</td>
<td>X 0. 0. 0.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(8) LAWRENCE NEUBAUER</td>
<td>1.00</td>
<td>DIRECTOR</td>
<td>X 0. 0. 0.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(9) ELIZABETH BORELLI</td>
<td>1.00</td>
<td>DIRECTOR</td>
<td>X 0. 0. 0.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(10) RAPHAEL BEMPORAD</td>
<td>1.00</td>
<td>DIRECTOR</td>
<td>X 0. 0. 0.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(11) KAREN SAGE</td>
<td>1.00</td>
<td>DIRECTOR</td>
<td>X 0. 0. 0.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(12) CHRISTINA SCIABICA</td>
<td>40.00</td>
<td>EXECUTIVE DIRECTOR</td>
<td>X 120,748. 0. 6,754.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

RURAL EDUCATION & DEVELOPMENT, INC. 23-2656376

Form 990 (2014) 7
### Part VII | Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

<table>
<thead>
<tr>
<th>(A) Name and title</th>
<th>(B) Average hours per week (list any hours for related organizations below line)</th>
<th>(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)</th>
<th>(D) Reportable compensation from the organization (W-2/1099-MISC)</th>
<th>(E) Reportable compensation from related organizations (W-2/1099-MISC)</th>
<th>(F) Estimated amount of other compensation from the organization and related organizations</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>[ ] Individual trustee or director</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>[ ] Institutional trustee</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>[ ] Officer</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>[ ] Highest compensated employee</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>[ ] Key employee</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>[ ] Former</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

1b Sub-total ▶ 120,748.0 0. 6,754.

1c Total from continuation sheets to Part VII, Section A ▶ 0. 0. 0.

d Total (add lines 1b and 1c) ▶ 120,748.0 0. 6,754.

2 Total number of individuals (including but not limited to those listed above) who received more than $100,000 of reportable compensation from the organization ▶ 1

3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual ▶ 3 X

4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than $150,000? If "Yes," complete Schedule J for such individual ▶ 4 X

5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person ▶ 5 X

### Section B. Independent Contractors

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

<table>
<thead>
<tr>
<th>(A) Name and business address</th>
<th>(B) Description of services</th>
<th>(C) Compensation</th>
</tr>
</thead>
<tbody>
<tr>
<td>NONE</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

2 Total number of independent contractors (including but not limited to those listed above) who received more than $100,000 of compensation from the organization ▶ 0
Part VIII  Statement of Revenue

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

<table>
<thead>
<tr>
<th>Contributions, Gifts, Grants</th>
<th>Business Code</th>
<th>(A) Total Revenue</th>
<th>(B) Related or Exempt Function Revenue</th>
<th>(C) Unrelated Business Revenue (D) Revenue Excluded from Tax Under Sections 512-514</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 a Federated campaigns</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1 b Membership dues</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1 c Fundraising events</td>
<td></td>
<td>5,335</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1 d Related organizations</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1 e Government grants (contributions)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1 f All other contributions, gifts, grants, and similar amounts not included above</td>
<td></td>
<td></td>
<td></td>
<td>2,382,562</td>
</tr>
<tr>
<td>1 g Noncash contributions included in lines 1a-1f</td>
<td></td>
<td></td>
<td></td>
<td>1,643</td>
</tr>
<tr>
<td>h Total. Add lines 1a-1f</td>
<td></td>
<td>2,387,897</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Program Service Revenue</th>
</tr>
</thead>
<tbody>
<tr>
<td>2 a</td>
</tr>
<tr>
<td>2 b</td>
</tr>
<tr>
<td>2 c</td>
</tr>
<tr>
<td>2 d</td>
</tr>
<tr>
<td>2 e</td>
</tr>
<tr>
<td>2 f All other program service revenue</td>
</tr>
<tr>
<td>g Total. Add lines 2a-2f</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Other Revenue</th>
</tr>
</thead>
<tbody>
<tr>
<td>3 Investment income (including dividends, interest, and other similar amounts)</td>
</tr>
<tr>
<td>4 Income from investment of tax-exempt bond proceeds</td>
</tr>
<tr>
<td>5 Royalties</td>
</tr>
<tr>
<td>6 a Gross rents</td>
</tr>
<tr>
<td>6 b Less: rental expenses</td>
</tr>
<tr>
<td>6 c Rental income or (loss)</td>
</tr>
<tr>
<td>6 d Net rental income or (loss)</td>
</tr>
<tr>
<td>7 a Gross amount from sales of assets other than inventory</td>
</tr>
<tr>
<td>7 b Less: cost or other basis and sales expenses</td>
</tr>
<tr>
<td>7 c Gain or (loss)</td>
</tr>
<tr>
<td>7 d Net gain or (loss)</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Other Revenue</th>
</tr>
</thead>
<tbody>
<tr>
<td>8 a Gross income from fundraising events (not including $5,335 of contributions reported on line 1c). See Part IV, line 18</td>
</tr>
<tr>
<td>8 b Less: direct expenses</td>
</tr>
<tr>
<td>8 c Net income or (loss) from fundraising events</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Other Revenue</th>
</tr>
</thead>
<tbody>
<tr>
<td>9 a Gross income from gaming activities. See Part IV, line 19</td>
</tr>
<tr>
<td>9 b Less: direct expenses</td>
</tr>
<tr>
<td>9 c Net income or (loss) from gaming activities</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Other Revenue</th>
</tr>
</thead>
<tbody>
<tr>
<td>10 a Gross sales of inventory, less returns and allowances</td>
</tr>
<tr>
<td>10 b Less: cost of goods sold</td>
</tr>
<tr>
<td>10 c Net income or (loss) from sales of inventory</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Miscellaneous Revenue</th>
</tr>
</thead>
<tbody>
<tr>
<td>11 a MISCELLANEOUS INCOME</td>
</tr>
<tr>
<td>11 b LOSS ON EXCHANGE RATE</td>
</tr>
<tr>
<td>11 c</td>
</tr>
<tr>
<td>11 d All other revenue</td>
</tr>
<tr>
<td>11 e Total. Add lines 11a-11d</td>
</tr>
<tr>
<td>12 Total revenue. See instructions.</td>
</tr>
</tbody>
</table>
### Part IX Statement of Functional Expenses

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

<table>
<thead>
<tr>
<th>Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.</th>
<th>(A) Total expenses</th>
<th>(B) Program service expenses</th>
<th>(C) Management and general expenses</th>
<th>(D) Fundraising expenses</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2 Grants and other assistance to domestic individuals. See Part IV, line 22</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4 Benefits paid to or for members</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5 Compensation of current officers, directors, trustees, and key employees</td>
<td>127,502</td>
<td>54,826</td>
<td>30,600</td>
<td>42,076</td>
</tr>
<tr>
<td>6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7 Other salaries and wages</td>
<td>648,749</td>
<td>432,459</td>
<td>71,329</td>
<td>144,961</td>
</tr>
<tr>
<td>8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>9 Other employee benefits</td>
<td>53,403</td>
<td>34,963</td>
<td>6,221</td>
<td>12,219</td>
</tr>
<tr>
<td>10 Payroll taxes</td>
<td>33,946</td>
<td>21,368</td>
<td>4,425</td>
<td>8,153</td>
</tr>
<tr>
<td>11 Fees for services (non-employees):</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>a Management</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b Legal</td>
<td>484</td>
<td>484</td>
<td></td>
<td></td>
</tr>
<tr>
<td>c Accounting</td>
<td>127,076</td>
<td>5,336</td>
<td>114,740</td>
<td>7,000</td>
</tr>
<tr>
<td>d Lobbying</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>e Professional fundraising services. See Part IV, line 17</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>f Investment management fees</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.)</td>
<td>116,270</td>
<td>102,053</td>
<td>14,217</td>
<td></td>
</tr>
<tr>
<td>12 Advertising and promotion</td>
<td>10,440</td>
<td></td>
<td></td>
<td>10,440</td>
</tr>
<tr>
<td>13 Office expenses</td>
<td>111,383</td>
<td>72,279</td>
<td>24,785</td>
<td>14,319</td>
</tr>
<tr>
<td>14 Information technology</td>
<td>13,180</td>
<td></td>
<td>526</td>
<td>12,624</td>
</tr>
<tr>
<td>15 Royalties</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>16 Occupancy</td>
<td>87,130</td>
<td>43,785</td>
<td>28,798</td>
<td>14,547</td>
</tr>
<tr>
<td>17 Travel</td>
<td>120,852</td>
<td>83,568</td>
<td>6,602</td>
<td>30,682</td>
</tr>
<tr>
<td>18 Payments of travel or entertainment expenses for any federal, state, or local public officials</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>19 Conferences, conventions, and meetings</td>
<td>8,953</td>
<td>843</td>
<td>2,616</td>
<td>5,494</td>
</tr>
<tr>
<td>20 Interest</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>21 Payments to affiliates</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>22 Depreciation, depletion, and amortization</td>
<td>10,215</td>
<td>10,215</td>
<td></td>
<td></td>
</tr>
<tr>
<td>23 Insurance</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>a PROGRAM EXPENSES</td>
<td>719,325</td>
<td>719,325</td>
<td></td>
<td></td>
</tr>
<tr>
<td>b PROJECT EXPENSES</td>
<td>37,612</td>
<td>37,612</td>
<td></td>
<td></td>
</tr>
<tr>
<td>c WORKSHOPS AND TRAININGS</td>
<td>36,650</td>
<td>34,400</td>
<td>2,250</td>
<td></td>
</tr>
<tr>
<td>d CONSTRUCTION EXPENSES</td>
<td>25,137</td>
<td>25,137</td>
<td></td>
<td></td>
</tr>
<tr>
<td>e All other expenses</td>
<td>36,658</td>
<td>26,464</td>
<td>4,882</td>
<td>5,312</td>
</tr>
<tr>
<td>25 Total functional expenses. Add lines 1 through 24e</td>
<td>2,352,015</td>
<td>1,704,663</td>
<td>312,475</td>
<td>334,877</td>
</tr>
<tr>
<td>26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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

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

<table>
<thead>
<tr>
<th>Assets</th>
<th>(A) Beginning of year</th>
<th>(B) End of year</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Cash - non-interest-bearing</td>
<td>623,604</td>
<td>866,289</td>
</tr>
<tr>
<td>2 Savings and temporary cash investments</td>
<td>2,876,335</td>
<td>1,360,502</td>
</tr>
<tr>
<td>3 Pledges and grants receivable, net</td>
<td>10,792</td>
<td>1,401,283</td>
</tr>
<tr>
<td>4 Accounts receivable, net</td>
<td>62,343</td>
<td>45,488</td>
</tr>
<tr>
<td>5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees’ beneficiary organizations (see instr). Complete Part II of Sch L</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7 Notes and loans receivable, net</td>
<td></td>
<td></td>
</tr>
<tr>
<td>8 Inventories for sale or use</td>
<td></td>
<td></td>
</tr>
<tr>
<td>9 Prepaid expenses and deferred charges</td>
<td>584</td>
<td>897</td>
</tr>
<tr>
<td>10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D</td>
<td>71,310</td>
<td></td>
</tr>
<tr>
<td>10b Less: accumulated depreciation</td>
<td>11,351</td>
<td>67,408</td>
</tr>
<tr>
<td>11 Investments - publicly traded securities</td>
<td>524</td>
<td></td>
</tr>
<tr>
<td>12 Investments - other securities. See Part IV, line 11</td>
<td></td>
<td></td>
</tr>
<tr>
<td>13 Investments - program-related. See Part IV, line 11</td>
<td></td>
<td></td>
</tr>
<tr>
<td>14 Intangible assets</td>
<td></td>
<td></td>
</tr>
<tr>
<td>15 Other assets. See Part IV, line 11</td>
<td>6,611</td>
<td>4,396</td>
</tr>
<tr>
<td>16 Total assets</td>
<td>3,648,201</td>
<td>3,738,814</td>
</tr>
<tr>
<td>17 Accounts payable and accrued expenses</td>
<td>128,671</td>
<td>103,532</td>
</tr>
<tr>
<td>18 Grants payable</td>
<td></td>
<td></td>
</tr>
<tr>
<td>19 Deferred revenue</td>
<td></td>
<td></td>
</tr>
<tr>
<td>20 Tax-exempt bond liabilities</td>
<td></td>
<td></td>
</tr>
<tr>
<td>21 Escrow or custodial account liability. Complete Part IV of Schedule D</td>
<td></td>
<td></td>
</tr>
<tr>
<td>22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L</td>
<td></td>
<td></td>
</tr>
<tr>
<td>23 Secured mortgages and notes payable to unrelated third parties</td>
<td></td>
<td></td>
</tr>
<tr>
<td>24 Unsecured notes and loans payable to unrelated third parties</td>
<td></td>
<td></td>
</tr>
<tr>
<td>25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D</td>
<td></td>
<td></td>
</tr>
<tr>
<td>26 Total liabilities</td>
<td>128,671</td>
<td>103,532</td>
</tr>
</tbody>
</table>

**Net Assets or Fund Balances**

<table>
<thead>
<tr>
<th>Net Assets or Fund Balances</th>
<th>(A) Beginning of year</th>
<th>(B) End of year</th>
</tr>
</thead>
<tbody>
<tr>
<td>Organizations that follow SFAS 117 (ASC 958), check here [X] and complete lines 27 through 29, and lines 33 and 34.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Unrestricted net assets</td>
<td>-54,456</td>
<td>369,527</td>
</tr>
<tr>
<td>Temporarily restricted net assets</td>
<td>3,573,986</td>
<td>3,265,755</td>
</tr>
<tr>
<td>Permanently restricted net assets</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Organizations that do not follow SFAS 117 (ASC 958), check here [ ] and complete lines 30 through 34.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Capital stock or trust principal, or current funds</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Paid-in or capital surplus, or land, building, or equipment fund</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Retained earnings, endowment, accumulated income, or other funds</td>
<td>3,519,530</td>
<td>3,635,282</td>
</tr>
<tr>
<td>Total net assets or fund balances</td>
<td>3,648,201</td>
<td>3,738,814</td>
</tr>
</tbody>
</table>
### Part XI: Reconciliation of Net Assets

<table>
<thead>
<tr>
<th></th>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Total revenue (must equal Part VIII, column (A), line 12)</td>
<td>2,467,767</td>
</tr>
<tr>
<td>2</td>
<td>Total expenses (must equal Part IX, column (A), line 25)</td>
<td>2,352,015</td>
</tr>
<tr>
<td>3</td>
<td>Revenue less expenses. Subtract line 2 from line 1</td>
<td>115,752</td>
</tr>
<tr>
<td>4</td>
<td>Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))</td>
<td>3,519,530</td>
</tr>
<tr>
<td>5</td>
<td>Net unrealized gains (losses) on investments</td>
<td></td>
</tr>
<tr>
<td>6</td>
<td>Donated services and use of facilities</td>
<td></td>
</tr>
<tr>
<td>7</td>
<td>Investment expenses</td>
<td></td>
</tr>
<tr>
<td>8</td>
<td>Prior period adjustments</td>
<td></td>
</tr>
<tr>
<td>9</td>
<td>Other changes in net assets or fund balances (explain in Schedule O)</td>
<td>0</td>
</tr>
<tr>
<td>10</td>
<td>Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))</td>
<td>3,635,282</td>
</tr>
</tbody>
</table>

### Part XII: Financial Statements and Reporting

<table>
<thead>
<tr>
<th></th>
<th>Description</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Accounting method used to prepare the Form 990: Cash ♡ Accrual ☑ Other ♡</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>If the organization changed its method of accounting from a prior year or checked &quot;Other,&quot; explain in Schedule O.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2a</td>
<td>Were the organization's financial statements compiled or reviewed by an independent accountant?</td>
<td>♡</td>
<td>☑</td>
</tr>
<tr>
<td></td>
<td>If &quot;Yes,&quot; 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:</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>☑ Separate basis ☑ Consolidated basis ☑ Both consolidated and separate basis</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2b</td>
<td>Were the organization's financial statements audited by an independent accountant?</td>
<td>☑</td>
<td></td>
</tr>
<tr>
<td></td>
<td>If &quot;Yes,&quot; check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>☑ Separate basis ☑ Consolidated basis ☑ Both consolidated and separate basis</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2c</td>
<td>If &quot;Yes&quot; 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?</td>
<td>☑</td>
<td></td>
</tr>
<tr>
<td></td>
<td>If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3a</td>
<td>As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?</td>
<td>☑</td>
<td></td>
</tr>
<tr>
<td>3b</td>
<td>If &quot;Yes,&quot; did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
### Part I: Reason for Public Charity Status

The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.)

<table>
<thead>
<tr>
<th></th>
<th>Description</th>
<th>Box</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).</td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.)</td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).</td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>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:</td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>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.)</td>
<td></td>
</tr>
<tr>
<td>6</td>
<td>A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).</td>
<td></td>
</tr>
<tr>
<td>7</td>
<td>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.)</td>
<td></td>
</tr>
<tr>
<td>8</td>
<td>A community trust described in section 170(b)(1)(A)(vii). (Complete Part II.)</td>
<td></td>
</tr>
<tr>
<td>9</td>
<td>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.)</td>
<td>X</td>
</tr>
<tr>
<td>10</td>
<td>An organization organized and operated exclusively to test for public safety. See section 509(a)(4).</td>
<td></td>
</tr>
<tr>
<td>11</td>
<td>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 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g.</td>
<td>X</td>
</tr>
<tr>
<td>a</td>
<td>Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving 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.</td>
<td></td>
</tr>
<tr>
<td>b</td>
<td>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.</td>
<td></td>
</tr>
<tr>
<td>c</td>
<td>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.</td>
<td></td>
</tr>
<tr>
<td>d</td>
<td>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.</td>
<td></td>
</tr>
<tr>
<td>e</td>
<td>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.</td>
<td></td>
</tr>
<tr>
<td>f</td>
<td>Enter the number of supported organizations.</td>
<td></td>
</tr>
<tr>
<td>g</td>
<td>Provide the following information about the supported organization(s).</td>
<td></td>
</tr>
</tbody>
</table>

**Note:**
- **(i)** Name of supported organization
- **(ii)** EIN
- **(iii)** Type of organization (described on lines 1-9 above or IRC section (see instructions))
- **(iv)** Is the organization listed in your governing document? [Yes] [No]
- **(v)** Amount of monetary support (see Instructions)
- **(vi)** Amount of other support (see Instructions)

**Total**
Section A. Public Support

Calendar year (or fiscal year beginning in) | (a) 2010 | (b) 2011 | (c) 2012 | (d) 2013 | (e) 2014 | (f) Total
--- | --- | --- | --- | --- | --- | ---
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") | 955,105 | 6,298,872 | 603,618 | 1,019,622 | 2,387,897 | 11,265,114
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf | | | | | | |
3 The value of services or facilities furnished by a governmental unit to the organization without charge | | | | | | |
4 Total Add lines 1 through 3 | 955,105 | 6,298,872 | 603,618 | 1,019,622 | 2,387,897 | 11,265,114
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) | | | | | | |
6 Public support Subtract line 5 from line 4 | | | | | | |

Section B. Total Support

Calendar year (or fiscal year beginning in) | (a) 2010 | (b) 2011 | (c) 2012 | (d) 2013 | (e) 2014 | (f) Total
--- | --- | --- | --- | --- | --- | ---
7 Amounts from line 4 | 955,105 | 6,298,872 | 603,618 | 1,019,622 | 2,387,897 | 11,265,114
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources | 5,195 | 11,102 | 9,010 | 22,315 | 28,202 | 75,824
9 Net income from unrelated business activities, whether or not the business is regularly carried on | | | | | | |
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) | 1,362 | 9,810 | 30,964 | -15,677 | 1,301 | 27,760
11 Total support Add lines 7 through 10 | | | | | | |
12 Gross receipts from related activities, etc. (see instructions) | | | | | | |
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here | | |

Section C. Computation of Public Support Percentage

14 Public support percentage for 2014 (line 6, column (f) divided by line 11, column (f)) | | | | | | |
15 Public support percentage from 2013 Schedule A, Part II, line 14 | | | | | | |
16a 33 1/3% support test - 2014. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization | | |
16b 33 1/3% support test - 2013. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization | | |
17a 10% - facts-and-circumstances test - 2014. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization | | |
17b 10% - facts-and-circumstances test - 2013. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization | | |
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions | | |
## Part II Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

### Section A. Public Support

<table>
<thead>
<tr>
<th>Calendar year (or fiscal year beginning in)</th>
<th>(a) 2010</th>
<th>(b) 2011</th>
<th>(c) 2012</th>
<th>(d) 2013</th>
<th>(e) 2014</th>
<th>(f) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Gifts, grants, contributions, and</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>membership fees received. (Do not</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>include any &quot;unusual grants.&quot;)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2 Gross receipts from admissions,</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>merchandise sold or services performed,</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>or facilities furnished in any activity</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>that is related to the organization's</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>tax-exempt purpose</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3 Gross receipts from activities that</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>are not an unrelated trade or business</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>under section 513</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4 Tax revenues levied for the organ-</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>ization’s benefit and either paid to or</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>expended on its behalf</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5 The value of services or facilities</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>furnished by a governmental unit to the</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>organization without charge</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6 Total. Add lines 1 through 5</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7a Amounts included on lines 1, 2, and 3</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>received from disqualified persons</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b Amounts included on lines 2 and 3</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>received from other than disqualified</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>persons that exceed the greater of $5,000</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>or 1% of the amount on line 13 for the</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>year</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c Add lines 7a and 7b</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8 Public support. (Subtract line 7c from</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>line 6)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Section B. Total Support

<table>
<thead>
<tr>
<th>Calendar year (or fiscal year beginning in)</th>
<th>(a) 2010</th>
<th>(b) 2011</th>
<th>(c) 2012</th>
<th>(d) 2013</th>
<th>(e) 2014</th>
<th>(f) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>9 Amounts from line 6</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10a Gross income from interest, dividends,</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>payments received on securities loans,</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>rents, royalties and income from similar</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>sources</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b Unrelated business taxable income</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(less section 511 taxes) from businesses</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>acquired after June 30, 1975</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c Add lines 10a and 10b</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>11 Net income from unrelated business</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>activities not included in line 10b,</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>whether or not the business is regularly</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>carried on</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>12 Other income. Do not include gain or</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>loss from the sale of capital assets</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(Explain in Part VI.)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>13 Total support. (Add lines 9, 10c, 11,</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>and 12)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>14 First five years. If the Form 990 is for</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>the organization’s first, second, third,</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>fourth, or fifth tax year as a section 501-</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c(3) organization, check this box and STOP</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>here</td>
<td></td>
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<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Section C. Computation of Public Support Percentage

<table>
<thead>
<tr>
<th></th>
<th>(a) 2010</th>
<th>(b) 2011</th>
<th>(c) 2012</th>
<th>(d) 2013</th>
<th>(e) 2014</th>
<th>(f) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>15 Public support percentage for 2014 (line 8, column (f) divided</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>by line 13, column (f))</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>%</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>16 Public support percentage from 2013 Schedule A, Part III,</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>line 15</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>%</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Section D. Computation of Investment Income Percentage

<table>
<thead>
<tr>
<th></th>
<th>(a) 2010</th>
<th>(b) 2011</th>
<th>(c) 2012</th>
<th>(d) 2013</th>
<th>(e) 2014</th>
<th>(f) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>17 Investment income percentage for 2014 (line 10c, column (f)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>divided by line 13, column (f))</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>%</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>18 Investment income percentage from 2013 Schedule A, Part III,</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>line 17</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>%</td>
<td></td>
<td></td>
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<td></td>
</tr>
<tr>
<td>19a 33 1/3% support tests - 2014. If the organization did not</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>check the box on line 14, and line 15 is more than 33 1/3%, and</td>
<td></td>
<td></td>
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<td></td>
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</tr>
<tr>
<td>line 17 is not more than 33 1/3%, check this box and STOP here.</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>The organization qualifies as a publicly supported organization</td>
<td></td>
<td></td>
<td></td>
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<td></td>
<td></td>
</tr>
<tr>
<td>%</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b 33 1/3% support tests - 2013. If the organization did not</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>check the box on line 14 or line 19a, and line 16 is more than</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>33 1/3%, and line 18 is not more than 33 1/3%, check this box</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>and STOP here. The organization qualifies as a publicly</td>
<td></td>
<td></td>
<td></td>
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<td></td>
<td></td>
</tr>
<tr>
<td>supported organization</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>%</td>
<td></td>
<td></td>
<td></td>
<td></td>
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<td></td>
</tr>
<tr>
<td>20 Private foundation. If the organization did not check the</td>
<td></td>
<td></td>
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<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>box on line 14, 19a, or 19b, check this box and see instructions</td>
<td></td>
<td></td>
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<td></td>
</tr>
</tbody>
</table>
## Part IV: Supporting Organizations

(Complete only if you checked a box on line 11 of Part I. If you checked 11a of Part I, complete Sections A and B. If you checked 11b of Part I, complete Sections A and C. If you checked 11c of Part I, complete Sections A, D, and E. If you checked 11d of Part I, complete Sections A and D, and complete Part VI.)

### Section A. All Supporting Organizations

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>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.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>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).</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
| 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 11a or 11b 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 facilities or services) to anyone other than (a) its supported organizations; (b) individuals that are part of the charitable class benefited by one or more of its supported organizations; or (c) 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 IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? If “Yes,” complete Part I of Schedule L (Form 990). |     |    |
| 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). |     |    |
| 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 509(a)(1) or (2))? If “Yes,” provide detail in Part VI.  
  b Did one or more disqualified persons (as defined in line 9(a)) 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 9(a)) 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 IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If “Yes,” answer (b) 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.) |     | 10b |
## Part IV Supporting Organizations (continued)

### Section A. Type I Supporting Organizations

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.

### Section B. Type II Supporting Organizations

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 supported organization was vested in the same persons that controlled or managed the supported organization(s).

### Section C. Type III Supporting Organizations

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, (1) a written notice describing the type and amount of support provided during the prior tax year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the organization’s governing documents in effect on the date of notification, to the extent not previously provided?

### Section D. 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):
   - The organization satisfied the Activities Test. Complete line 2 below.
   - The organization is the parent of each of its supported organizations. Complete line 3 below.
   - The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).

### Section E. Type III Functionally-Integrated Supporting Organizations (continued)

1. Did substantially all of the organization’s activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.

2. Parent of Supported Organizations. Answer (a) and (b) below.
   - Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in Part VI.
   - Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.
### Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

#### Section A - Adjusted Net Income

<table>
<thead>
<tr>
<th></th>
<th>(A) Prior Year</th>
<th>(B) Current Year (optional)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Net short-term capital gain</td>
<td>1</td>
</tr>
<tr>
<td>2</td>
<td>Recoveries of prior-year distributions</td>
<td>2</td>
</tr>
<tr>
<td>3</td>
<td>Other gross income (see instructions)</td>
<td>3</td>
</tr>
<tr>
<td>4</td>
<td>Add lines 1 through 3</td>
<td>4</td>
</tr>
<tr>
<td>5</td>
<td>Depreciation and depletion</td>
<td>5</td>
</tr>
<tr>
<td>6</td>
<td>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)</td>
<td>6</td>
</tr>
<tr>
<td>7</td>
<td>Other expenses (see instructions)</td>
<td>7</td>
</tr>
<tr>
<td>8</td>
<td><strong>Adjusted Net Income</strong> (subtract lines 5, 6 and 7 from line 4)</td>
<td>8</td>
</tr>
</tbody>
</table>

#### Section B - Minimum Asset Amount

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

#### Section C - Distributable Amount

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

<table>
<thead>
<tr>
<th></th>
<th>Current Year</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Amounts paid to supported organizations to accomplish exempt purposes</td>
</tr>
<tr>
<td>2</td>
<td>Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity</td>
</tr>
<tr>
<td>3</td>
<td>Administrative expenses paid to accomplish exempt purposes of supported organizations</td>
</tr>
<tr>
<td>4</td>
<td>Amounts paid to acquire exempt-use assets</td>
</tr>
<tr>
<td>5</td>
<td>Qualified set-aside amounts (prior IRS approval required)</td>
</tr>
<tr>
<td>6</td>
<td>Other distributions (describe in Part VI). See instructions.</td>
</tr>
<tr>
<td>7</td>
<td><strong>Total annual distributions. Add lines 1 through 6.</strong></td>
</tr>
</tbody>
</table>

**Part VI**

8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.

9 Distributable amount for 2014 from Section C, line 6

10 Line 8 amount divided by Line 9 amount

### Section E - Distribution Allocations (see instructions)

<table>
<thead>
<tr>
<th></th>
<th>(i) Excess Distributions</th>
<th>(ii) Underdistributions Pre-2014</th>
<th>(iii) Distributable Amount for 2014</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Distributable amount for 2014 from Section C, line 6</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Underdistributions, if any, for years prior to 2014 (reasonable cause required-see instructions)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>Excess distributions carryover, if any, to 2014:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>a</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b</td>
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<td></td>
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<td>c</td>
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<tr>
<td>d</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>e</td>
<td>From 2013</td>
<td></td>
<td></td>
</tr>
<tr>
<td>f</td>
<td><strong>Total</strong> of lines 3a through e</td>
<td></td>
<td></td>
</tr>
<tr>
<td>g</td>
<td>Applied to underdistributions of prior years</td>
<td></td>
<td></td>
</tr>
<tr>
<td>h</td>
<td>Applied to 2014 distributable amount</td>
<td></td>
<td></td>
</tr>
<tr>
<td>i</td>
<td>Carryover from 2009 not applied (see instructions)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>j</td>
<td>Remainder. Subtract lines 3g, 3h, and 3i from 3f.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>Distributions for 2014 from Section D, line 7:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>a</td>
<td>Applied to underdistributions of prior years</td>
<td></td>
<td></td>
</tr>
<tr>
<td>b</td>
<td>Applied to 2014 distributable amount</td>
<td></td>
<td></td>
</tr>
<tr>
<td>c</td>
<td>Remainder. Subtract lines 4a and 4b from 4.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>Remaining underdistributions for years prior to 2014, if any. Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6</td>
<td>Remaining underdistributions for 2014. Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7</td>
<td><strong>Excess distributions carryover to 2015. Add lines 3j and 4c.</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>a</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>d</td>
<td>Excess from 2013</td>
<td></td>
<td></td>
</tr>
<tr>
<td>e</td>
<td>Excess from 2014</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

---

Schedule A (Form 990 or 990-EZ) 2014
Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).
<table>
<thead>
<tr>
<th>Contributor's Name</th>
<th>Total Contributions</th>
<th>Excess Contributions</th>
</tr>
</thead>
<tbody>
<tr>
<td>BILL &amp; MELINDA GATES FOUNDATION</td>
<td>6,208,013.</td>
<td>5,980,571.</td>
</tr>
<tr>
<td>KAORI SONODA-ZAGE &amp; RAYMOND ZAGE III</td>
<td>428,456.</td>
<td>201,014.</td>
</tr>
<tr>
<td>ROTA FOUNDATION</td>
<td>350,000.</td>
<td>122,558.</td>
</tr>
<tr>
<td>THE CATERPILLAR FOUNDATION</td>
<td>489,842.</td>
<td>262,400.</td>
</tr>
</tbody>
</table>

Total Excess Contributions to Schedule A, Part II, Line 5: 6,566,543.
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.

Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/form990.

Name of the organization
RURAL EDUCATION & DEVELOPMENT, INC.

Employer identification number
23-2656376

Organization type (check one):

Filers of:
Section:

Form 990 or 990-EZ

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

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

☐ 527 political organization

Form 990-PF

☐ 501(c)(3) exempt private foundation

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

☐ 501(c)(3) taxable private foundation

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

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

General Rule

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

Special Rules

X For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) $5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.

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

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

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

LHA  For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2014)
### Part I Contributors

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

<table>
<thead>
<tr>
<th>No.</th>
<th>Name, address, and ZIP + 4</th>
<th>Total contributions</th>
<th>Type of contribution</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>KAORI SONODA-ZAGE &amp; RAYMOND ZAGE III</td>
<td>$175,000.</td>
<td>Person X Payroll</td>
</tr>
<tr>
<td></td>
<td>35 BELMONT RD</td>
<td></td>
<td>(Complete Part II for noncash contributions.)</td>
</tr>
<tr>
<td></td>
<td>SINGAPORE 269872</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>ROTA FOUNDATION</td>
<td>$350,000.</td>
<td>Person X Payroll</td>
</tr>
<tr>
<td></td>
<td>P.O. BOX 5825</td>
<td></td>
<td>(Complete Part II for noncash contributions.)</td>
</tr>
<tr>
<td></td>
<td>DOHA, QATAR</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

(Complete Part II for noncash contributions.)

(Complete Part II for noncash contributions.)

(Complete Part II for noncash contributions.)

(Complete Part II for noncash contributions.)

(Complete Part II for noncash contributions.)

(Complete Part II for noncash contributions.)
<table>
<thead>
<tr>
<th>No. from Part I</th>
<th>Description of noncash property given</th>
<th>FMV (or estimate) (see instructions)</th>
<th>Date received</th>
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</thead>
<tbody>
<tr>
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</tbody>
</table>
For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of $1,000 or less for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of $1,000 or less for the year from any one contributor.

<table>
<thead>
<tr>
<th>(a) No. from Part I</th>
<th>(b) Purpose of gift</th>
<th>(c) Use of gift</th>
<th>(d) Description of how gift is held</th>
<th>(e) Transfer of gift</th>
</tr>
</thead>
<tbody>
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</tbody>
</table>

Transferee’s name, address, and ZIP + 4

Relationship of transferor to transferee

<table>
<thead>
<tr>
<th>Transferee’s name, address, and ZIP + 4</th>
<th>Relationship of transferor to transferee</th>
</tr>
</thead>
<tbody>
<tr>
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<thead>
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<th>(b) Purpose of gift</th>
<th>(c) Use of gift</th>
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</tbody>
</table>

Transferee’s name, address, and ZIP + 4

Relationship of transferor to transferee

<table>
<thead>
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<th>Transferee’s name, address, and ZIP + 4</th>
<th>Relationship of transferor to transferee</th>
</tr>
</thead>
<tbody>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>(a) No. from Part I</th>
<th>(b) Purpose of gift</th>
<th>(c) Use of gift</th>
<th>(d) Description of how gift is held</th>
<th>(e) Transfer of gift</th>
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<tbody>
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</tr>
</tbody>
</table>

Transferee’s name, address, and ZIP + 4

Relationship of transferor to transferee

<table>
<thead>
<tr>
<th>Transferee’s name, address, and ZIP + 4</th>
<th>Relationship of transferor to transferee</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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</tr>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than $1,000 for the year from any one contributor.

Use duplicate copies of Part III if additional space is needed.
Part I  Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

1. Total number at end of year .................................................................

2. Aggregate value of contributions to (during year) ................................

3. Aggregate value of grants from (during year) ......................................

4. Aggregate value at end of year ............................................................

5. Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization’s property, subject to the organization’s exclusive legal control? □ Yes □ No

6. Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? □ Yes □ No

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

1. Purpose(s) of conservation easements held by the organization (check all that apply).
   □ Preservation of land for public use (e.g., recreation or education)
   □ Preservation of a historically important land area
   □ Protection of natural habitat
   □ Preservation of open space

2. Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.
   a. Total number of conservation easements ..............................................
   b. Total acreage restricted by conservation easements ..............................
   c. Number of conservation easements on a certified historic structure included in (a) ........................................
   d. Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register ........................................

3. Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶

4. Number of states where property subject to conservation easement is located ▶

5. Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? □ Yes □ No

6. Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ▶

7. Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ $

8. Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? □ Yes □ No

9. In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization’s financial statements that describes the organization’s accounting for conservation easements.

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

1. If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items.

2. If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:
   (i) Revenue included in Form 990, Part VIII, line 1 ▶ $
   (ii) Assets included in Form 990, Part X ▶ $

2. If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:
   a. Revenue included in Form 990, Part VIII, line 1 ▶ $
   b. Assets included in Form 990, Part X ▶ $

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

Schedule D (Form 990) 2014

RURAL EDUCATION & DEVELOPMENT, INC.

Employer identification number 23-2656376

2014
Schedule D (Form 990) 2014

RURAL EDUCATION & DEVELOPMENT, INC.  23-2656376

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

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items:
   (check all that apply):
   a Public exhibition
   b Scholarly research
   c Preservation for future generations
   d Loan or exchange programs
   e Other

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?  Yes ☐ No ☐

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

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?  Yes ☐ No ☐

b If "Yes," explain the arrangement in Part XIII and complete the following table:

<table>
<thead>
<tr>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>1c</td>
</tr>
<tr>
<td>1d</td>
</tr>
<tr>
<td>1e</td>
</tr>
<tr>
<td>1f</td>
</tr>
</tbody>
</table>

2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?  Yes ☐ No ☐

b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII ☐

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

1a Beginning of year balance
b Contributions
c Net investment earnings, gains, and losses
d Grants or scholarships
e Other expenditures for facilities and programs
f Administrative expenses
g End of year balance

<table>
<thead>
<tr>
<th>(a) Current year</th>
<th>(b) Prior year</th>
<th>(c) Two years back</th>
<th>(d) Three years back</th>
<th>(e) Four years back</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
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<td></td>
<td></td>
</tr>
</tbody>
</table>

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

a Board designated or quasi-endowment %
b Permanent endowment %
c Temporarily restricted endowment %

The percentages in lines 2a, 2b, and 2c should equal 100%.

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

(i) unrelated organizations Yes ☐ No ☐

(ii) related organizations

b If "Yes" to 3a(i), are the related organizations listed as required on Schedule R?  Yes ☐ No ☐

4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI | Land, Buildings, and Equipment. Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

<table>
<thead>
<tr>
<th>Description of property</th>
<th>(a) Cost or other basis (investment)</th>
<th>(b) Cost or other basis (other)</th>
<th>(c) Accumulated depreciation</th>
<th>(d) Book value</th>
</tr>
</thead>
<tbody>
<tr>
<td>1a Land</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b Buildings</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c Leasehold improvements</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>d Equipment</td>
<td>62,734.</td>
<td>10,041.</td>
<td>52,693.</td>
<td></td>
</tr>
<tr>
<td>e Other</td>
<td>8,576.</td>
<td>1,310.</td>
<td>7,266.</td>
<td></td>
</tr>
</tbody>
</table>

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.) 59,959.

Schedule D (Form 990) 2014
### Part VII | Investments - Other Securities.

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

<table>
<thead>
<tr>
<th>Description of security or category (including name of security)</th>
<th>(b) Book value</th>
<th>(c) Method of valuation: Cost or end-of-year market value</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) Financial derivatives</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(2) Closely-held equity interests</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(3) Other &lt;br&gt; (A)</td>
<td></td>
<td></td>
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<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Part VIII | Investments - Program Related.

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

<table>
<thead>
<tr>
<th>Description of investment</th>
<th>(b) Book value</th>
<th>(c) Method of valuation: Cost or end-of-year market value</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(2)</td>
<td></td>
<td></td>
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<tr>
<td>(3)</td>
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<td>(4)</td>
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<td>(5)</td>
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<tr>
<td>(8)</td>
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<tr>
<td>(9)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Part IX | Other Assets.

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

<table>
<thead>
<tr>
<th>Description</th>
<th>(b) Book value</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1)</td>
<td></td>
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<tr>
<td>(2)</td>
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<td>(3)</td>
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<td>(4)</td>
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<td>(5)</td>
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<tr>
<td>(8)</td>
<td></td>
</tr>
<tr>
<td>(9)</td>
<td></td>
</tr>
<tr>
<td>Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)</td>
<td></td>
</tr>
</tbody>
</table>

### Part X | Other Liabilities.

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

1. **Federal income taxes**

<table>
<thead>
<tr>
<th>Description of liability</th>
<th>(b) Book value</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1)</td>
<td></td>
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<tr>
<td>(2)</td>
<td></td>
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<tr>
<td>(3)</td>
<td></td>
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<tr>
<td>(4)</td>
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<tr>
<td>(8)</td>
<td></td>
</tr>
<tr>
<td>(9)</td>
<td></td>
</tr>
</tbody>
</table>

Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)

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

---

Schedule D (Form 990) 2014
PART XI, LINE 2:

FOR THE YEAR ENDED DECEMBER 31, 2014, READ GLOBAL HAS DOCUMENTED ITS CONSIDERATION OF FASB ASC 740-10, INCOME TAXES, THAT PROVIDES GUIDANCE FOR REPORTING UNCERTAINTY IN INCOME TAXES AND HAS DETERMINED THAT NO MATERIAL UNCERTAIN TAX POSITIONS QUALIFY FOR EITHER RECOGNITION OR DISCLOSURE IN THE FINANCIAL STATEMENTS.
### Statement of Activities Outside the United States

**Part I General Information on Activities Outside the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 14b.

1. **For grantmakers.** Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  □ Yes  □ No

2. **For grantmakers.** Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.

### Activities per Region

<table>
<thead>
<tr>
<th>(a) Region</th>
<th>(b) Number of offices in the region</th>
<th>(c) Number of employees, agents, and independent contractors in region</th>
<th>(d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, grants to recipients located in the region)</th>
<th>(e) If activity listed in (d) is a program service, describe specific type of service(s) in region</th>
<th>(f) Total expenditures for and investments in region</th>
</tr>
</thead>
<tbody>
<tr>
<td>SOUTH ASIA</td>
<td>3</td>
<td>35</td>
<td>PROGRAM SERVICES</td>
<td>PARTNERING WITH RURAL COMMUNITIES TO BUILD COMMUNITY LIBRARY AND RESOURCE CENTERS AS</td>
<td>1,328,465.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>3a Sub-total</th>
<th>3</th>
<th>35</th>
<th>1,328,465.</th>
</tr>
</thead>
<tbody>
<tr>
<td>b Total from continuation sheets to Part I</td>
<td>0</td>
<td>0</td>
<td>0.</td>
</tr>
<tr>
<td>c Totals (add lines 3a and 3b)</td>
<td>3</td>
<td>35</td>
<td>1,328,465.</td>
</tr>
</tbody>
</table>

**SEE PART V FOR COLUMN (E) DESCRIPTIONS**
**Part II Grants and Other Assistance to Organizations or Entities Outside the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th></th>
<th>Name of organization</th>
<th>IRS code section and EIN (if applicable)</th>
<th>Region</th>
<th>Purpose of grant</th>
<th>Amount of cash grant</th>
<th>Manner of cash disbursement</th>
<th>Amount of non-cash assistance</th>
<th>Description of non-cash assistance</th>
<th>Method of valuation (book, FMV, appraisal, other)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>RURAL EDUCATION &amp; DEVELOPMENT, INC.</td>
<td>23-2656376</td>
<td>15580602</td>
<td>745960</td>
<td>27550</td>
<td>2014.05093</td>
<td>RURAL EDUCATION &amp; DEVELOPMENT</td>
<td>27550</td>
<td></td>
</tr>
</tbody>
</table>

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter

3 Enter total number of other organizations or entities
Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16.

Part III can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(a) Type of grant or assistance</th>
<th>(b) Region</th>
<th>(c) Number of recipients</th>
<th>(d) Amount of cash grant</th>
<th>(e) Manner of cash disbursement</th>
<th>(f) Amount of non-cash assistance</th>
<th>(g) Description of non-cash assistance</th>
<th>(h) Method of valuation (book, FMV, appraisal, other)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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</tr>
</tbody>
</table>
### Part IV Foreign Forms

1. **Was the organization a U.S. transferor of property to a foreign corporation during the tax year?**
   - If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)
   - **Yes** ☐, **No** ☑

2. **Did the organization have an interest in a foreign trust during the tax year?**
   - If "Yes," the organization may be required to file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; do not file with Form 990)
   - **Yes** ☐, **No** ☑

3. **Did the organization have an ownership interest in a foreign corporation during the tax year?**
   - If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To Certain Foreign Corporations (see Instructions for Form 5471)
   - **Yes** ☐, **No** ☑

4. **Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year?**
   - If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)
   - **Yes** ☐, **No** ☑

5. **Did the organization have an ownership interest in a foreign partnership during the tax year?**
   - If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see Instructions for Form 8865)
   - **Yes** ☐, **No** ☑

6. **Did the organization have any operations in or related to any boycotting countries during the tax year?**
   - If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713; do not file with Form 990)
   - **Yes** ☐, **No** ☑
Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information.

**PART I, LINE 3, COLUMN (E):**

**REGION: SOUTH ASIA**

**(E) SPECIFIC TYPES OF SERVICES IN REGION: PARTNERING WITH RURAL COMMUNITIES TO BUILD COMMUNITY LIBRARY AND RESOURCE CENTERS AS VEHICLES FOR SOCIAL AND ECONOMIC TRANSFORMATION.**
### Part I

**Fundraising Activities.** Complete if the organization answered "Yes" to Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

1. Indicate whether the organization raised funds through any of the following activities. Check all that apply.
   - [X] Mail solicitations
   - [X] Internet and email solicitations
   - [X] Phone solicitations
   - [X] In-person solicitations
   - [X] Solicitation of non-government grants
   - [ ] Solicitation of government grants
   - [X] Special fundraising events

2. a. Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? **[X] Yes  [ ] No**

   b. If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least $5,000 by the organization.

   **(i) Name and address of individual or entity (fundraiser)**
   **(ii) Activity**
   **(iii) Did fundraiser have custody or control of contributions?**
   **(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**

   - **PAMELA JOYCE - 120 LINDEN LANE, SAN RAFAEL, CA 94901**
     - Activity: Fundraising Consulting
     - Did fundraiser have custody or control of contributions?: Yes
     - Gross receipts from activity: 0
     - Amount paid to fundraiser: 13,050
     - Amount paid to organization: -13,050

   - **SMARTER GOOD - 180 9TH AVENUE, SAN FRANCISCO, CA**
     - Activity: Grant Management Services
     - Did fundraiser have custody or control of contributions?: Yes
     - Gross receipts from activity: 0
     - Amount paid to fundraiser: 14,000
     - Amount paid to organization: -14,000

   **Total:**
   - Gross receipts from activity: 27,050
   - Amount paid to fundraiser: -27,050
   - Amount paid to organization: 0

3. List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

   - 
   - 
   - 
   - 
   - 
   - 
   - 
   - 
   - 

---

**LHA** For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule G (Form 990 or 990-EZ) 2014

SEE PART IV FOR CONTINUATIONS

15580602 745960 27550 2014.05093 RURAL EDUCATION & DEVELOPMENT 27550_4
### Part II Fundraising Events

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

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

### Part III Gaming

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

<table>
<thead>
<tr>
<th>Revenue</th>
<th>Bingo</th>
<th>Pull tabs/instant bingo/progressive bingo</th>
<th>Other gaming</th>
<th>Total gaming (add col. (a) through col. (c))</th>
</tr>
</thead>
<tbody>
<tr>
<td>(a)</td>
<td>(b)</td>
<td>(c)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(event type)</td>
<td>(event type)</td>
<td>(total number)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1 Gross revenue</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2 Cash prizes</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3 Noncash prizes</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4 Rent/facility costs</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5 Other direct expenses</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6 Volunteer labor</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7 Direct expense summary. Add lines 2 through 5 in column (d)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8 Net gaming income summary. Subtract line 7 from line 1, column (d)</td>
<td></td>
<td></td>
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</tr>
</tbody>
</table>

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

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

b If "No," explain: ____________________________

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

b If "Yes," explain: ____________________________
Schedule G (Form 990 or 990-EZ) 2014  RURAL EDUCATION & DEVELOPMENT, INC.  23-2656376  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  
   ☐ Yes  ☐ No  
   b  An outside facility  
   ☐ Yes  ☐ No
   
   13a %
   13b %

14  Enter the name and address of the person who prepares the organization's gaming/special events books and records:
   
   Name ► 
   Address ►

15a  Does the organization have a contract with a third party from whom the organization receives gaming revenue?  
   ☐ Yes  ☐ No

   b  If "Yes," enter the amount of gaming revenue received by the organization ► $ and the amount of gaming revenue retained by the third party ► $ .

   c  If "Yes," enter name and address of the third party:
   
   Name ► 
   Address ►

16  Gaming manager information:
   
   Name ► 
   
   Gaming manager compensation ► $ 
   
   Description of services provided ►
   
   ☐ Director/officer  ☐ Employee  ☐ Independent contractor

17  Mandatory distributions:
   a  Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?  
      ☐ Yes  ☐ No

   b  Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ► $ .

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

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

(I) NAME OF FUNDRAISER: PAMELA JOYCE

(I) ADDRESS OF FUNDRAISER: 120 LINDEN LANE, SAN RAFAEL, CA  94901

(I) NAME OF FUNDRAISER: SMARTER GOOD

(I) ADDRESS OF FUNDRAISER: 180 9TH AVENUE, SAN FRANCISCO, CA  94118
### Supplemental Information to Form 990 or 990-EZ

**Name of the organization**: RURAL EDUCATION & DEVELOPMENT, INC.  
**Employer identification number**: 23-2656376

- **FORM 990, PART I, AMENDED RETURN:**
  
  The original 990 was prepared prior to the completion of the 2014 audit. The amended return reflects subsequent audit adjustments. Due to these adjustments, Parts I, III, VIII, IX, X, XI and XII along with Schedules A, D and O have been updated.

- **FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:**
  
  With each center, read also seeds a for-profit "sustaining enterprise", a small business that generates income to fund the ongoing costs of the center. The centers are built by Read and owned by the community.

- **FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:**
  
  15,761 adults participated in livelihood skills development, 2246 people took computer classes, and 906 community members participated in capacity-building training to more effectively run Read centers and meet the needs of rural villagers.

- **FORM 990, PART VI, SECTION A, LINE 2:**
  
  Antonia Neubauer and Lawrence Neubauer have a family relationship.

- **FORM 990, PART VI, SECTION B, LINE 11:**
  
  The form 990 was prepared by the outside accountants, and reviewed by senior management. The board received a copy of the form 990 before it was filed with the IRS.
IN CONNECTION WITH ANY ACTUAL OR POSSIBLE CONFLICT OF INTEREST, AN INTERESTED PARTY DISCLOSES THE EXISTENCE OF THE FINANCIAL AND/OR PERSONAL INTERESTS AND IS GIVEN THE OPPORTUNITY TO DISCLOSE ALL MATERIAL FACTS TO THE DISINTERESTED DIRECTORS.

AFTER DISCLOSURE OF THE FINANCIAL OR PERSONAL INTEREST AND ALL MATERIAL FACTS, AND AFTER ANY DISCUSSIONS WITH THE INTERESTED PARTY, HE OR SHE LEAVES THE BOARD MEETING WHILE THE DETERMINATION OF A CONFLICT OF INTEREST IS DISCUSSED AND VOTED UPON. THE REMAINING BOARD OR COMMITTEE MEMBERS DECIDES IF A CONFLICT OF INTEREST EXISTS.

AN INTERESTED PARTY MAY MAKE A PRESENTATION AT THE BOARD OF DIRECTORS MEETING, BUT AFTER THE PRESENTATION HE OR SHE LEAVES THE MEETING DURING THE DISCUSSION OF, AND THE VOTE ON, THE TRANSACTION OR ARRANGEMENT INVOLVING THE POSSIBLE CONFLICT OF INTEREST.

THE CHAIR OF THE BOARD OF DIRECTORS, IF APPROPRIATE, APPOINTS A DISINTERESTED PERSON OR COMMITTEE TO INVESTIGATE ALTERNATIVES TO THE PROPOSED TRANSACTION OR ARRANGEMENT.

AFTER EXERCISING DUE DILIGENCE, THE BOARD OF DIRECTORS DETERMINES WHETHER READ CAN OBTAIN WITH REASONABLE EFFORTS A MORE ADVANTAGEOUS TRANSACTION OR ARRANGEMENT FROM A PERSON OR ENTITY THAT WOULD NOT GIVE RISE TO A CONFLICT OF INTEREST.

IF A MORE ADVANTAGEOUS TRANSACTION OR ARRANGEMENT IS NOT REASONABLY POSSIBLE UNDER CIRCUMSTANCES NOT PRODUCING A CONFLICT OF INTEREST, THE BOARD OF DIRECTORS DETERMINES BY A MAJORITY VOTE OF THE DISINTERESTED
DIRECTORS WHETHER THE TRANSACTION OR ARRANGEMENT IS IN READ'S BEST INTEREST, FOR ITS OWN BENEFIT, AND WHETHER IT IS FAIR AND REASONABLE. IN CONFORMITY WITH THE ABOVE DETERMINATION, IT MAKES ITS DECISION AS TO WHETHER TO ENTER INTO THE TRANSACTION OR ARRANGEMENT.

---

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


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

THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST.
## California Exempt Organization Annual Information Return

**TAXABLE YEAR**

California corporation number

**2014**

**RURAL EDUCATION & DEVELOPMENT, INC.**

**FEIN**

23–2656376

**City**

SAN FRANCISCO

**State**

CA

**ZIP code**

94129

**Part I** Complete Part I unless not required to file this form. See General Instructions B and C.

### Receipts and Revenues

<table>
<thead>
<tr>
<th>Line</th>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Gross sales or receipts from other sources. From Side 2, Part II, line 8</td>
<td>$81,745.00</td>
</tr>
<tr>
<td>2</td>
<td>Gross dues and assessments from members and affiliates</td>
<td>$2,387,897.00</td>
</tr>
<tr>
<td>3</td>
<td>Gross contributions, gifts, grants, and similar amounts received</td>
<td>$2,469,642.00</td>
</tr>
<tr>
<td>4</td>
<td>Total gross receipts for filing requirement test. Add line 1 through line 3. This line must be completed. If the result is less than $50,000, see General Instruction B</td>
<td>$4,175,250.00</td>
</tr>
</tbody>
</table>

### Expenses

<table>
<thead>
<tr>
<th>Line</th>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>5</td>
<td>Cost of goods sold</td>
<td>$2,467,767.00</td>
</tr>
<tr>
<td>6</td>
<td>Cost or other basis, and sales expenses of assets sold</td>
<td>$1,875.00</td>
</tr>
<tr>
<td>7</td>
<td>Total costs. Add line 5 and line 6</td>
<td>$2,471,642.00</td>
</tr>
<tr>
<td>8</td>
<td>Total gross income. Subtract line 7 from line 4</td>
<td>$1,973,288.00</td>
</tr>
</tbody>
</table>

### Filing Fee

<table>
<thead>
<tr>
<th>Line</th>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>11</td>
<td>Filing fee $10 or $25. See General Instruction F</td>
<td>$15.00</td>
</tr>
<tr>
<td>12</td>
<td>Total payments</td>
<td>$115,752.00</td>
</tr>
<tr>
<td>13</td>
<td>Penalties and interest. See General Instruction J</td>
<td>$0.00</td>
</tr>
<tr>
<td>14</td>
<td>Use tax. See General Instruction K</td>
<td>$0.00</td>
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</tbody>
</table>

### Balance due

<table>
<thead>
<tr>
<th>Line</th>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>15</td>
<td>Balance due. Add line 11, line 13, and line 14. Then subtract line 12 from the result</td>
<td>$0.00</td>
</tr>
</tbody>
</table>

**Sign Here**

Signature of officer

[Signature]

Title

EXECUTIVE DIRE

Telephone

[Phone number]

**Preparer’s signature**

[Signature]

Date

[Date]

[Signature]

**Paid Preparer’s Use Only**

Firm’s name (or yours, if self-employed) and address

GELMAN, ROSENBERG & FREEDMAN

4550 MONTGOMERY AVE SUITE 650N

BETHESDA, MD 20814–2930

[Phone number]

(301) 951–9090

May the FTB discuss this return with the preparer shown above? See instructions

[Yes] [No]
RURAL EDUCATION & DEVELOPMENT, INC. 23-2656376

Part II
Organizations with gross receipts of more than $50,000 and private foundations regardless of amount of gross receipts - complete Part II or furnish substitute information.

<table>
<thead>
<tr>
<th>1</th>
<th>Gross sales or receipts from all business activities. See instructions</th>
<th>1</th>
<th>50,221.00</th>
</tr>
</thead>
<tbody>
<tr>
<td>2</td>
<td>Interest</td>
<td>2</td>
<td>28,202.00</td>
</tr>
<tr>
<td>3</td>
<td>Dividends</td>
<td>3</td>
<td>0.00</td>
</tr>
<tr>
<td>4</td>
<td>Gross rents</td>
<td>4</td>
<td>0.00</td>
</tr>
<tr>
<td>5</td>
<td>Gross royalties</td>
<td>5</td>
<td>0.00</td>
</tr>
<tr>
<td>6</td>
<td>Gross amount received from sale of assets (See Instructions)</td>
<td>6</td>
<td>2,021.00</td>
</tr>
<tr>
<td>7</td>
<td>Other income</td>
<td>7</td>
<td>1,301.00</td>
</tr>
<tr>
<td>8</td>
<td>Total gross sales or receipts from other sources. Add line 1 through line 7. Enter here and on Side 1, Part I, line 1</td>
<td>8</td>
<td>81,745.00</td>
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<tr>
<td>9</td>
<td>Contributions, gifts, grants, and similar amounts paid</td>
<td>9</td>
<td>0.00</td>
</tr>
<tr>
<td>10</td>
<td>Disbursements to or for members</td>
<td>10</td>
<td>0.00</td>
</tr>
<tr>
<td>11</td>
<td>Compensation of officers, directors, and trustees</td>
<td>11</td>
<td>127,502.00</td>
</tr>
<tr>
<td>12</td>
<td>Other salaries and wages</td>
<td>12</td>
<td>648,749.00</td>
</tr>
<tr>
<td>13</td>
<td>Interest</td>
<td>13</td>
<td>0.00</td>
</tr>
<tr>
<td>14</td>
<td>Taxes</td>
<td>14</td>
<td>33,946.00</td>
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<tr>
<td>15</td>
<td>Rents</td>
<td>15</td>
<td>87,130.00</td>
</tr>
<tr>
<td>16</td>
<td>Depreciation and depletion (See Instructions)</td>
<td>16</td>
<td>10,215.00</td>
</tr>
<tr>
<td>17</td>
<td>Other Expenses and Disbursements</td>
<td>17</td>
<td>1,444,473.00</td>
</tr>
<tr>
<td>18</td>
<td>Total expenses and disbursements. Add line 9 through line 17. Enter here and on Side 1, Part I, line 9</td>
<td>18</td>
<td>2,352,015.00</td>
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</table>

Schedule L  Balance Sheets

<table>
<thead>
<tr>
<th>Assets</th>
<th>Beginning of taxable year</th>
<th>End of taxable year</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Cash</td>
<td>3,499,939.00</td>
<td>2,226,791.00</td>
</tr>
<tr>
<td>2 Net accounts receivable</td>
<td>62,343.00</td>
<td>45,488.00</td>
</tr>
<tr>
<td>3 Net notes receivable</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4 Inventories</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5 Federal and state government obligations</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6 Investments in other bonds</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7 Investments in stock</td>
<td></td>
<td></td>
</tr>
<tr>
<td>8 Mortgage loans</td>
<td></td>
<td></td>
</tr>
<tr>
<td>9 Other investments</td>
<td>129,434.00</td>
<td>71,310.00</td>
</tr>
<tr>
<td>10 Depreciable assets</td>
<td>62,028.00</td>
<td>55,959.00</td>
</tr>
<tr>
<td>11 Land</td>
<td></td>
<td></td>
</tr>
<tr>
<td>12 Other assets</td>
<td>17,987.00</td>
<td>1,406,576.00</td>
</tr>
<tr>
<td>13 Total assets</td>
<td>3,648,201.00</td>
<td>3,738,814.00</td>
</tr>
</tbody>
</table>

Liabilities and net worth

<table>
<thead>
<tr>
<th>Liabilities and net worth</th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>14 Accounts payable</td>
<td>128,671.00</td>
<td>103,532.00</td>
</tr>
<tr>
<td>15 Contributions, gifts, or grants payable</td>
<td></td>
<td></td>
</tr>
<tr>
<td>16 Bonds and notes payable</td>
<td></td>
<td></td>
</tr>
<tr>
<td>17 Mortgages payable</td>
<td></td>
<td></td>
</tr>
<tr>
<td>18 Other liabilities</td>
<td></td>
<td></td>
</tr>
<tr>
<td>19 Capital stock or principal fund</td>
<td></td>
<td></td>
</tr>
<tr>
<td>20 Paid-in or capital surplus. Attach reconciliation</td>
<td></td>
<td></td>
</tr>
<tr>
<td>21 Retained earnings or income fund</td>
<td>3,519,530.00</td>
<td>3,635,282.00</td>
</tr>
<tr>
<td>22 Total liabilities and net worth</td>
<td>3,648,201.00</td>
<td>3,738,814.00</td>
</tr>
</tbody>
</table>

Schedule M-1  Reconciliation of income per books with income per return

Do not complete this schedule if the amount on Schedule L, line 13, column (d), is less than $50,000.

| 1 Net income per books | 115,752.00 |
| 2 Federal income tax | | |
| 3 Excess of capital losses over capital gains | | |
| 4 Income not recorded on books this year | | |
| 5 Expenses recorded on books this year not deducted in this return | 115,752.00 |
| 6 Total. Add line 1 through line 5 | 115,752.00 |

<p>| 7 Income recorded on books this year | | |
| 8 Deductions in this return not charged | | |
| 9 Total. Add line 7 and line 8 | | |
| 10 Net income per return | 115,752.00 |
| Subtract line 9 from line 6 | | |</p>
<table>
<thead>
<tr>
<th>CONTRIBUTOR'S NAME</th>
<th>CONTRIBUTOR'S ADDRESS</th>
<th>DATE OF GIFT</th>
<th>AMOUNT</th>
</tr>
</thead>
<tbody>
<tr>
<td>MONICA MCGUE</td>
<td>205 LAUREL GROVE AVENUE KENTFIELD, CA 94904</td>
<td>12/31/14</td>
<td>5,250.</td>
</tr>
<tr>
<td>JAGJIT KAUR</td>
<td>119 TRAMWAY ROAD INCLINE VILLAGE, NV 89451</td>
<td>12/31/14</td>
<td>5,475.</td>
</tr>
<tr>
<td>MICHAEL HIRSCHHORN &amp; JIMENA MARTINEZ</td>
<td>307 STERLING PLACE BROOKLYN, NY 11238</td>
<td>12/31/14</td>
<td>5,500.</td>
</tr>
<tr>
<td>KAREN &amp; STEPHEN WIEL</td>
<td>930 TAHOE BLVD., #802-373 INCLINE VILLAGE, NV 89451</td>
<td>12/31/14</td>
<td>5,850.</td>
</tr>
<tr>
<td>MYTHS AND MOUNTAINS, INC.</td>
<td>976 TEE COURT INCLINE VILLAGE, NV 89451</td>
<td>12/31/14</td>
<td>5,805.</td>
</tr>
<tr>
<td>ASHISH GUPTA &amp; KANCHANA SHAHI</td>
<td>20 MOUNT ECHO PARK SINGAPORE 248783</td>
<td>12/31/14</td>
<td>7,192.</td>
</tr>
<tr>
<td>ALEXANDER CHARLES HUNGATE</td>
<td>8 NAPIER ROAD SINGAPORE 258502</td>
<td>12/31/14</td>
<td>7,750.</td>
</tr>
<tr>
<td>SEAN AND LISA WALLACE</td>
<td>27A SWETTENHAM ROAD SINGAPORE 248128</td>
<td>12/31/14</td>
<td>7,800.</td>
</tr>
<tr>
<td>T &amp; J MEYER FAMILY FOUNDATION</td>
<td>3 KENDRICK MEWS LONDON UNITED KINGDOM SW7 3HG</td>
<td>12/31/14</td>
<td>10,000.</td>
</tr>
<tr>
<td>MR. JEREMY BREST</td>
<td>814 TOLMAN DRIVE STANFORD, CA 94305</td>
<td>12/31/14</td>
<td>10,000.</td>
</tr>
<tr>
<td>SCHWAB CHARITABLE FUND</td>
<td>211 MAIN STREET SAN FRANCISCO, CA 94105</td>
<td>12/31/14</td>
<td>7,568.</td>
</tr>
<tr>
<td>VICTORIA LAUTMAN</td>
<td>3100 N. SHERIDAN, #58 CHICAGO, IL 60657</td>
<td>12/31/14</td>
<td>12,400.</td>
</tr>
<tr>
<td>KATE KINLEY GREGG</td>
<td>50 PU‘U ANOANO ST #704 LAHAINA, HI 96751-1955</td>
<td>12/31/14</td>
<td>12,500.</td>
</tr>
<tr>
<td>MARY GUINAN</td>
<td>930 TAHOE BLVD, NO. 802 PAKMAIL NO. 529 INCLINE VILLAGE, NV 89451</td>
<td>12/31/14</td>
<td>15,125.</td>
</tr>
<tr>
<td>THE NEW YORK COMMUNITY TRUST: GREGG, KATE</td>
<td>909 THIRD AVE NEW YORK, NY 10022</td>
<td>12/31/14</td>
<td>21,000.</td>
</tr>
</tbody>
</table>

STATEMENT(S) 1
<table>
<thead>
<tr>
<th>Name</th>
<th>Address</th>
<th>Date</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>NEUBAUER, LAWRENCE &amp; JILLIAN</td>
<td>115 CENTRAL PARK WEST # 16G NEW YORK, NY 10023</td>
<td>12/31/14</td>
<td>25,000.</td>
</tr>
<tr>
<td>ANDERSON, PAUL &amp; MELISSA</td>
<td>831 BLACK ROCK ROAD GLADWYNE, PA 19035</td>
<td>12/31/14</td>
<td>25,000.</td>
</tr>
<tr>
<td>KAORI SONODA-ZAGE &amp; RAYMOND ZAGE III</td>
<td>35 BELMONT RD SINGAPORE 269872</td>
<td>12/31/14</td>
<td>175,000.</td>
</tr>
<tr>
<td>ROTA FOUNDATION</td>
<td>P.O. BOX 5825 DOHA QATAR</td>
<td>12/31/14</td>
<td>350,000.</td>
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</tbody>
</table>

TOTAL INCLUDED ON LINE 3

714,215.
## FORM 199

**GROSS AMOUNT FROM SALE OF ASSETS**

<table>
<thead>
<tr>
<th>DESCRIPTION</th>
<th>DATE ACQUIRED</th>
<th>DATE SOLD</th>
<th>METHOD ACQUIRED</th>
<th>COST OR OTHER BASIS</th>
<th>DEPREN.</th>
<th>EXPENSE OF SALE</th>
<th>GROSS SALES PRICE</th>
</tr>
</thead>
<tbody>
<tr>
<td>PURCHASED</td>
<td></td>
<td></td>
<td></td>
<td>1,875.</td>
<td>0.</td>
<td>0.</td>
<td>2,021.</td>
</tr>
</tbody>
</table>

**TOTAL TO FORM 199, PAGE 2, LN 6**

<table>
<thead>
<tr>
<th>DESCRIPTION</th>
<th>DATE ACQUIRED</th>
<th>DATE SOLD</th>
<th>METHOD ACQUIRED</th>
<th>COST OR OTHER BASIS</th>
<th>DEPREN.</th>
<th>EXPENSE OF SALE</th>
<th>GROSS SALES PRICE</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>1,875.</td>
<td>0.</td>
<td></td>
<td>0.</td>
<td>2,021.</td>
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## FORM 199

**OTHER INCOME**

<table>
<thead>
<tr>
<th>DESCRIPTION</th>
<th>AMOUNT</th>
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<tbody>
<tr>
<td>MISCELLANEOUS INCOME</td>
<td>42,538.</td>
</tr>
<tr>
<td>LOSS ON EXCHANGE RATE</td>
<td>-41,237.</td>
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**TOTAL TO FORM 199, PART II, LINE 7**

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<thead>
<tr>
<th>DESCRIPTION</th>
<th>AMOUNT</th>
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<tbody>
<tr>
<td></td>
<td>1,301.</td>
</tr>
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</table>

STATEMENT(S) 2, 3
### FORM 199  COMPENSATION OF OFFICERS, DIRECTORS AND TRUSTEES

<table>
<thead>
<tr>
<th>NAME AND ADDRESS</th>
<th>TITLE AND ADDRESS</th>
<th>AVERAGE HRS WORKED/WK</th>
<th>COMPENSATION</th>
</tr>
</thead>
<tbody>
<tr>
<td>JANICE BERTOZZI</td>
<td>CHAIR</td>
<td>3.00</td>
<td>0.0</td>
</tr>
<tr>
<td>PO BOX 29286</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>SAN FRANCISCO, CA 94129</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>DEBORAH JACOBS</td>
<td>VICE CHAIR</td>
<td>5.00</td>
<td>0.0</td>
</tr>
<tr>
<td>PO BOX 29286</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>SAN FRANCISCO, CA 94129</td>
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<td></td>
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</tr>
<tr>
<td>SABINA AHMED</td>
<td>TREASURER</td>
<td>3.00</td>
<td>0.0</td>
</tr>
<tr>
<td>PO BOX 29286</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>SAN FRANCISCO, CA 94129</td>
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<td></td>
<td></td>
</tr>
<tr>
<td>ANTONIA NEUBAUSER</td>
<td>FOUNDER</td>
<td>5.00</td>
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<tr>
<td>PO BOX 29286</td>
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<tr>
<td>SAN FRANCISCO, CA 94129</td>
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</tr>
<tr>
<td>BRIAN BANNON</td>
<td>DIRECTOR</td>
<td>3.00</td>
<td>0.0</td>
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<tr>
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<td></td>
<td></td>
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<tr>
<td>EDWARD LHEE</td>
<td>DIRECTOR</td>
<td>4.00</td>
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<tr>
<td>PO BOX 29286</td>
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<tr>
<td>SAN FRANCISCO, CA 94129</td>
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<td></td>
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<tr>
<td>SEAN WALLACE</td>
<td>DIRECTOR</td>
<td>1.00</td>
<td>0.0</td>
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<tr>
<td>PO BOX 29286</td>
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<tr>
<td>SAN FRANCISCO, CA 94129</td>
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<td></td>
</tr>
<tr>
<td>LAWRENCE NEUBAUSER</td>
<td>DIRECTOR</td>
<td>1.00</td>
<td>0.0</td>
</tr>
<tr>
<td>PO BOX 29286</td>
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<td></td>
</tr>
<tr>
<td>SAN FRANCISCO, CA 94129</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>ELIZABETH BORELLI</td>
<td>DIRECTOR</td>
<td>1.00</td>
<td>0.0</td>
</tr>
<tr>
<td>PO BOX 29286</td>
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<td></td>
</tr>
<tr>
<td>SAN FRANCISCO, CA 94129</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>RAPHAEL BEMPORAD</td>
<td>DIRECTOR</td>
<td>1.00</td>
<td>0.0</td>
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<tr>
<td>PO BOX 29286</td>
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<td></td>
<td></td>
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<tr>
<td>SAN FRANCISCO, CA 94129</td>
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<td></td>
<td></td>
</tr>
<tr>
<td>KAREN SAGE</td>
<td>DIRECTOR</td>
<td>1.00</td>
<td>0.0</td>
</tr>
<tr>
<td>PO BOX 29286</td>
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<td></td>
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</tr>
<tr>
<td>SAN FRANCISCO, CA 94129</td>
<td></td>
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<td></td>
</tr>
</tbody>
</table>
RURAL EDUCATION & DEVELOPMENT, INC.  
23-2656376

CHRISTINA SCIABICA  
EXECUTIVE DIRECTOR  
127,502.

PO BOX 29286  
SAN FRANCISCO, CA 94129

TOTAL TO FORM 199, PART II, LINE 11  
127,502.

<table>
<thead>
<tr>
<th>DESCRIPTION</th>
<th>AMOUNT</th>
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<tbody>
<tr>
<td>PROGRAM EXPENSES</td>
<td>719,325.</td>
</tr>
<tr>
<td>PROJECT EXPENSES</td>
<td>37,612.</td>
</tr>
<tr>
<td>WORKSHOPS AND TRAININGS</td>
<td>36,650.</td>
</tr>
<tr>
<td>CONSTRUCTION EXPENSES</td>
<td>25,137.</td>
</tr>
<tr>
<td>OTHER EMPLOYEE BENEFITS</td>
<td>53,403.</td>
</tr>
<tr>
<td>LEGAL FEES</td>
<td>484.</td>
</tr>
<tr>
<td>ACCOUNTING FEES</td>
<td>127,076.</td>
</tr>
<tr>
<td>PROFESSIONAL FUNDRAISING FEES</td>
<td>27,050.</td>
</tr>
<tr>
<td>OTHER PROFESSIONAL FEES</td>
<td>116,270.</td>
</tr>
<tr>
<td>ADVERTISING AND PROMOTION</td>
<td>10,440.</td>
</tr>
<tr>
<td>OFFICE EXPENSES</td>
<td>111,383.</td>
</tr>
<tr>
<td>INFORMATION TECHNOLOGY</td>
<td>13,180.</td>
</tr>
<tr>
<td>TRAVEL</td>
<td>120,852.</td>
</tr>
<tr>
<td>CONFERENCES AND CONVENTIONS</td>
<td>8,953.</td>
</tr>
<tr>
<td>ALL OTHER EXPENSES</td>
<td>36,658.</td>
</tr>
</tbody>
</table>

TOTAL TO FORM 199, PART II, LINE 17  
1,444,473.

<table>
<thead>
<tr>
<th>DESCRIPTION</th>
<th>BEG. OF YEAR</th>
<th>END OF YEAR</th>
</tr>
</thead>
<tbody>
<tr>
<td>PUBLICLY TRADED SECURITIES</td>
<td>524.</td>
<td>0.</td>
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</tbody>
</table>

TOTAL TO FORM 199, SCHEDULE L, LINE 9  
524.        0.

STATEMENT(S) 4, 5, 6
<table>
<thead>
<tr>
<th>DESCRIPTION</th>
<th>BEG. OF YEAR</th>
<th>END OF YEAR</th>
</tr>
</thead>
<tbody>
<tr>
<td>PLEDGES AND GRANTS RECEIVABLE</td>
<td>10,792</td>
<td>1,401,283</td>
</tr>
<tr>
<td>PREPAID EXPENSES AND DEFERRED CHARGES</td>
<td>584</td>
<td>897</td>
</tr>
<tr>
<td>SECURITY DEPOSITS</td>
<td>6,611</td>
<td>4,396</td>
</tr>
<tr>
<td>TOTAL TO FORM 199, SCHEDULE L, LINE 12</td>
<td>17,987</td>
<td>1,406,576</td>
</tr>
</tbody>
</table>
TAXABLE YEAR
2014
California e-file Return Authorization for Exempt Organizations
FORM 8453-EO

Exempt Organization name
RURAL EDUCATION & DEVELOPMENT, INC.
Identifying number
23-2656376

Part I Electronic Return Information (whole dollars only)
1 Total gross receipts (Form 199, line 4) 2,469,642.00
2 Total gross income (Form 199, line 8) 2,467,767.00
3 Total expenses and disbursements (Form 199, line 9) 2,352,015.00

Part II Settle Your Account Electronically for Taxable Year 2014
4 Electronic funds withdrawal
4a Amount
4b Withdrawal date (mm/dd/yyyy)

Part III Banking Information (Have you verified the exempt organization’s banking information?)
5 Routing number
6 Account number
7 Type of account: Checking Savings

Part IV Declaration of Officer
I authorize the exempt organization’s account to be settled as designated in Part II. If I check Part II, Box 4, I authorize an electronic funds withdrawal for the amount listed on line 4a.

Under penalties of perjury, I declare that I am an officer of the above exempt organization and that the information I provided to my electronic return originator (ERO), transmitter, or intermediate service provider and the amounts in Part I above agree with the amounts on the corresponding lines of the exempt organization’s 2014 California electronic return. To the best of my knowledge and belief, the exempt organization’s return is true, correct, and complete. If the exempt organization is filing a balance due return, I understand that if the Franchise Tax Board (FTB) does not receive full and timely payment of the exempt organization’s fee liability, the exempt organization will remain liable for the fee liability and all applicable interest and penalties. I authorize the exempt organization return and accompanying schedules and statements be transmitted to the FTB by the ERO, transmitter, or intermediate service provider. If the processing of the exempt organization’s return or refund is delayed, I authorize the FTB to disclose to the ERO or intermediate service provider, the reason(s) for the delay.

Sign Here
EXECUTIVE DIRECTOR

Part V Declaration of Electronic Return Originator (ERO) and Paid Preparer.
I declare that I have reviewed the above exempt organization’s return and that the entries on form FTB 8453-EO are complete and correct to the best of my knowledge. (If I am only an intermediate service provider, I understand that I am not responsible for reviewing the exempt organization’s return. I declare, however, that form FTB 8453-EO accurately reflects the data on the return.) I have obtained the organization officer’s signature on form FTB 8453-EO before transmitting this return to the FTB; I have provided the organization officer with a copy of all forms and information that I will file with the FTB, and I have followed all other requirements described in FTB Pub. 1345, 2014 e-file Handbook for Authorized e-file Providers. I will keep form FTB 8453-EO on file for four years from the due date of the return or four years from the date the exempt organization return is filed, whichever is later, and I will make a copy available to the FTB upon request. If I am also the paid preparer, under penalties of perjury, I declare that I have examined the above exempt organization’s return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. I make this declaration based on all information of which I have knowledge.

ERO Must Sign
GELMAN, ROSENBERG & FREEDMAN
4550 MONTGOMERY AVE SUITE 650N
BETHESDA, MD
FEIN 52-1392008
ZIP Code 20814-2930

Paid Preparer Must Sign
GELMAN, ROSENBERG & FREEDMAN
4550 MONTGOMERY AVE SUITE 650N
BETHESDA, MD
FEIN 52-1392008
ZIP Code 20814-2930

For Privacy Notice, get FTB 1131 ENG/SP.

FTB 8453-EO 2014

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