DLN: 93493213004392

2

Department of the Treasury

Paid Preparer's

Use Only

Firm's name (or yours if self-employed), address, and ZIP + 4

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

OMB No 1545-0047

Internal	Revenue S	Service	The organization may have to use a copy of	of this return to satisfy	state repo	rting requirements	Inspection
A Fo	r the 20	011 ca	endar year, or tax year beginning 01-01-2011	and ending 12-31-20	11	D Employer	identification number
_	eck if app		C Name of organization WORLDREADERORG				
_	Iress cha	_	Doing Business As			27-2092 E Telephone	
	ne chan		-			(206) 329	2-5546
_	ıal return		Number and street (or P O box if mail is not delivered C/O BRIGHTON JONES LLC 506 2ND AVE	to street address) Room/	suite	-	ots \$ 1,287,811
_	mınated		NO 1800				
∏ Am	ended re	eturn	City or town, state or country, and ZIP + 4 SEATTLE, WA 981042300				
App	olication	pending					
			F Name and address of principal officer DAVID RISHER			s this a group ret	
			C/O BRIGHTON JONES LLC 506 2ND AV	E	a	iffiliates?	ΓYes Γ No
			NO 1800 SEATTLE,WA 981042300		H(b) A	Are all affiliates incl	uded?
	x-exemp	nt status	▼ 501(c)(3)	047(a)(1) or		•	st (see instructions)
				547(a)(1) 01 327	H(c)	Group exemption	number 🟲
	ebsite:	► WW	N WORLDREADER ORG		<u> </u>		
K Forn	n of orga	anızatıon	Corporation Trust Association Other ►		L Year	of formation 2010	M State of legal domicile WA
Pa	rt I	Sumi	narv				
			scribe the organization's mission or most sign	ıfıcant activities			
	l w	ORĹDR	EADER ORG'S MISSION IS TO IMPROVE LI	TERACY AND ACCES			H THE DISTRIBUTION
3	<u> </u>	F ELEC	TRONIC READING DEVICES TO CHILDREN	IN IMPOVERISHED A	AND REMO	TE AREAS	
乭	_						
Governance	_						
ŝ			s box দ if the organization discontinued its			an 25% of its net	assets
			f voting members of the governing body (Part	,		3	
ĕ			findependent voting members of the governing				_
Activities &			nber of individuals employed in calendar year 2			5	
ă			nber of volunteers (estimate if necessary) . elated business revenue from Part VIII, colum			78	
			ated business taxable income from Form 990-			71	
				.,,		Prior Year	Current Year
	8	Contrib	utions and grants (Part VIII, line 1h)		. —	196,394	1,095,036
틢	9	Progra	m service revenue (Part VIII, line 2g)			0	0
Ravenue	10	Invest	ment income (Part VIII, column (A), lines 3, 4		160	-3,603	
立	11		evenue (Part VIII, column (A), lines 5, 6d, 8c		128	2,092	
	12		evenue—add lines 8 through 11 (must equal Pa		ne	196,682	1,093,525
	13		and similar amounts paid (Part IX, column (A)			0	
	14		s paid to or for members (Part IX, column (A),	•		0	
	15	Salarıe	s, other compensation, employee benefits (Pai	•			
Expenses		5-10)				43,239	
<u>₹</u>	16a		sional fundraising fees (Part IX, column (A), lin	e 11e)		0	0
Ä	ь		draising expenses (Part IX, column (D), line 25) •0	446.04.			
	17 18		expenses (Part IX, column (A), lines 11a-11d xpenses Add lines 13-17 (must equal Part I)			161,273 204,512	-
	19		re less expenses Subtract line 18 from line 12			-7,830	•
± 07		Kevent	C 1833 CAPCINGES SUBGROCK THE TO HOTH THE TZ	<u> </u>	Begin	nning of Current	
න් කිරීම දැන්						Year	End of Year
ASS. Bake	20		ssets (Part X, line 16)			76,802	364,413
Net Assets or Fund Balances	21		abilities (Part X, line 26)		84,632		
	22		sets or fund balances Subtract line 21 from lin	ne 20		-7,830	364,413
	t II		ature Block	maliculius ·	anh -d · ·		I de des been de com
know			rjury, I declare that I have examined this return, i it is true, correct, and complete. Declaration of p				
		****	*			2012 07 02	
Sign	,		ure of officer			2012-07-02 Date	
Here		DAVID	RISHER PRESIDENT				
			or print name and title				
		Preparer's		Date	Check If		payer identification number
Paid		sıgnature	MATTHEW J LEPLEY	2012-07-02	self- employed •	(see instruction P00742669	ons)

For Paperwork Reduction Act Notice, see the separate instructions. Cat No 11282Y

BRIGHTON JONES LLC

SEATTLE, WA 98104

May the IRS discuss this return with the preparer shown above? (see instructions) $\,$.

506 2ND AVE 18TH FLOOR

Phone no 🕨 (206) 329-5546

EIN • 91-2007475

	, , , , ,	,2011)			raye Z
Par	t III	Statement of Program S Check if Schedule O contains a			
1	Brief	fly describe the organization's mis	sion		
M I L L WO R	IONS LDRE	OF PEOPLE TO IMPROVE THE	R LIVES THROUGH ITS SPAI	BLE TO CHILDREN IN THE DEVE N-BASED AFFILIATE, FUNDACIO PARTNERS WITH PUBLISHERS T	N WORLDREADER ORG,
2		he organization undertake any sig rior Form 990 or 990-EZ?		the year which were not listed on	┌ Yes ┌ No
	If "Ye	es," describe these new services	on Schedule O		
3	servi	he organization cease conducting ces?		how it conducts, any program	√ Yes No
4	Desc expe	ribe the organization's program s nses Section 501(c)(3) and 501	ervice accomplishments for eac (c)(4) organizations and section	n of its three largest program servi 4947(a)(1) trusts are required to ly, for each program service report	report the amount of
	(Cod	le) (Expenses \$	652,921 including gran	ts of \$ 1,095,036) (Revenue	\$ 2,092)
	OF T		ADER ORG'S PROGRAMS HAVE PROVID	H THE AVAILABILITY OF DIGITAL BOOKS TO ED ACCESS TO OVER 190,000 E-BOOKS IN	
4b	(Cod	le) (Expenses \$	ıncludıng grant	s of \$) (Revenue \$)
4c	(Cod	le) (Expenses \$	ıncludıng grant	s of \$) (Revenue \$)
4d		er program services (Describe ir penses \$	Schedule O) Including grants of \$) (Revenue \$)
4e		al program service expenses▶\$	652,921	<u> </u>	

Part TV	Checklist of	Required	Schedules
	CHCCKHSCOL	IXCUUII CU	Scriculics

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 🕏	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		N o
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If</i> "Yes," complete Schedule C, Part II	4		No
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		No
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If</i> "Yes," complete Schedule D, Part V	10		No
11	If the organization's answer to any of the following questions is 'Yes,' then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line10? If "Yes," complete Schedule D, Part VI.	11a		No
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.	11b		No
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.	11c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.	11d		No
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.	11e		No
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	11f		No
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12a		No
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	Yes	
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Part I	14b	Yes	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the U S ? If "Yes," complete Schedule F, Part II and IV	15	Yes	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the U S ? If "Yes," complete Schedule F, Part III and IV	16		No
17	Did the organization report a total of more than \$15,000, of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach its audited financial statement to this return? Note. All Form 990 filers that operated one or more hospitals must attach audited financial statements	20b		

1 01111	990 (2011)			Page
Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		No
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		No
23	Did the organization answer "Yes" to Part VII, Section A, questions 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	23		No
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 questions 24b-24d and complete Schedule K. If "No," go to line 25	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If</i> "Yes," complete Schedule L, Part I	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		No
28	Was the organization a party to a business transaction with one of the following parties? (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part			
		28a		No
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
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 owner? If "Yes," complete Schedule L, Part IV	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule Ma	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Schedule N, Part II	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? <i>If</i> "Yes," complete Schedule R, Part I	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		No
35a	Is any related organization a controlled entity of the filing organization within the meaning of section 512(b)(13)?	35a		No
b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section $512(b)(13)$? If "Yes," complete Schedule R, Part V, line 2	35b		No
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	

Dowl M	Ctatamanta Dagardia	a Other IDC Filings and Tay Compliance
Part V	Statements Regarding	g Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response to any question in this Part V			
			Yes	No
a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable			
	1a 0			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b			
_				
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1 c		
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			
D	That least one is reported on line 2a, did the organization line an required lederal employment tax returns?	2b	Yes	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
a	Did the organization have unrelated business gross income of \$1,000 or more during the			
	year?	За		Νo
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
la	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 or securities			
	account)?	4a		Νo
b	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
	, ,			
а	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Νo
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Νo
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	_		
-		5c		
а	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	6a		Νo
I-	organization solicit any contributions that were not tax deductible?			
D	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and	7a		Νo
	services provided to the payor?			
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to	7c		Νo
a	file Form 8282?	/(NO
u	These, indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit			
	contract?	7e		Νo
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Νo
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a	<i>-</i> /9		
"	Form 1098-C?	7h		
	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did			
	the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess			
	business holdings at any time during the year?	8		
	Sponsoring organizations maintaining donor advised funds.			
	Did the organization make any taxable distributions under section 4966?	9a		
	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
0	Section 501(c)(7) organizations. Enter			
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
1	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other			
	sources against amounts due or received from them)			
2-	Section 4947(a)(1) non-everynt charitable truste. In the everynteen films form 000 in line of form 40442	12-		
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? If "Yes," enter the amount of tax-exempt interest received or accrued during the	12a		
D	year 12b			
3	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	Is the organization licensed to issue qualified health plans in more than one state?			
	Note. All 501(c)(29) organizations must list in Schedule O each state in which they are licensed to issue			
	qualified health plans, the amount of reserves required by each state, and the amount of reserves the organization allocated to each state	13a		
b	Enter the aggregate 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 aggregate amount of reserves on hand			
<i>a</i>		ا ء ۽ ا		N.
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		

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

Check if Schedule O contains a response to any question in this Part VI

Se	ction A. Governing Body and Management				
				Yes	No
_					
1a	Enter the number of voting members of the governing body at the end of the tax year	3			
b	Enter the number of voting members included in line 1a, above, who are independent	2			
2	Did any officer, director, trustee, or key employee have a family relationship or a business other officer, director, trustee, or key employee?	relationship with any	2		No
3	Did the organization delegate control over management duties customarily performed by o supervision of officers, directors or trustees, or key employees to a management company		3		No
4	Did the organization make any significant changes to its governing documents since the p filed?	rior Form 990 was	4		No
5	Did the organization become aware during the year of a significant diversion of the organization	ation's assets? .	5		Νo
6	Did the organization have members or stockholders?		6		Νo
7a	Did the organization have members, stockholders, or other persons who had the power to emore members of the governing body?		7a		No
b	Are any governance decisions of the organization reserved to (or subject to approval by) n		7b		No
8	or persons other than the governing body?	dertaken during the			
_	year by the following		a-	V	
a	The governing body?		8a	Yes	
ь	Each committee with authority to act on behalf of the governing body?	ŀ	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who conganization's mailing address? If "Yes," provide the names and addresses in Schedule O		9		Νo
	ection B. Policies (This Section B requests information about policies not requi	red by the Internal			
ке	venue Code.)			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	[10a	103	No
	If "Yes," did the organization have written policies and procedures governing the activities	of such chapters	100		110
_	affiliates, and branches to ensure their operations are consistent with the organization's expurposes?		10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its gove the form?	erning body before filing	11a	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review the Form 99	90			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13		12a	Yes	
b	Were officers, directors or trustees, and key employees required to disclose annually interrise to conflicts?	ests that could give	12b	Yes	
c	Did the organization regularly and consistently monitor and enforce compliance with the point Schedule O how this was done	olicy? If "Yes," describe	12c	Yes	
13	Did the organization have a written whistleblower policy?		13		No
14	Did the organization have a written document retention and destruction policy?		14		No
15	Did the process for determining compensation of the following persons include a review an independent persons, comparability data, and contemporaneous substantiation of the delib				
а	The organization's CEO, Executive Director, or top management official		15a	Yes	
	Other officers or key employees of the organization	ľ	15b	Yes	
	If "Yes," to line 15a or 15b, describe the process in Schedule O (see instructions)				
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar taxable entity during the year?	lar arrangement with a	16a		No
b	If "Yes," did the organization follow a written policy or procedure requiring the organization participation in joint venture arrangements under applicable federal tax law, and take steps	s to safeguard the			
	organization's exempt status with respect to such arrangements?		16b		
	ction C. Disclosure				
17	List the States with which a copy of this Form 990 is required to be filed ►WA , CA				
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990 (3)s only) available for public inspection. Indicate how you made these available. Check a				

Own website Another's website Upon request

- 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 See Additional Data Table
- State the name, physical address, and telephone number of the person who possesses the books and records of the organization 🕨 20 BRIGHTON JONES LLC 506 2ND AVENUE 18TH FLOOR

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

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 organiz	ation nor any re	lated o	rganı	zatio	ns	compe	nsat	ed any current or fo	ormer officer, direct	or, or trustee
(A) Name and Title	(B) A verage hours per week (describe	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the organization and
	hours for related organizations in Schedule O)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former		MISC)	related organizations
(1) JOHN DAVID RISHER CEO AND CO-FOUNDER	55 00	х		х				0	0	0
(2) COLIN MCELWEE MANAGING DIRECTOR AND CO-FOUNDER	55 00	х		Х		Х		0	119,000	0
(3) CHARLES BRIGHTON BOARD DIRECTOR	50	Х						0	0	0

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

	(A) Name and Title	(B) Average hours per week (describe hours	more unles an	on (d e than s per offic	(C) In (do not check than one box, person is both fficer and a tor/trustee)				Repo compo fro organiz	(D) ortable ensation m the zation (W- 9-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-		(F) Estima mount o compens from t rganizati	ited f other sation the on and	
		for related organizations in Schedule O)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former			MISC)		organiza	I	
												+			
1b	Sub-Total			<u> </u>	•			<u> </u>				1			
С	Total from continuation sheets t							•							
2	Total (add lines 1b and 1c) . Total number of individuals (inclusion),000 of reportable compens	udıng but not lın	nited to	thos	e lıs		• above) who	receive	od more tha	119,00 an	0		0	
													Yes	No No	
3	Did the organization list any form on line 1a? <i>If</i> " <i>Yes,"</i> complete Sch								r highes	t compens	ated employee	3		No	
4	For any individual listed on line 1 organization and related organization.											4		No	
5	Did any person listed on line 1a services rendered to the organiza										or individual for	5		No	
Se	ection B. Independent Cont	tractors													
1	Complete this table for your five \$100,000 of compensation from or within the organization's tax you	highest comper the organizatio													
	Nam	(A) ne and business add	dress							Desc	(B) ription of services		(C) Compensation		
												Ŧ			
	Total number of independent conti \$100,000 of compensation from t			ot lır	nited	l to 1	those	liste	d above)	who recei	ved more than				

Part v		Statement of Revenue					
				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512,513,or 514
\$ \$	1a	Federated campaigns 1a					
亞黃	ь	Membership dues 1b					
ಕ್ಷ	c	Fundraising events 1c					
ु ह							
<u>ਰੂਫ਼</u>	d	Related organizations 1d					
₹,Œ	е	Government grants (contributions) 1e					
ច្ចះ	f	All other contributions, gifts, grants, and 1f	1,095,036	ĺ			
<u> </u>	_	similar amounts not included above Noncash contributions included in					
<u>=</u> =	g	lines 1a-1f \$					
Contributions, gifts, grants and other similar amounts	h	Total. Add lines 1a-1f	▶	1,095,036			
O 4	-"-	Total. Add Illies 1a-11		2,030,000			
<u> 9</u>			Business Code				
Ę.	2a						
eg.	ь						
a T	c						
≥ ≎							
Ì	d						
€	e						
Program Serwce Revenue	f	All other program service revenue					
<u>ج</u>	g	Total. Add lines 2a-2f	<u> </u>				
	3	Investment income (including dividends					
		and other similar amounts)	· •	484			484
	_	Income from investment of tax-exempt bond pr	-				
	4						
	5	Royalties					
		(ı) Real	(II) Personal				
	6a	Gross rents					
	ь	Less rental expenses					
	l c	Rental income					
	١.	or (loss)					
	d	Net rental income or (loss)					
		(ı) Securities	(II) Other				
	7a	Gross amount 190,199 from sales of					
		assets other than inventory					
	ь	Less cost or 194,286					
		other basis and sales expenses					
	c	Gain or (loss) -4,087					
	d	Net gain or (loss)		-4,087			-4,087
	8a	Gross income from fundraising	· · · · ·	·			
Φ		events (not including					
2		\$					
⊕ >-		of contributions reported on line 1c)					
æ		See Part IV, line 18					
Other Revenue	.	a					
Ę	b	Less direct expenses b					
0	С	Net income or (loss) from fundraising ev	vents 🏲				
	9a	Gross income from gaming activities					
		See Part IV, line 19					
	 	F					
	b c	Less direct expenses b Net income or (loss) from gaming activity	ties b -				
		T.	ities				
	10a	Gross sales of inventory, less returns and allowances .					
	ь	Less cost of goods sold b					
	С	Net income or (loss) from sales of inver	ntory ►				
		Miscellaneous Revenue	Business Code				
	11a	VENDOR & PUBLISHING IN	511190	2,092	2,092		
	ь						
	^c						
	d	All other revenue					
	е	Total. Add lines 11a-11d	▶	2,092			
	12	Total revenue. See Instructions	. ►	1,093,525	2,092	0	-3,603

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) but are not required to complete columns (B), (C), and (D) Check if Schedule O contains a response to any question in this Part IX

	reck if Senedate of contains a response to any question in this rate in				
	ot include amounts reported on lines 6b, o, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States See Part IV, line 21				
2	Grants and other assistance to individuals in the United States See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16	535,196	535,196		
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees				
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$	20,660	20,660		
7	Other salaries and wages	<u> </u>	,		
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	21,424	21,424		
9	Other employee benefits				
10	Payroll taxes	3,625	3,625		
11	Fees for services (non-employees)	1,120			
a	Management				
_	-	10.003		10.002	
b	Legal	19,983		19,983	
с	Accounting	30		30	
d	Lobbying				
е	Professional fundraising See Part IV, line 17				
f	Investment management fees				
g	Other	1,034		1,034	
12	Advertising and promotion	10,471	5,235	5,236	
13	Office expenses	12,920	11,081	1,839	
14	Information technology				
15	Royalties				
16	Occupancy				
17	Travel	19,510	19,510		
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				_
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance	1,786		1,786	
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24f If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O)				
a	E-READER DEVICES & CONT	36,190	36,190		
b					_
С					
d					
e					
f	All other expenses				
25	Total functional expenses. Add lines 1 through 24f	682,829	652,921	29,908	0
26		002,029	032,921	29,908	
20	Joint costs. Check here ► ☐ If following SOP 98-2 (ASC 958-720) Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				
	<u> </u>	-		Fr	orm 990 (2011)

Pa	rt X	Balance Sheet				
				(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing		7,734	1	
	2	Savings and temporary cash investments		20,192	2	315,999
	3	Pledges and grants receivable, net		21,836	3	48,414
	4	Accounts receivable, net		27,040	4	
	5	Receivables from current and former officers, directors, trustees, key of highest compensated employees Complete Part II of	employees, and			
		Schedule L			5	
	6	Receivables from other disqualified persons (as defined under section persons described in section 4958(c)(3)(B) Complete Part II of	4958(f)(1)) and			
		Schedule L			6	
Assets	7	Notes and loans receivable, net			7	
8	8	Inventories for sale or use			8	
⋖	9	Prepaid expenses and deferred charges			9	
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D)a			
	ь	Less accumulated depreciation)b]	10c	
	11	Investments—publicly traded securities			11	
	12	Investments—other securities See Part IV, line 11			12	
	13	Investments—program-related See Part IV, line 11			13	
	14	Intangible assets			14	
	15	Other assets See Part IV, line 11			15	
	16	Total assets. Add lines 1 through 15 (must equal line 34)		76,802	16	364,413
	17	Accounts payable and accrued expenses .		39,273	17	<u> </u>
	18	Grants payable			18	
	19	Deferred revenue			19	
	20	Tax-exempt bond liabilities			20	
	21	Escrow or custodial account liability Complete Part IV of Schedule D .			21	
Liabilities	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified				
죭		persons Complete Part II of Schedule L	•	45,359	22	
Ξ	23	Secured mortgages and notes payable to unrelated third parties .			23	
	24	Unsecured notes and loans payable to unrelated third parties			24	
	25	Other liabilities (including federal income tax, payables to related third and other liabilities not included on lines 17-24) Complete Part X of SD			25	
	26	D		84,632	26	0
	20	Organizations that follow SFAS 117, check here ► and complete lin	nes 27	04,002	20	
φ		through 29, and lines 33 and 34.	iics 27			
ğ	27	Unrestricted net assets			27	
<u> </u>	28	Temporarily restricted net assets			28	
=	29	Permanently restricted net assets			29	
or Fund Balance		Organizations that do not follow SFAS 117, check here ► ✓ and complines 30 through 34.	plete			
	30	Capital stock or trust principal, or current funds		o	30	0
sets	31	Paid-in or capital surplus, or land, building or equipment fund		0	31	0
Ass	32	Retained earnings, endowment, accumulated income, or other funds		-7,830	32	364,413
Š	33	Total net assets or fund balances		-7,830	33	364,413
Ź	34	Total liabilities and net assets/fund balances		76 802		364 413

14:1	Check if Schedule O contains a response to any question in this Part XI	-		. [고	
1	Total revenue (must equal Part VIII, column (A), line 12)	1		1,0	93,525
2	Total expenses (must equal Part IX, column (A), line 25)	2		6	82,829
3	Revenue less expenses Subtract line 2 from line 1	3		4	10,696
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			-7,830
5	Other changes in net assets or fund balances (explain in Schedule O)	5		-	38,453
6	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6		3	64,413
Par	Time Financial Statements and Reporting Check if Schedule O contains a response to any question in this Part XII				
1	Accounting method used to prepare the Form 990			Yes	No
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		Νo
b	Were the organization's financial statements audited by an independent accountant?		2b		Νo
c	If "Yes," to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of taudit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O		2c		
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were is on a separate basis, consolidated basis, or both	sued			
	Separate basis Consolidated basis Both consolidated and separated basis				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	:	За		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the reaudit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	equired	3b		

Employer identification number

OMB No 1545-0047

Inspection

SCHEDULE A

(Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service

Name of the organization WORLDREADERORG

Complete if the organization is a section 501(c)(3) organization or a section

4947(a)(1) nonexempt charitable trust.

Public Charity Status and Public Support

▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

27-2092468

Pai	rt I	Reason for Public Charity Status (All organizations must complete this part.) See instruc	tions		
The o	rganı	zation is not a private foundation because it is (For lines 1 through 11, check only one box)			
1	Γ	A church, convention of churches, or association of churches $section 170(b)(1)(A)(i)$.			
2	Г	A school described in section 170(b)(1)(A)(ii). (Attach Schedule E)			
3	Γ	A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).			
4	Γ	A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A) hospital's name, city, and state	(iii). Ente	⁻ the	
5	Γ	An organization operated for the benefit of a college or university owned or operated by a governmental uni	t describe	- d ın	
		section 170(b)(1)(A)(iv). (Complete Part II)			
6	\sqcap	A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).			
7	▽	An organization that normally receives a substantial part of its support from a governmental unit or from the described in section 170(b)(1)(A)(vi) (Complete Part II)	e general	public	
8	Г	A community trust described in section 170(b)(1)(A)(vi) (Complete Part II)			
9		An organization that normally receives (1) more than 331/3% of its support from contributions, membersh	ıp fees, ar	nd gros	is
		receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more tha	-	_	
		its support from gross investment income and unrelated business taxable income (less section 511 tax) fr			
		acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III)			
10	Γ	An organization organized and operated exclusively to test for public safety See section 509(a)(4).			
11	Γ	An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carr one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See sective box that describes the type of supporting organization and complete lines 11e through 11h a Type I b Type II c Type III - Functionally integrated d T		a)(3). (Check
е	Γ	By checking this box, I certify that the organization is not controlled directly or indirectly by one or more d other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(2)	•	-	
f		If the organization received a written determination from the IRS that it is a Type I, Type II or Type III su check this box	pporting o	rganıza	ation,
g		Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?	i	T	
		(i) a person who directly or indirectly controls, either alone or together with persons described in (ii)	44 (2)	Yes	No_
		and (III) below, the governing body of the the supported organization?	11g(i)	\longrightarrow	
		(ii) a family member of a person described in (i) above?	11g(ii)	\longrightarrow	
L		(iii) a 35% controlled entity of a person described in (i) or (ii) above?	11g(iii)		
h		Provide the following information about the supported organization(s)			

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 9 above or IRC section (see	Is th organızat col (ı) lıs your gove	rganization in Did you notify the organization in organization in col (i) of your col (i) organization in col (i) of your		(vi) Is the organization in col (i) organized in the US?		(vii) A mount of support?	
		instructions))	Yes	No	Yes	No	Yes	No	
-									
Total									

instructions

Part II Support Schedule for Organizations Described in IRC 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.) Section A. Public Support Calendar year (or fiscal year beginning (a) 2007 **(b)** 2008 (c) 2009 (d) 2010 (e) 2011 (f) Total ın) 1 Gifts, grants, contributions, and membership fees received (Do not 196,394 1,095,036 1,291,430 include any "unusual grants ") Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge 196,394 1,095,036 1,291,430 Total. Add lines 1 through 3 The portion of total contributions by each person (other than a governmental unit or publicly 655,535 supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column Public Support. Subtract line 5 from 635,895 line 4 Section B. Total Support Calendar year (or fiscal year (a) 2007 **(b)** 2008 (c) 2009 (d) 2010 (e) 2011 (f) Total beginning in) 196,394 1,095,036 1,291,430 Amounts from line 4 Gross income from interest, dividends, payments received on 160 484 644 securities loans, rents, royalties and income from similar sources Net income from unrelated business activities, whether or not the business is regularly carried on 10 Other income (Explain in Part IV) Do not include gain or loss 128 2,092 2,220 from the sale of capital assets 11 Total support (Add lines 7 1,294,294 through 10) Gross receipts from related activities, etc (See instructions) 12 12 First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, 13 check this box and stop here Section C. Computation of Public Support Percentage Public Support Percentage for 2011 (line 6 column (f) divided by line 11 column (f)) 14 14 Public Support Percentage for 2010 Schedule A, Part II, line 14 15 **15** 16a 33 1/3% support test - 2011. 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 b 33 1/3% support test - 2010. If the organization did not check the 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 - 2011. 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 IV how the organization meets the "facts and circumstances" test. The organization qualifies as a publicly supported organization b 10%-facts-and-circumstances test - 2010. 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 IV how the organization meets the "facts and circumstances" test. The organization qualifies as a publicly supported organization

Private Foundation If the organization did not check a box on line 13, 16a, 16b, 17a or 17b, check this box and see

Schedule A (Form 990 or 990-EZ) 2011 Page 3 Part III Support Schedule for Organizations Described in IRC 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 Calendar year (or fiscal year beginning (a) 2007 **(b)** 2008 (c) 2009 (d) 2010 (e) 2011 (f) Total ın) Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants ") Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose Gross receipts from activities that are not an unrelated trade or business under section 513 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 5 7a Amounts included on lines 1, 2, and 3 received from disqualified persons Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year c Add lines 7a and 7b Public Support (Subtract line 7c from line 6) Section B. Total Support Calendar year (or fiscal year beginning (a) 2007 **(b)** 2008 (c) 2009 (d) 2010 (e) 2011 (f) Total ın) Amounts from line 6 Gross income from interest, 10a dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b C Net income from unrelated 11 business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support (Add lines 9, 10c, 13 11 and 12) First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage Public Support Percentage for 2011 (line 8 column (f) divided by line 13 column (f)) 15 15 Public support percentage from 2010 Schedule A, Part III, line 15 16 16 Section D. Computation of Investment Income Percentage

Investment income percentage for 2011 (line 10c column (f) divided by line 13 column (f))

19a 33 1/3% support tests—2011. If the organization did not check the box on line 14, and line 15 is more than 33 1/3% and line 17 is not

18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization Private Foundation If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions

33 1/3% support tests-2010. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line

more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

Investment income percentage from 2010 Schedule A, Part III, line 17

17

18

17

18

▶[

Part IV	Supplemental Information. Supplemental Information. Complete this part to provide the explanation required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Also complete this part for any additional information. (See instructions).
	Facts And Circumstances Test
	Explanation

Schedule A (Form 990 or 990-EZ) 2011

Additional Data

Software ID: Software Version:

EIN: 27-2092468

Name: WORLDREADERORG

Form 990, Special Condition Description:

Special Condition Description

"Yes" to Form 990, Part IV, line 14b.

DLN: 93493213004392

OMB No 1545-0047

2011

SCHEDULE F (Form 990)

Department of the Treasury

Internal Revenue Service

Statement of Activities Outside the United States

► Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16. ▶ Attach to Form 990. ▶ See separate instructions.

Part I General Information on Activities Outside the United States. Complete if the organization answered

For grantmakers. Does the organization maintain records to substantiate the amount of the grants or

Open to Public Inspection

Name of the organization WORLDREADERORG

Employer identification number

27-2092468

	the grants or assistance? .		_	·	tion criteria used to awa	✓ Yes ✓ No
2	For grantmakers. Describe in P United States	art V the organ	iization's proced	ures for monitoring the us	se of grant funds outside th	e
3	Activites per Region (Use Part	V ıf addıtıonal	space is neede	d)		
	(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region or independent contractors	(d) Activities conducted in region (by type) (e g , fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region/investments in region
	SUB-SAHARAN AFRICA - GHANA	1	1	PROGRAM SERVICES - DIRECT SPENDING BY FUNDACION WORLDREADER ORG		18,000
	EUROPE - SPAIN	1		PROGRAM SERVICES - FUNDACION WORLDREADER ORG MAINTAINS AN OFFICE IN BARCELONA, SPAIN	IN 2011 FUNDACION WORLDREADER ORG WAS FORMALLY INCORPORATED IN BARCELONA, SPAIN AS A WHOLLY SEPARATE ORGANIZATION FROM US-BASED WORLDREADER ORG FUNDING AND SUPPORT FOR FUNDACION WORLDREADER ORG IS PROVIDED THROUGH GRANTS MADE BY US- BASED WORLDREADER ORG WITH THE PURPOSE OF FURTHERING ITS MISSION OF EXPANDING E-READER DEVELOPMENT AND EDUCATION SERVICES TO UNDER-SERVED CHILDREN IN SUB- SAHARAN AFRICA	535,196
	Sub-total	2	2			553,196
	Total from continuation sheets to Part I Totals (add lines 3a and 3b)	0	0			553 <i>.</i> 196

1

Use Part V if additional space is needed.

(c) Region

(d) Purpose of

(b) IRS code

(i) Method of

	(a) Name of organization	section and EIN (if applicable)		grant	cash grant	cash disbursement	of non-cash assistance	of non-cash assistance	valuation (book, FMV, appraisal, other
			EUROPE (INCLUDING ICELAND & GREENLAND)	GENERAL OPERATIONS, PURCHASE AND DISTRIBUTION OF E-READERS AND DIGITAL CONTENT	535,196	ELECTRONIC FUNDS TRANSFER			
	_								
	_								
2	Enter total nut	mber of recipi y the IRS, or f	ent organizations l for which the grant	sted above that are r ee or counsel has pro	ecognized as charit ovided a section 501	ies by the foreign co.(c)(3) equivalency	ountry, recognized letter	as . 🕨	1
3	Enter total nu	mber of other	organizations or e	ntities				. ▶	1
								Schedule I	F (Form 990) 2011

Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" to Form 990,

(e) A mount of

Part IV, line 15, for any recipient who received more than \$5,000. Check this box if no one recipient received more than \$5,000

(f) Manner of

(g) A mount of

(h) Description

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16. Use Part V if additional space is needed.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) A mount of cash grant	(e) Manner of cash disbursement	(f) A mount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
		•		1	1	Cahadi	ule F (Form 990) 2011

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 (see instructions for Form 926)	[Yes	1	Γ	Νo
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 and/or Form 3520-A. (see instructions for Forms 3520 and 3520-A)	Γ	Yes	i	굣	Νo
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)	Г	Yes	i	্ব	Νo
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, Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see instructions for Form 8621)	Г	Yes	i	굣	Νo
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)	Г	Yes	i	굣	Νo
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).	Г	Yes	.	ᅜ	Νo

Schedule F (Form 990) 2011

Identifier	ReturnReference	uctions) required in Part I, line 2, and any Explanation
		<u>'</u>
	1	

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

DLN: 93493213004392

OMB No 1545-0047

Open to Public Inspection

SCHEDULE M (Form 990)

Department of the Treasury Internal Revenue Service

▶Complete if the organization answered "Yes" on Form 990, Part IV, lines 29 or 30. ► Attach to Form 990.

NonCash Contributions

Name of the organization WORLDREADERORG

Employer identification number

Da	rt I Types of Property				27-2092468			
<u> </u>	iypes of Property	(a) Check If applicable	(b) Number of Contributions or items contributed	(c) Contribution amounts reported on Form 990, Part VIII, line	(d Method of d contribution	etermın	_	
	Art—Works of art Art—Historical treasures .			1 g				
3	Art—Fractional interests							
4	Books and publications							
5	Clothing and household goods							
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property							
	Securities—Publicly traded .	Х	2	194,286	VALUE AT RECEIP	<u>T</u>		
	Securities—Closely held stock .							
	Securities—Partnership, LLC, or trust interests							
	Securities—Miscellaneous							
13	Qualified conservation contribution—Historic structures							
14	Qualified conservation contribution—Other							
15	Real estate—Residential .							
16	Real estate—Commercial							
17	Real estate—Other							
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies .							
21	Taxıdermy							
22	Historical artifacts							
	Scientific specimens							
24	Archeological artifacts							
	VARIOUS E- READER AND DIGITAL							
25	Other ► (CONTENT)	X	32	146,078	COMPARABLE SAL	.ES		
26	TRAVEL Other ► (<u>EXPENSES</u>)	×	1	1 796	COMPARABLE SAL	FS		
27	Other ► ()			2,730	COTTI MINIBEL OFFE			
28	· · · · · · · · · · · · · · · · · · ·							
29	Number of Forms 8283 received for which the organization compl				29			
							Yes	No
30a	During the year, did the organiza							
	must hold for at least three year	s from the o	date of the initial contribution	on, and which is not require	d to be used			
	for exempt purposes for the enti					30a		No
b	If "Yes," describe the arrangem	ent in Part 1	I					
31	Does the organization have a gif					31	<u> </u> 	No
32a	Does the organization hire or us contributions?	e third parti	es or related organizations	to solicit, process, or sell i	non-cash	32a		No
33	If "Yes," describe in Part II If the organization did not report describe in Part II	t revenues i	n column (c) for a type of p	roperty for which column (a) is checked,			

Page 2

Part II

Supplemental Information. Complete this part to provide the information required by Part I, lines 30b, 32b, and 33. Also complete this part for any additional information.

Identifier Return Reference Explanation

Schedule M (Form 990) 2011

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493213004392

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

OMB No 1545-0047

2011

Open to Public

Inspection

Name of the organization
WORLDREADERORG

Employer identification number

27-2092468

ldentifier	Return Reference	Explanation
CHANGES IN PROGRAM SERVICES	FORM 990, PART III, LINE 3	IN 2011, WORLDREADER ORG OFFICIALLY ESTABLISHED A WHOLLY SEPARATE ORGANIZATION BASED IN SPAIN, FUNDACION WORLDREADER ORG, TO CONDUCT ITS PROGRAM ACTIVITIES IN SUB-SAHARAN AFRICA WORLDREADER ORG PROVIDES SUPPORT AND FUNDING TO FUNDACION WORLDREADER ORG THROUGH GRANTS
	FORM 990, PART VI, SECTION B, LINE 11	A FINAL COPY OF THE FORM 990 IS EMAILED TO BOARD MEMBERS FOR THEIR REVIEW PRIOR TO ITS FILING BOARD MEMBERS MAY DISCUSS AND REVIEW THE FORM 990 FILING DURING THEIR NEXT MEETING
	FORM 990, PART VI, SECTION B, LINE 12C	AS POTENTIAL ISSUES ARE RAISED TO THE BOARD UNDER A DUTY TO DISCLOSE, EACH ISSUE IS REVIEWED AND VOTED UPON TO DETERMINE IF A CONFLICT OF INTEREST DOES OR HAS THE POTENTIAL TO EXIST
	FORM 990, PART VI, SECTION B, LINE 15	WORLDREADER ORG'S MANAGEMENT SURVEYED AND RESEARCHED COMPENSATION ARRANGEMENTS OF SIMILARLY-SIZED ORGANIZATIONS WITHIN ITS REGION AND ESTABLISHED ITS COMPENSATION PACKAGE AT THE LOWER-END OF THE RANGE DETERMINED FROM ITS SURVEY
	FORM 990, PART VI, SECTION C, LINE 19	CURRENTLY WORLDREADER DOES NOT PROVIDE ITS GOVERNING DOCUMENTS, CONFILCT OF INTEREST POLICY AND FINANCIAL STATEMENTS TO THE GENERAL PUBLIC
CHANGES IN NET ASSETS OR FUND BALANCES	FORM 990, PART XI, LINE 5	TRANSFER OF ASSETS FROM U.S. ORGANIZATION TO SPANISH AFFILIATE -38,453 TOTAL TO FORM 990, PART XI, LINE 5 -38,453