Caution: Forms printed from within Adobe Acrobat products may not meet IRS or state taxing agency specifications. When using Acrobat 5.x products, uncheck the "Shrink oversized pages to paper size" and uncheck the "Expand small pages to paper size" options, in the Adobe "Print" dialog. When using Acrobat 6.x and later products versions, select "None" in the "Page Scaling" selection box in the Adobe "Print" dialog.

PUBLIC DISCLOSURE COPY

Department of the Treasury Internal Revenue Service

** PUBLIC DISCLOSURE COPY **

Return of Organization Exempt From Income Tax

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

▶ Do not enter Social Security numbers on this form as it may be made public.

Information about Form 990 and its instructions is at www irs gov/form990



Α	For th	e 2013 calendar year, or tax year beginning and	ending			
В	Check if applicab	e: C Name of organization		D Employer identifica	ation number	
	Addre	RESULTS EDUCATIONAL FUND, INC.	RESULTS EDUCATIONAL FUND, INC.			
	Name		e Doina Business As			
	Initial returr	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	E Telephone number		
	Termi	TIOT TOTIL DIKEET NW		202-7	83-4800	
	Amer	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	5,201,530.	
	Appli tion pend	WASHINGION, DC 20005		H(a) Is this a group ret		
	pena	F Name and address of principal officer: UOANNE CARTER			Yes X No	
		SAME AS C ABOVE		H(b) Are all subordinates incl		
		empt status: $X 501(c)(3) = 501(c) () < (insert no.) = 4947(a)(1) c$	or 🛄 527		st. (see instructions)	
_		te: WWW.RESULTS.ORG		H(c) Group exemption		
	-	f organization: 🚺 Corporation 🔄 Trust 🔄 Association 🔛 Other 🕨	L Year	of formation: 1981 M	State of legal domicile: CA	
Ρ	art I	Summary			דאס	
Se	1	Briefly describe the organization's mission or most significant activities: GENER HUNGER AND THE WORST ASPECTS OF POVERTY.	AIING	ING WIDD IO		
Activities & Governance		Check this box	ad of more	than 25% of its not ass	oto	
ver	2	3		1 1	eis. 20	
ဗီ	4	Number of independent voting members of the governing body (Part VI, line 1a)			19	
کە د	5	Total number of individuals employed in calendar year 2013 (Part V, line 2a)		·····	59	
itie	6	Total number of volunteers (estimate if necessary)			0	
cti	-	Total unrelated business revenue from Part VIII, column (C), line 12			0.	
Ac		Net unrelated business taxable income from Form 990-T, line 34			0.	
		······································		Prior Year	Current Year	
¢	8	Contributions and grants (Part VIII, line 1h)		7,345,515.	4,372,082.	
Revenue	9	Program service revenue (Part VIII, line 2g)		144,287.	783,854.	
eve	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		11,718.	-33,942.	
Ξ.	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		7,019.	-440.	
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) .		7,508,539.	5,121,554.	
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		2,516,598.	3,764,710.	
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.	
es	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) $_{\rm .}$		3,047,295.	3,393,974.	
ens	16a	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) Professional fundraising fees (Part IX, column (A), line 11e) Total fundraising expenses (Part IX, column (D), line 25) 301,70		0.	0.	
Expenses	b					
ш	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		2,497,652.	2,764,489.	
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		8,061,545.	9,923,173.	
	19	Revenue less expenses. Subtract line 18 from line 12		-553,006.	-4,801,619.	
Assets or Balances			Be	ginning of Current Year	End of Year	
Bala	20	Total assets (Part X, line 16)	······	9,295,287.	5,480,506.	
Plet A	21	Total liabilities (Part X, line 26)		251,972.	1,238,445.	
		Net assets or fund balances. Subtract line 21 from line 20		9,043,315.	4,242,061.	
Ρ	artil					

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

Sign		Signature	of officer						Date	
Here			BUTLER,	DIRECTOR	OF	FINANCE				
		Type or pr	int name and title					_		
-	Prin	it/Type prepa	arer's name		Prepa	arer's signature		Date	Check PTIN	
Paid	DA.	VID A.	JONES						self-employed P01361002	
Preparer			RIBIS,	JONES &		ESCA, P.A.			Firm's EIN 52–1853933	
Use Only	Firn	n's address	10500 1	LITTLE PAT	UXE	NT PARKWAY,	SUITE	770		
			COLUMB	[A, MD 210)44				Phone no. 410 - 884 - 0220	
May the IF	May the IRS discuss this return with the preparer shown above? (see instructions)									
332001 10-2	IN S2001 10-29-13 LHA For Paperwork Reduction Act Notice, see the separate instructions. Form 990 (2013)									

Part III Statement of Program Service Accomplishments Check if Schedule O contains a response or note to any line in this Part III 1 Briefly describe the organization's mission: GENERATING THE WILL TO END HUNGER AND THE WORST ASPECTS OF POV 2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?	
1 Briefly describe the organization's mission: GENERATING THE WILL TO END HUNGER AND THE WORST ASPECTS OF POV 2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?	
GENERATING THE WILL TO END HUNGER AND THE WORST ASPECTS OF POV	ERTY.
the prior Form 990 or 990-EZ?	
the prior Form 990 or 990-EZ?	
the prior Form 990 or 990-EZ?	
the prior Form 990 or 990-EZ?	
I	
	Yes 🛛
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 🛛
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 e	xpenses, and
revenue, if any, for each program service reported.	
4a (Code:) (Expenses \$ 6,471,715. including grants of \$ 3,727,533.) (Revenue \$)	
ACTION - THE ADVOCACY TO CONTROL TUBERCULOSIS INTERNATIONALLY	
("ACTION") PROGRAM IS PART OF AN INTERNATIONAL PARTNERSHIP OF	
SOCIETY ORGANIZATIONS THAT BEGAN WORKING TOGETHER TO MOBILIZE	
RESOURCES AGAINST TUBERCULOSIS ("TB"). ACTION PARTNERS HAVE HE	
INFLUENCE LEADERS TO CONTRIBUTE MORE THAN \$1.4 BILLION FOR THE	
TB FIGHT THROUGH BILATERAL AND MULTILATERAL FUNDING. A SIGNIFI	
AMOUNT OF FUNDING THROUGH THE GLOBAL FUND WENT TOWARDS FIGHTIN	
TB, AND MALARIA. BUILDING ON ITS SUCCESSES IN FIGHTING TB AROU	
WORLD, ACTION HAS EXPANDED ITS ADVOCACY EFFORTS TO INCLUDE CHI	
SURVIVAL, PARTICULARLY IN THE AREAS OF VACCINES AND UNDER-NUTR	ITION.
Ib (Code:) (Expenses \$ 1,196,403. including grants of \$) (Revenue \$)	
MICROCREDIT EDUCATION AND OUTREACH - THIS PROGRAM IS ALIGNED W	
MICROCREDIT SUMMIT CAMPAIGN ("MCS"), WHICH BRINGS TOGETHER MIC	
PRACTITIONERS, ADVOCATES, EDUCATIONAL INSTITUTIONS, AND VARIOU	
STAKEHOLDERS TO PROMOTE BEST PRACTICES IN MICROFINANCE, AND TO	
STIMULATE THE INTERCHANGING OF KNOWLEDGE AND IDEAS. MCS IS WOR	
ENSURE THAT 175 MILLION OF THE WORLD'S POOREST FAMILIES, ESPEC	
WOMEN OF THOSE FAMILIES, ARE RECEIVING CREDIT FOR SELF-EMPLOYM	
OTHER FINANCIAL AND BUSINESS SERVICES BY 2015, AND THAT 100 MI	LLION
FAMILIES RISE ABOVE THE US \$1.25 A DAY THRESHOLD ADJUSTED FOR	
PURCHASING POWER PARITY BETWEEN 1990 AND 2015.	
	702 01
Ic (Code:) (Expenses \$ 1,251,526. including grants of \$ 37,177.) (Revenue \$ 10,000,000,000,000,000,000,000,000,000,	783,85
POVERTY OUTREACH AND ADVOCACY - RESULTS EDUCATIONAL FUND, INC.	
FOCUSES ON POVERTY OUTREACH AND ADVOCACY. REF IDENTIFIES AND P	ROMOTES
THE MOST EFFECTIVE SOLUTIONS TO POVERTY BY:	<u> </u>
PERFORMING CUTTING-EDGE RESEARCH ON POVERTY ISSUES AND PROGRAM	
OVERSIGHT OF U.S. SPENDING RELATED TO POVERTY DOMESTICALLY AND	
INTERNATIONALLY; BUILDING SUPPORT FOR PROVEN POVERTY-FIGHTING	
INTERNATIONALLY; BUILDING SUPPORT FOR PROVEN POVERTY-FIGHTING STRATEGIES BY ENGAGING AND EDUCATING THE PUBLIC, POLICY MAKERS	ONS. AN
INTERNATIONALLY; BUILDING SUPPORT FOR PROVEN POVERTY-FIGHTING STRATEGIES BY ENGAGING AND EDUCATING THE PUBLIC, POLICY MAKERS OPINION LEADERS, LEADING EDUCATIONAL TRIPS, WORKING IN COALITI	
INTERNATIONALLY; BUILDING SUPPORT FOR PROVEN POVERTY-FIGHTING STRATEGIES BY ENGAGING AND EDUCATING THE PUBLIC, POLICY MAKERS OPINION LEADERS, LEADING EDUCATIONAL TRIPS, WORKING IN COALITI ENCOURAGING THE MEDIA TO REPORT ON SOLUTIONS TO POVERTY; AND S	UPPORTI
INTERNATIONALLY; BUILDING SUPPORT FOR PROVEN POVERTY-FIGHTING STRATEGIES BY ENGAGING AND EDUCATING THE PUBLIC, POLICY MAKERS OPINION LEADERS, LEADING EDUCATIONAL TRIPS, WORKING IN COALITI ENCOURAGING THE MEDIA TO REPORT ON SOLUTIONS TO POVERTY; AND S POWERFUL CITIZENSHIP BY TRAINING VOLUNTEERS IN PUBLIC SPEAKING	UPPORTI
INTERNATIONALLY; BUILDING SUPPORT FOR PROVEN POVERTY-FIGHTING STRATEGIES BY ENGAGING AND EDUCATING THE PUBLIC, POLICY MAKERS OPINION LEADERS, LEADING EDUCATIONAL TRIPS, WORKING IN COALITI ENCOURAGING THE MEDIA TO REPORT ON SOLUTIONS TO POVERTY; AND S POWERFUL CITIZENSHIP BY TRAINING VOLUNTEERS IN PUBLIC SPEAKING GENERATING MEDIA, HOSTING COMMUNITY FORUMS, AND EDUCATING THEI	UPPORTI
INTERNATIONALLY; BUILDING SUPPORT FOR PROVEN POVERTY-FIGHTING STRATEGIES BY ENGAGING AND EDUCATING THE PUBLIC, POLICY MAKERS OPINION LEADERS, LEADING EDUCATIONAL TRIPS, WORKING IN COALITI ENCOURAGING THE MEDIA TO REPORT ON SOLUTIONS TO POVERTY; AND S POWERFUL CITIZENSHIP BY TRAINING VOLUNTEERS IN PUBLIC SPEAKING	UPPORTI
INTERNATIONALLY; BUILDING SUPPORT FOR PROVEN POVERTY-FIGHTING STRATEGIES BY ENGAGING AND EDUCATING THE PUBLIC, POLICY MAKERS OPINION LEADERS, LEADING EDUCATIONAL TRIPS, WORKING IN COALITI ENCOURAGING THE MEDIA TO REPORT ON SOLUTIONS TO POVERTY; AND S POWERFUL CITIZENSHIP BY TRAINING VOLUNTEERS IN PUBLIC SPEAKING GENERATING MEDIA, HOSTING COMMUNITY FORUMS, AND EDUCATING THEI COMMUNITIES AND ELECTED OFFICIALS ABOUT ISSUES RELATED TO ITS	UPPORTI
INTERNATIONALLY; BUILDING SUPPORT FOR PROVEN POVERTY-FIGHTING STRATEGIES BY ENGAGING AND EDUCATING THE PUBLIC, POLICY MAKERS OPINION LEADERS, LEADING EDUCATIONAL TRIPS, WORKING IN COALITI ENCOURAGING THE MEDIA TO REPORT ON SOLUTIONS TO POVERTY; AND S POWERFUL CITIZENSHIP BY TRAINING VOLUNTEERS IN PUBLIC SPEAKING GENERATING MEDIA, HOSTING COMMUNITY FORUMS, AND EDUCATING THEI COMMUNITIES AND ELECTED OFFICIALS ABOUT ISSUES RELATED TO ITS Id Other program services (Describe in Schedule O.) (Expenses \$ including grants of \$) (Revenue \$	UPPORTI
INTERNATIONALLY; BUILDING SUPPORT FOR PROVEN POVERTY-FIGHTING STRATEGIES BY ENGAGING AND EDUCATING THE PUBLIC, POLICY MAKERS OPINION LEADERS, LEADING EDUCATIONAL TRIPS, WORKING IN COALITI ENCOURAGING THE MEDIA TO REPORT ON SOLUTIONS TO POVERTY; AND S POWERFUL CITIZENSHIP BY TRAINING VOLUNTEERS IN PUBLIC SPEAKING GENERATING MEDIA, HOSTING COMMUNITY FORUMS, AND EDUCATING THEI COMMUNITIES AND ELECTED OFFICIALS ABOUT ISSUES RELATED TO ITS 4d Other program services (Describe in Schedule O.)	UPPORTI
INTERNATIONALLY; BUILDING SUPPORT FOR PROVEN POVERTY-FIGHTING STRATEGIES BY ENGAGING AND EDUCATING THE PUBLIC, POLICY MAKERS OPINION LEADERS, LEADING EDUCATIONAL TRIPS, WORKING IN COALITI ENCOURAGING THE MEDIA TO REPORT ON SOLUTIONS TO POVERTY; AND S POWERFUL CITIZENSHIP BY TRAINING VOLUNTEERS IN PUBLIC SPEAKING GENERATING MEDIA, HOSTING COMMUNITY FORUMS, AND EDUCATING THEI COMMUNITIES AND ELECTED OFFICIALS ABOUT ISSUES RELATED TO ITS Id Other program services (Describe in Schedule O.) (Expenses \$ including grants of \$) (Revenue \$ 8,919,644.	UPPORTI
INTERNATIONALLY; BUILDING SUPPORT FOR PROVEN POVERTY-FIGHTING STRATEGIES BY ENGAGING AND EDUCATING THE PUBLIC, POLICY MAKERS OPINION LEADERS, LEADING EDUCATIONAL TRIPS, WORKING IN COALITI ENCOURAGING THE MEDIA TO REPORT ON SOLUTIONS TO POVERTY; AND S POWERFUL CITIZENSHIP BY TRAINING VOLUNTEERS IN PUBLIC SPEAKING GENERATING MEDIA, HOSTING COMMUNITY FORUMS, AND EDUCATING THEI COMMUNITIES AND ELECTED OFFICIALS ABOUT ISSUES RELATED TO ITS Id Other program services (Describe in Schedule O.) (Expenses \$ including grants of \$) (Revenue \$ It Total program service expenses ▶ 8,919,644.	UPPORTI , R)
INTERNATIONALLY; BUILDING SUPPORT FOR PROVEN POVERTY-FIGHTING STRATEGIES BY ENGAGING AND EDUCATING THE PUBLIC, POLICY MAKERS OPINION LEADERS, LEADING EDUCATIONAL TRIPS, WORKING IN COALITI ENCOURAGING THE MEDIA TO REPORT ON SOLUTIONS TO POVERTY; AND S POWERFUL CITIZENSHIP BY TRAINING VOLUNTEERS IN PUBLIC SPEAKING GENERATING MEDIA, HOSTING COMMUNITY FORUMS, AND EDUCATING THEI COMMUNITIES AND ELECTED OFFICIALS ABOUT ISSUES RELATED TO ITS 4d Other program services (Describe in Schedule O.) (Expenses \$ including grants of \$) (Revenue \$ 8,919,644.	UPPORTI , R) Form 990

Form 990 (2013)

Part IV Checklist of Required Schedules

08481112 793927 17290

RESULTS EDUCATIONAL FUND, INC.

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

Form **990** (2013)

`

08481112 793927 17290

4 2013.05000 RESULTS EDUCATIONAL FUND, I 17290_1

13)	RESULTS	EDUCATIONAL	FUND,	INC.				

Form	RESULTS EDUCATIONAL FUND, INC. 95-374	7267	P	age 4
Pa	rt IV Checklist of Required Schedules (continued)			
			Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
22	Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		x
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		х
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No", go to line 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
с	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		
	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? If "Yes," complete Schedule L, Part I	25a		x
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete	051		x
06	Schedule L, Part I	25b		
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 so,			
	complete Schedule L, Part II	26		x
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial	20		
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	of any of these persons? If "Yes," complete Schedule L, Part III	27		х
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 IV	28a		X
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
с	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		x
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			x
04	contributions? If "Yes," complete Schedule M	30		
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	31		x
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	51		
-	Schedule N, Part II	32		х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34	Х	
35a	5 7 5 7 7	35a	Х	
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
- -	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	Х	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			v
07	If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If</i> "Yes," <i>complete Schedule R, Part VI</i>	37		x
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	31		
00	Note. All Form 990 filers are required to complete Schedule O	38	х	

Form **990** (2013)

a Enter the number reported in Box 3 of Form 1096. Enter 0- if not applicable 1a 46 b Enter the number of Pornes W-2G Reckedor in ite 1a. Enter 0- if not applicable 1a 46 c X X 2a 59 2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statemens. 2a 59 2b Item the number of employees reported on Form W-3, Transmittal of Wage and Tax Statemens. 2a 59 2b Item the number of employees reported on Form W-3, Transmittal of Wage and Tax Statemens. 2a 59 3b It the organization have unrelated business gross income of \$1,000 or more during the year? 3a X 3c It the organization have unrelated business gross income of \$1,000 or more during the year? 3a X 3c It the organization applicable ax shell that seconit a countity of the organization have an interest in, or a signature or other authority over, a transmittal or the number of the origin countity. Sa X 4a A uny time during the tax year. SB X Sc X 4b If Yes, 'is the dar SD, did the organization have an interest in, or a signature or other authority over a transmit a countity. SB <th></th> <th>Check if Schedule O contains a response or note to any line in this Part V</th> <th></th> <th></th> <th></th>		Check if Schedule O contains a response or note to any line in this Part V				
b Inter the number of Forms W-20 included in line 1a. Enter 0- if not applicable Inter 1000000000000000000000000000000000000				Yes	No	
b Enter the number of Forms W-20 included in line 1a. Enter 0- if not applicable Image: The number of applyces reported on Form W-3, Transmittal of Wage and Tax Statements. Image: The number of applyces reported on Form W-3, Transmittal of Wage and Tax Statements. Image: The number of applyces reported on Ima 2a, did the organization file all required takenal approxements. Image: The number of applyces reported on Ima 2a, did the organization file all required takenal approxements. Image: The number of applyces reported on Ima 2a, did the organization file all required takenal approxements. Image: The number of applyces reported on Ima 2a, did the organization file all required takenal approxements. Image: The number of the numbe	1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 46				
c Dd the organization comply with backup withholding rules for reportable gamments to vendors and reportable gamment 1 2a Enter the number of employees reported on Form W3, Transmittal of Wage and Tax Statements, the field or the calendar year ending with or within the year covered by this return. 2a 59 2b If at least on is reported on the 2, did the organization file all required Ideoral employment tax returns? 2b X b If at least on is reported on ince 2, did the organization file all required Ideoral employment tax returns? 3a X b If "Yes," has it filed a form 90-17 for this year? If "No," to ine 3b, provide an explanation in Schedule O 3b 4a b If "Yes," that it filed a foreign country [Such as a bank account, securities account, or other financial account)? 4a X b If "Yes," to line Ba or 5b, did the organization have an interest in, or a signature or other authority over, a financial account is dreigin country. 5b X c If Yes," to line Ba or 5b, did the organization have an interest in, or a signature or other authority over, a financial account is dreigin country. 5c 5c 5c a Was the organization have numal gross receipt to a prohibid tax shelter transaction? 5c 5c 5c b If "Yes," to line Ba or 5b, did the organization have an explexable contributions or gifts were not tax deductible as charitable contributions an express statement thas cuch contributions or gifts were n						
2a Ear the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, the field for the calendar year ending with or within the year covered by this return. 2a 59 b If at least on in a 2a, dot the organization the all exployment tax returns? 2b X Note: If the sum of lines 1a and 2a is greater than 250, you may be required to 2-file (see instructions) 3a X b If the significant on have included business grass increme of 13 (bod or more during the year? 3a X b If Yes, 'nsait field a form 990-T for this year? If No, 'to ine 3b, provide an explanation in Schedule O 3b 4a d At any time the name of the foreign country, SU(sch as a bank account, socurities account, or other financial accounts. 5a X 5a Was the organization have annual gross neceluly to a prohibited tax shefter transaction? 5c 5c 5a Name and gross necelulation file form 8866:77 5c 5c 5c 6a DX the organization have annual gross necelulation contributions? 5c 5c 9 If Yes, 'to line 6a or 5b, did the organization have an explexes statement that such contributions solid the organization neldewith every solicitation an express statement that such contributions of an yoo on thaveleta shefter transaction?	с					
2a Enter the number of employees reported on Form W3, Transmittal of Waga and Tax Statements. 2a 59 b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 59 b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 3a X b If the sum of line 2a, did the organization file all required federal employment tax returns? 3a X b If the sum of line 2a, did the organization have an explanation in Schedule 0 3b X b If the st, "instituted business granization have an interest in, or a signature or other authority over, a financial account, a foreign country [Such as a bank account, a count in a foreign country [Such as a bank account, a count in a foreign country [Such as a bank account, a count in a toware or a party to a prohibited tax shelter transactor? 5a X 5a Was the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions of pills were not tax deductible as charitable contributions? 5a X 5b If "Yes," to line organization have annual gross receipts that are normally greater than \$100,000, and did the organization select and y the value of the value of the organization select and y count and y the value of the value of the organization select and y value of the value of the value of the organization select and y		(gambling) winnings to prize winners?	1c	Х		
b If at least one is reported on line 2a, did the organization file all required to d-file (see instructions) 2b X Note. If the sum of lines 1a and 2a is greater than 250, you may be required to d-file (see instructions) 3a X b 11 Yes, 'hast if field a form 900-1 for this year? If 'No, 'to line 3b, provide an explanation in Schedule O 3b X b 11 Yes, 'hast if field a form 900-1 for this year? If 'No, 'to line 3b, provide an explanation in Schedule O 3b X b 11 Yes, 'hast if field a form 900-1 for this year? If 'No, 'to line 3b, provide an explanation in Schedule O 3b X b 11 Yes, 'hast if field a form 900-1 for this year? If 'No, 'to line 3b, provide an explanation in Schedule O 4a X b 11 Yes, 'to line fao to filing requirements for form TD F 90.21, Report of Foreign Bank and Financial Accounts. 5a X 5a Wast the organization have annual gross received starts than \$100,000, and did the organization nave provided thas shelt transaction? 5b X c 11 Yes, 'to line 6a or 5b, did the organization have sector 170(c). 6b 7a X d 11 Yes, 'to did the organization nave pay membra to asso foling or grassization neeve the adoutbile? 7a X d 11 Yes, 'to did the organization neeve a grangement in access 0.5 form	2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,				
Note. If the sum of lines 1a and 2a is greater than 250, you may be required to ≠file (see instructions) 3a 3a Dit the organization have unrelated business gross income of \$1,000 or more during the year? 3a X 3b Dit Twes, the tifted a Come 090-10r this year? 3a X 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authomity over, a financial account? 3a X bit Twes, there the name of the foreign country, by DEPAIN See instructions for filing requirements for from TD F 9022.1, Report of Foreign Bank and Financial Accounts. Sa X 5a Was the organization nay any to a prohibited tax shelter transaction? Sa X bit Twes, 'enter the name of the organization that it was or is a party to a prohibited tax shelter transaction? Sa X bit any contributions that were not tax deductible or contributions? Sa X cill Twes,' to dit the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible or diraction of the value of the organization notify the done of the value of the organization receive a payment in excess of 35 made party as contributions and party for gools and services provided to the payer? 7a X bit Twes,' indicate the number of Forms 8282? Indicate presentation receive a number of the value of the organization file paysing organizatio		filed for the calendar year ending with or within the year covered by this return 2a 59				
3a Did the organization have unrelated business gross income of \$1,000 or more during the year? 3a X b If Yes, 'has if lied a Form 380-T for this year? If Wo, 'to <i>line 3b, provide an explanation in Schedule O</i> 3b X a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account? (such as a bank account, securities account, or other financial account?) 4a X b If Yes, 'that if the origin country (such as a bank account, securities account, or other financial Accounts. 5a X b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5b X c TYes,'' to line 6a or 5b, did the organization file Form 7DE P0/22.1, Report of Foreign Bank and Financial Accounts. 5c 5c 6 Does the organization are annual gross receips that are normally greater than \$100,000, and did the organization solid any contributions include with every solicitation are express statement that such contributions or gifts 6a X b If Yes,'' did the organization naity as a contribution and partly for goods and services provided to the part? 7a X b Did the organization neity exel. St field during the year 7d 7a X f Tyes,'' did the organization neave an otherwise dispose	b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х		
b If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule 0 3a b If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule 0 3a d 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; IM S PAIN 4a X b If "Yes," enter the name of the foreign country; IM SPAIN See instructions for filing requirements for Form TD F 90-221, Report of Foreign Bark and Financial Accounts. 5a X 5a Was the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solut any contributions that was or is a party to a prohibited tax shelter transaction? 5a X 5b X Did any taxable party notify the organization file Form 8867.7 5a X 6a X If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible contributions under section 170(c). 6b 5a 7 Or grasization state may receive deductible contributions und party for groods and services provided the paraization receive a payment in excess of \$15 madd party as a contributions on a personal benefit contract? 7a X 7 To section 5010 for granization anexpress statement that such contract?		Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)				
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 is done interest in, or a signature or other financial account? 4a X bit 1*Yes, "enter the name of the foreign country: >>>>>>>>>>>>>>>>>>>>>>>>>>>>>>>>>>>>	3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		Х	
the interval 4a X b If "Yes," enter the name of the foreign county; ▶ SPAIN See instructions for filing requirements for Form TD F 90.221, Report of Foreign Bank and Financial Accounts. 5a Xa 5a Was the organization a party to a prohibited tax sheter transaction at any time during the tax year? 5a Xa 5a Was the organization aparty to a prohibited tax sheter transaction at any time during the tax year? 5a Xa c If "Yes," to line 5a or 5b, did the organization file Form 8886-T? 5a X 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solidt any contributions that twas or is contributions? 6a X 7 Organization have annual gross receipts that are normally greater than \$100,000, and did the organization solidt as weare not tax deductible contributions? 7a X 7 Organization include with every solicitation an express statement that such contributions or gifts were not tax deductible contributions of the goods or services provided? 7a X 7 Organization contrible does at \$155 made parily as a contribution of provides at services provided? 7a X 8 Did the organization neceive any temmuns, directly or indirectly, on a personal benefit contract? 7a X 9 Did the organization neceive a contribution of useling or unalizatinto good aservices provided? 7a	b	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O	3b			
b If 'Yes,' enter the name of the foreign country: ► SPAIN See instructions for filing requirements for Form TD 50.22.1, Report of Foreign Bank and Financial Accounts. 5a See instructions for filing requirements for Form TD 50.22.1, Report of Foreign Bank and Financial Accounts. 5a Was the organization approximation approximation that it was or is a party to a prohibited tax shelter transaction at any time during the tax year? 5a X C If 'Yes,' to line 5a or 5b, did the organization that it was or is a party to a prohibited tax shelter transaction any organization noclude with every solicitation an express statement that such contributions or gifts were not tax deductible? 6a X If 'Yes,' to life organization noclude with every solicitation an express statement that such contributions or gifts were not tax deductible? 6b 7a X If 'Yes,' to life organization noclude with every solicitation and party for goods and services provided to the payor? 7a X If 'Yes,' to did the organization noclude with every solicitation and party for goods and services provided? 7b 7c X If the organization necelve a payment in excess of S5 made partly as a contribution of goods and services provided? 7c X If 'Yes,' indicate the number of Forms 2222 filed during the year 7d 7c X If the organization neceive a payment in excess of S5 made paropartly, to pay partitaly	4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a				
See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. 5a X 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5a X 5b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5c X 6b 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? 6c X 7b If *Yes, ' did the organization include with every solicitation an express statement that such contributions orgits were not tax deductible? 6b X 7 Organization stat may receive deductible contributions under section 170(c). 10 the organization notify the door of the value of the goods or services provided? 7c X 7 Organization sell, exchange, or othewise dispose of tangible personal property for which it was required to file Form 8282? 7d 7c X 9 If the organization receive a contribution of qualified intellectual property, did the organization file Form 8282? 7d 7d 7d X 9 Sponsoring organizations maintaining door advised funds. 6deoins 92(9) 7d X 7d X 9 If the organization received a contribution of qualified intelifectual property, did the organizations. Did the sup			4a	Х		
5a X b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5a X c) Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5b X 6a Dese the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solution any contributions that were not tax deductible as charitable contributions? 6a X b If 'Yes,' did the organization include with very solicitation an express statement that such contributions or gifts were not tax deductible contributions under section 170(c). 6b 7a X b If 'Yes,' did the organization notify the donor of the value of the goods or services provided? 7a X b Did the organization set, exchange, or therwise dispose of tangible personal property for which it was required to file Form 8282? 7d 7a X d If 'Yes,' id nicitate the number of Forms 8282 filed during the year 7d 7a X f Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7f X f To the organization receive any funds, directly or indirectly, any excess business holdings at any time during the year? 7a X	b	If "Yes," enter the name of the foreign country: ► SPAIN				
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5b X c If "Yes," to line 5a or 5b, did the organization file Form 8886-17 5c 5c G Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? 6a X b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 6b 7c 7 Organization stat may receive deductible contributions under section 170(c). 10 the organization notify the donor of the value of the goods or services provided? 7b 7c X 0 If "Yes," idid the organization notify the donor of the value of the goods or services provided? 7c X 11 If a diff and the number of Forms 8282 filed during the year noy premiums, on a personal benefit contract? 7e X 11 If the organization receive a contribution of cars, boats, aripianes, or other vehicles, did the organization file Form 8899 as required? 7t X 11 If the organization maintaining door advised fund and section 509(d) (3) supporting organizations fullial file form distributions under section 4966? 9a 9b 9a 9b 10 <tr< th=""><th></th><th></th><th></th><th></th><th></th></tr<>						
c If "Yes," to line 5a or 5b, did the organization file Form 8886-T? Sc 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions and were not tax deductible as charitable contributions? Sc Sc b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible contributions under section 170(c). Bd Sc Sc a D' organizations that may receive deductible contributions under section 170(c). Did the organization notify the donor of the value of the goods or services provided to the payor? 7a X b If "Yes," did the organization stati, may receive deductible contribution and partly for goods and services provided to the payor? 7b Z b Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided? 7c X f Did the organization receive a payment in excess of tangible personal property for which it was required 7c X f Did the organization received a contribution of qualified intellectual property, did the organization file a Form 1098-C? 7f X f Did the organization received a contribution of carb, botas, inplanes, or other vehicles, did the organization file a Form 1098-C? 7h T						
Ga X Ga X b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible contributions under section 170(c). 6b 7 Organization receive a payment in excess of \$75 made parthy as a contribution and parthy for goods and services provided to the payor? 7a X 7 Did the organization notify the donor of the value of the goods or services provided? 7b 7c X d If "Yes," indicate the number of Forms 8282 filed during the year 7d 7c X d If "Yes," indicate the number of Forms 8282 filed during the year 7d 7t X f If the organization receive any funds, directly or indirectly, on a personal benefit contract? 7t X g If the organization received a contribution of cars, boats, ariptanes, or other vehicles, did the organization file a Form 1088.C? 7d X g If the organization make any taxable distributions under section 4966? 9a 9a 9a 9a 9a 9a 9a 9b 9a 9b 9a 9b 9a 9b 9a 9b 9a 9a 9a					X	
any contributions that were not tax deductible as charitable contributions? 6a X b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 6b 6b 7 Organizations that may receive deductible contributions under section 170(c). 7a X a Dif the organization notify the donor of the value of the goods or services provided? 7b X b If "Yes," (did the organization notify the donor of the value of the goods or services provided? 7c X b Did the organization notify the donor of the value of the goods or services provided? 7c X c Did the organization notify the donor of the value of the goods or services provided? 7c X f Did the organization notify the donor of the value of the goods or services provided? 7c X f Did the organization neceive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7r X f Did the organization neceived a contribution of qualified intellectual property, did the organization file Form 1098-C? 7h X f Did the organization maintaining door advised funds. na express biolings at any time during the yar? 9a 9a 9a			5c			
b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 6b 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? 7a X b If "Yes," did the organization notify the donor of the value of the goods or services provided? 7b 7c X c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file form 8282? 7c X d If "Yes," indicate the number of Forms 8282 filed during the year 7d 7e X f Did the organization receive any funds, directly or indirectly, to pay premiums, on a personal benefit contract? 7t X g If the organization received a contribution of qualified intellectual property, did the organization file a Form 1089C? Sponsoring organizations maintaining door advised funds and section 509(4)(3) supporting organizations. Did the supporting organization make and stributions under section 4966? 9a 9a D dt he organization make and istributions under section 4966? 9a 9a </th <th>6a</th> <th></th> <th>-</th> <th></th> <th>v</th>	6a		-		v	
were not tax deductible? 6b 7 Organizations that may receive deductible contributions under section 170(c). 0 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? 7a X b If "Yes," did the organization notify the donor of the value of the goods or services provided? 7b 7c X c Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7c X f Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7d X g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 7h X g If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organizations. Did the supporting organizations neceived a contribution of qualified intellectual property, did the organization file supporting organizations and set fund maintained by a sponsoring organizations. Did the supporting organization and vised fund maintained by a sponsoring organization. The supporting organization make any taxable distributions under section 4966? 9a 9 Did the organization make any taxable distributions on doner doner doried person? 9b 10 Gross income from members or shareholders 10a 11 Section 501(c)(7) organizations. Enter: 11a a forces income from membere or shareholders 12a 12a		,	6a		~	
7 Organizations that may receive deductible contributions under section 170(c). a) bid the organization receive a payment in excess of \$75 made party as a contribution and party for goods and services provided to the payor? 7a X b If "Yes," did the organization outly the donor of the value of the goods or services provided? 7b 7c X c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? 7c X d If "Yes," indicate the number of Forms 8282 filed during the year 7d 7e X f Did the organization receive any funds, directly or indirectly, on a personal benefit contract? 7e X f Did the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file Form 1098-C? 7g 7h X g If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file Form 1098-C? 7h X g Sponsoring organizations maintaining donor advised funds. Did the organization make any taxable distributions under section 4966? 9a 9 9b 9b g Sponsoring organizations. Enter: 10a 10b 10b 10b 10b 10b 10b 10b	b		C 1-			
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided 7 7a X b If "Yes," did the organization notify the donor of the value of the goods or services provided 7 7b 7c X c Did the organization notify the donor of the value of the goods or services provided 7 7d 7c X c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? 7d 7c X d If "Yes," indicate the number of Forms 8282 filed during the year 7d 7c X f Did the organization, receive any funds, directly or indirectly, no a personal benefit contract? 7f X f Did the organization received a contribution of qualified intellectual property, did the organizations file a Form 1098-C? 7h X 8 Sponsoring organization maintaining donor advised funds. a personal benefit contract? 7h X 9 Sponsoring organization make and taxibution to a donor, donor advised funds. 9a 9a 9a 9a 9a 9a 9b 9a 9b 9a 9a	-		60			
b If "Yes," did the organization notify the donor of the value of the goods or services provided? 78 c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? 7c X d If "Yes," indicate the number of Forms 8282 filed during the year 7d 7c X e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7c X f Did the organization received a contribution of qualified intellectual property, did the organization file Form 8999 as required? 7h X g If the organization received a contribution of qualified intellectual property, did the organization file a Form 1098-C? 7h X 8 Sponsoring organizations maintaining door advised funds. a Did the organization make any taxable distributions under section 4966? 9a 9b 9 Section 501(c)(7) organizations. Enter: 10a 10a 9b 9b 11 Section 501(c)(12) organizations. Enter: 10a 10a 10a 10a 10a 10a 10a 10b 10a			70		x	
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? 7c X d If "Yes," indicate the number of Forms 8282 filed during the year Td 7e X f Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7e X f Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7f X g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 7n X g If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C7 7n 8 Sponsoring organizations maintaining donor advised funds 8 9 10 10 10 10						
to file Form 8282? 7c X d If "Yes," indicate the number of Forms 8282 filed during the year 7d 7e X e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7f X g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 7g X g If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file Form 8899 as required? 7g X g If the organization andvised funds and section 509(a)(3) supporting organizations. Did the supporting organizations anitalning donor advised funds. 7g 7h X g Sponsoring organization make any taxable distributions under section 4966? 9a 9a 9b 2 g In the organization make any taxable distributions under section 4966? 9a 9b 2 2 g Iot the organization make any taxable distributions under section 4966? 9a 9b 2 2 g Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10a 10b 10b 10b 10b 11a 11a 11a 11a 11a 11a 11b 11b 12a 12a 12a			70			
d If "Yes," indicate the number of Forms 8282 filed during the year Td Td e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? Te X f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? Tf X g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? Td X n If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file Form 8899 as required? Th X 8 Sponsoring organizations maintaining donor advised funds. Bid the organization make any taxable distributions under section 4966?	C		70		x	
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7e X f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7f X g If the organization received a contribution of qualified intellectual property, did the organization file Form 8999 as required? 7g 7h X h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 7h 7h 7h 8 Sponsoring organizations maintaining door advised funds. B 9 Sponsoring organizations maintaining door advised funds. B 9a 9b 9c <th>Ь</th> <th></th> <th>10</th> <th></th> <th></th>	Ь		10			
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7f X g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 7g 7h X n If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 7h X 8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization make any taxable distributions under section 4966? 9a 9 9 Did the organization make any taxable distributions under section 4966? 9a 9b			7e		Х	
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? 7h 8 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 9 Sponsoring organizations maintaining donor advised funds. 8 a Did the organization make any taxable distributions under section 4966? 9a b Did the organizations. Enter: 10a a Initiation fees and capital contributions included on Part VIII, line 12 10a b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b 11 Section 501(c)(12) organizations. Enter: 10a 10b a Gross income from members or shareholders 11a 11b b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 11b 12a 12a If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b 13a 13 Section 501(c)(29) qualified nonprofit health plans in more than one state? 13a 13a 13a	g		7g			
organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year? 8 9 Sponsoring organizations maintaining donor advised funds. 9a a Did the organization make any taxable distributions under section 4966? 9a b Did the organization make a distribution to a donor, donor advisor, or related person? 9b 10 Section 501(c)(7) organizations. Enter: 10a 10a a Initiation fees and capital contributions included on Part VIII, line 12 10a 10b b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b 10b 11 Section 501(c)(12) organizations. Enter: 11a 10b 10b a Gross income from members or shareholders 11a 11b 12a b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 11b 12a 12a 12 Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a 12a 13 Section 501(c)(29) qualified nonprofit health insurance issuers. 13a 13a 13a a Is the o	h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?				
9 Sponsoring organizations maintaining donor advised funds. 9a 9a a Did the organization make any taxable distributions under section 4966? 9a 9b b Did the organization make a distribution to a donor, donor advisor, or related person? 9b 9b 10 Section 501(c)(7) organizations. Enter: 10a 10a 9b 9b 10 Section 501(c)(12) organizations. Enter: 10a 10b 10b 10b 11 Section 501(c)(12) organizations. Enter: 10b 10b 10b 10b 11 Section 501(c)(12) organizations. Enter: 11a 10b 10b 10b 12 Section 501(c)(12) organizations. Enter: 11a 10b 10b 10b 13 Section 501(c)(12) organizations. Enter: 11a 11b 12a	8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting				
a Did the organization make any taxable distributions under section 4966? 9a b Did the organization make a distribution to a donor, donor advisor, or related person? 9b 10 Section 501(c)(7) organizations. Enter: 10a a Initiation fees and capital contributions included on Part VIII, line 12 10a b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b 11 Section 501(c)(12) organizations. Enter: 10b a Gross income from members or shareholders 11a b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 11b 12a 11b 12a 12a b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b 13 Section 501(c)(29) qualified nonprofit health insurance issuers. 13a a Is the organization licensed to issue qualified health plans in more than one state? 13a Note. See the instructions for additional information the organization must report on Schedule O. 13a b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans 13a c Enter the amount of reserves on hand 13c 14a		organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8			
b Did the organization make a distribution to a donor, donor advisor, or related person? 9b 10 Section 501(c)(7) organizations. Enter: 10a 10a a Initiation fees and capital contributions included on Part VIII, line 12, for public use of club facilities 10b 10b 11 Section 501(c)(12) organizations. Enter: 10a 10b 10b 11 Section 501(c)(12) organizations. Enter: 11a 10b 11a a Gross income from members or shareholders 11a 11b 12a b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 11b 12a 12a Section 501(c)(29) qualified nonprofit health insurance issuers. 12b 12a 13 Section 501(c)(29) qualified nonprofit health plans in more than one state? 13a 13a 13a 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 13b 13c 14a Did the organization receive any payments for indoor tanning services during the tax year? 14a X	9	Sponsoring organizations maintaining donor advised funds.				
10 Section 501(c)(7) organizations. Enter: 10a 10a a Initiation fees and capital contributions included on Part VIII, line 12 10a 10b b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b 10b 11 Section 501(c)(12) organizations. Enter: 11a 10b 11a a Gross income from members or shareholders 11a 11b 11b b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 11b 12a 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b 13a 13 Section 501(c)(29) qualified nonprofit health insurance issuers. 13a 13a a Is the organization licensed to issue qualified health plans in more than one state? 13a 13a 14 Did the organization receives on hand 13c 13a 13a	а	Did the organization make any taxable distributions under section 4966?	9a			
a Initiation fees and capital contributions included on Part VIII, line 12 10a 10a b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b 10b 11 Section 501(c)(12) organizations. Enter: a Gross income from members or shareholders 11a 11a b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 11b 12a 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b 13a 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? 13a a Is the organization licensed to issue qualified health plans. 13b 13a c 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 13b 13c 14a X	b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b			
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b 11 Section 501(c)(12) organizations. Enter: 11a 11a a Gross income from members or shareholders 11a 11a b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 11b 12a 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b 12a 13 Section 501(c)(29) qualified nonprofit health insurance issuers. 13a 13a a Is the organization licensed to issue qualified health plans in more than one state? 13a 13a b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans 13b 13b c Enter the amount of reserves on hand 13c 13a 14a XX	10					
11 Section 501(c)(12) organizations. Enter: 11a 11a a Gross income from members or shareholders 11a 11a b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 11b 11b 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a 12a b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b 12a 12a 3 Section 501(c)(29) qualified nonprofit health insurance issuers. 12a 13a 13a a Is the organization licensed to issue qualified health plans in more than one state? 13a 13a b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans 13b 13b c Enter the amount of reserves on hand 13c 14a X	а					
a Gross income from members or shareholders 11a 11a b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 11b 11b 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b 12b 13 Section 501(c)(29) qualified nonprofit health insurance issuers. 13a 13a a Is the organization licensed to issue qualified health plans in more than one state? 13a 13a Note. See the instructions for additional information the organization must report on Schedule O. 13b 13a c 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 13b 13b c Enter the amount of reserves on hand 13c 13a 13a 14a X4 X						
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 11b 11b 11b 12a 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a 12a b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b 12a 12a 13 Section 501(c)(29) qualified nonprofit health insurance issuers. 13a 13a 13a a Is the organization licensed to issue qualified health plans in more than one state? 13a 13a Note. See the instructions for additional information the organization must report on Schedule O. 13b 13b 13a c 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 13b 13b 14a X	11					
amounts due or received from them.) 11b 12a 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b 12a 13 Section 501(c)(29) qualified nonprofit health insurance issuers. 12b 13a a Is the organization licensed to issue qualified health plans in more than one state? 13a Note. See the instructions for additional information the organization must report on Schedule O. 13b 13a b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans 13b 13b c Enter the amount of reserves on hand 13c 14a X						
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b 12a 13 Section 501(c)(29) qualified nonprofit health insurance issuers. 13a 13a a Is the organization licensed to issue qualified health plans in more than one state? 13a 13a Note. See the instructions for additional information the organization must report on Schedule O. 13b 13b 13c c 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 13b 13c 14a X	b					
b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b 13 Section 501(c)(29) qualified nonprofit health insurance issuers. 13a a Is the organization licensed to issue qualified health plans in more than one state? 13a Note. See the instructions for additional information the organization must report on Schedule O. 13a b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans 13b c Enter the amount of reserves on hand 13c 14a Did the organization receive any payments for indoor tanning services during the tax year? 14a	10-		10-			
13 Section 501(c)(29) qualified nonprofit health insurance issuers. 13a 13a a Is the organization licensed to issue qualified health plans in more than one state? 13a 13a Note. See the instructions for additional information the organization must report on Schedule O. 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 13b 13b c Enter the amount of reserves on hand 13c 14a X			12a			
 a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O. b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans c Enter the amount of reserves on hand 13b 13c 14a X 						
Note. See the instructions for additional information the organization must report on Schedule O. Image: Description of the serves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans Image:			120			
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 13b 13b c Enter the amount of reserves on hand 13c 14a X 14a Did the organization receive any payments for indoor tanning services during the tax year? 14a X	a		158			
organization is licensed to issue qualified health plans 13b 13b c Enter the amount of reserves on hand 13c 14a 14a Did the organization receive any payments for indoor tanning services during the tax year? 14a X	h					
c Enter the amount of reserves on hand 13c 14a 14a Did the organization receive any payments for indoor tanning services during the tax year? 14a X	U					
14a Did the organization receive any payments for indoor tanning services during the tax year? 14a X	c					
			14a		X	

RESULTS EDUCATIONAL FUND, INC.

Statements Regarding Other IRS Filings and Tax Compliance

95-3747267

Page 5

332005 10-29-13

Form 990 (2013)

5

08481112 793927 17290

	2013)		EDUCATIONAL	/		95-3747267	Page 6
VI	Governance,	Management	;, and Disclosure F	or each "Yes	s" response	e to lines 2 through 7b below, and for a "No" re	sponse
	to line 8a, 8b, or	10b below, describ	be the circumstances, pr	ocesses, or	changes ir	n Schedule O. See instructions.	

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

Х

Sec	tion 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	1a	20	2		
	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 0.		19			
b	Enter the number of voting members included in line 1a, above, who are independent	1b		-		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship			2		х
2	officer, director, trustee, or key employee? Did the organization delegate control over management duties customarily performed by or under th			2		
3	of officers, directors, or trustees, or key employees to a management company or other person?		•	3		х
4	Did the organization make any significant changes to its governing documents since the prior Form			4		X
5	Did the organization become aware during the year of a significant diversion of the organization's as			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 a					
• • •	more members of the governing body?			7a		х
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, s					
	persons other than the governing body?			7b		Х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the ye					
а	The governing body?			8a	Х	
b	Each committee with authority to act on behalf of the governing body?			8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be rea	ached	at the			
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O			9		Х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal R	evenu	e Code.)			
					Yes	No
	Did the organization have local chapters, branches, or affiliates?			10a	Х	
b	If "Yes," did the organization have written policies and procedures governing the activities of such c	•				
	and branches to ensure their operations are consistent with the organization's exempt purposes?			10b	X	
	Has the organization provided a complete copy of this Form 990 to all members of its governing boo	ly befo	ore filing the form?	11a	Х	
b				10	х	
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13		fliataQ	12a	л Х	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise Did the organization regularly and consistently monitor and enforce compliance with the policy? <i>If</i> "Y			12b	~	
С	in Schedule O how this was done			12c	х	
13	Did the organization have a written whistleblower policy?			13	Х	
14	Did the organization have a written document retention and destruction policy?			14	Х	
15	Did the process for determining compensation of the following persons include a review and approv	al by ii	ndependent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?					
а	The organization's CEO, Executive Director, or top management official			15a	Х	
b	Other officers or key employees of the organization			15b		X
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).					
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrange	ment v	vith a			v
	taxable entity during the year?			16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate in initiate and the angle of the second se	-	-			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the orga	nizatio	on's	40%		
Sec	exempt status with respect to such arrangements?	<u></u>		16b		
<u>17</u>	List the states with which a copy of this Form 990 is required to be filed AK, AZ, AR, CA, C	:0.C	T, DC, FL, GA	.HI	.IL	.KS
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-					
	for public inspection. Indicate how you made these available. Check all that apply.	(······································			
	X Own website Another's website X Upon request Other (explain	in Sc	hedule O)			
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, co			id finar	ncial	
	statements available to the public during the tax year.					
20	State the name, physical address, and telephone number of the person who possesses the books a THE ORGANIZATION - $202-783-4800$	nd rec	ords of the organiza	tion: 🕨	·	
	1101 15TH STREET NW, WASHINGTON, DC 20005					
33200	SEE SCHEDULE O FOR FULL LIST OF STATES			Form	990	(2013)
	E C					

Part VII	Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated	
	Employees, and Independent Contractors	
	Check if Schedule O contains a response or note to any line in this Part VII	
Section A.	. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees	
1a Comple	ete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax	k year
 List a 	all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensatio	n.

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 report-

able compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations. • List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of

reportable compensation from the organization and any related organizations.

• List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

(A)	(B)			(0))			(D)	(E)	(F)
Name and Title	Average	(do		Pos		than (one	Reportable	Reportable	Estimated
	hours per	box	, unle	ss pe	rson i	is bot	h an	compensation	compensation	amount of
	week		cer an	dad	irecto	or/trus	tee)	from	from related	other
	(list any	ector						the	organizations	compensation
	hours for	or dir	e			ated		organization	(W-2/1099-MISC)	from the
	related	stee	ruste		æ	pensa		(W-2/1099-MISC)		organization
	organizations	ial tru	o nal t		ploye	com Be				and related
	below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			organizations
(1) SCOTT LECKMAN	5.00	드	Ч	ð	Ke	HI er	5			
CHAIRMAN	2.00	x		х				0.	0.	0.
(2) GINNY VOGTS	5.00									
SECRETARY	2.00	х		х				0.	0.	0.
(3) JAN TWOMBLY	5.00									
TREASURER	2.00	х		х				0.	0.	0.
(4) SAM DALEY-HARRIS	40.00									
FOUNDER/DIRECTOR	0.00	х						121,110.	Ο.	15,748.
(5) HEIDE CRAIG	5.00									
DIRECTOR	2.00	х						2,114.	Ο.	0.
(6) KEN SCHATZ	5.00									
DIRECTOR	2.00	Х						0.	0.	0.
(7) MARY LANG SOLLINGER	5.00									
DIRECTOR	2.00	Х						0.	0.	0.
(8) MARION WRIGHT EDELMAN	5.00									
DIRECTOR	2.00	Х						0.	0.	0.
(9) VICKY GUZMAN DE LUNA, MD	5.00									
DIRECTOR	2.00	Х						0.	0.	0.
(10) VALERIE HARPER	5.00									
DIRECTOR	2.00	Х						0.	0.	0.
(11) HON. SHERWOOD BOEHLERT	5.00								0	0
DIRECTOR	2.00	Х						0.	0.	0.
(12) HON. JAMES WALSH DIRECTOR	2.00	x						0.	0.	0.
(13) MARIANNE WILLIAMSON	5.00	^						0.	0.	0.
DIRECTOR	2.00	x						0.	0.	0.
(14) PROF. MUHAMMAD YUNUS	5.00	- 23						0.	0.	
DIRECTOR	2.00	x						0.	0.	0.
(15) LYDIA PENDLEY	5.00							•••	•••	
DIRECTOR	2.00							0.	0.	0.
(16) HON. ROBERT BENNETT	5.00									
DIRECTOR	2.00	Х						0.	0.	0.
(17) KUL GAUTAM	5.00									
DIRECTOR	2.00	Х						0.	0.	0.
332007 10-29-13						_				Form 990 (2013)

7

08481112 793927 17290

95-3747267 Page 8

Part VII Section A. Officers, Directors, Trus		ploy	ees			ighe	st (es (continued)			
(A)	(B)			•	C)			(D)	(E)			(F)
Name and title	Average	(do		Pos heck		ר than	one	Reportable	Reportable		Est	imated
	hours per	box	, unle	ss pe	erson	is bot or/trus	h an		compensation			ount of
	week (list any				1		,,	from	from related			other
	hours for	irecto						the organization	organizations (W-2/1099-MIS0			ensation m the
	related	e or d	tee			sated		(W-2/1099-MISC)	(00-2/1099-00130)		nization
	organizations	truste	al trus		/ee	mpen		(1127100011100)			•	related
	below	Individual trustee or director	Institutional trustee	_	nploy	st col	5					nizations
	line)	Indivi	Institu	Officer	Key employee	Highest compensated employee	Form				0	
(18) PATRICK HUGHES	5.00											
DIRECTOR		х						0.		0.		0.
(19) ERNEST LEOVINSOHN	5.00											
DIRECTOR	2.00	Х						0.		0.		0.
(20) BRIAN SHAW	5.00											-
DIRECTOR	2.00	Х						0.		0.		0.
(21) JOANNE CARTER	34.00							100.000		_		
EXECUTIVE DIRECTOR	6.00			Х				133,800.		0.	14	,008.
(22) LARRY REED	40.00							104 020		~	~	204
DIRECTOR, MCS	20.00					Х		124,230.		0.	9	,304.
(23) MARK BUTLER	38.00					37					1 0	004
DIRECTOR OF FINANCE	2.00					Х		104,715.		0.	12	2,004.
(24) VICTORIA TRELAND	38.00					x		105,594.		ο.	7	,865.
DIRECTOR OF PROGRAM DEV. (25) ED GRAGERT	40.00					^	-	105,594.		0.		,005.
DIRECTOR, GCE-US	40.00					x		112,666.		ο.	5	690.
DIRECTOR, GCE 05						<u></u>	-	112,000.		••		,050.
1b Sub-total								704,229.		0.	64	,619.
c Total from continuation sheets to Part V								0.		0.		0.
d Total (add lines 1b and 1c)							5	704,229.		0.	64	,619.
2 Total number of individuals (including but r							no r		.000 of reportable)		
compensation from the organization						,			, ,			6
												Yes No
3 Did the organization list any former officer,	director, or tru	uste	e, ke	ey ei	mplo	oyee	, or	highest compensated e	mployee on	Ī		
line 1a? If "Yes," complete Schedule J for s	such individual										3	X
4 For any individual listed on line 1a, is the su												
and related organizations greater than \$15	0,000? If "Yes,	" со	mple	ete	Sch	edul	e J	for such individual		[4	X
5 Did any person listed on line 1a receive or a							ela	ted organization or indivi	dual for services			
rendered to the organization? If "Yes," corr	plete Schedul	e J f	for si	uch	pers	son					5	X
Section B. Independent Contractors												
1 Complete this table for your five highest co										pensa	ation fr	om
the organization. Report compensation for	the calendar y	ear	endi	ng ۱	with	or w	vithi		year.			
(A) Name and business	address	NTO	ONE	7				(B) Description of s	envices	C	(C) ompen	eation
	addrood	INC		-				Beschption of a			ompon	
• Tatal much constitution on the state of th	in all calls as the t	a.t. "		- L - L	-14				and the set	_		
2 Total number of independent contractors (\$100,000 of compensation from the organi		ot li	mite	a to		ose li: 0	steo	a above) who received m	iore than			
											- 0	

332008 10-29-13 Form **990** (2013)

8

Form	990	(20	13)
			_

 Form 990 (2013)
 RESULTS EDUCATIONAL FUND, INC.
 95-3747267
 Page 9

 Part VIII
 Statement of Revenue

		Check if Schedule O contains a re	sponse	or note to any lin	ne in this Part VIII			<u></u>
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
<u>t</u> 2	1 a	Federated campaigns	1a					
Contributions, Gifts, Grants and Other Similar Amounts		Membership dues	1b					
۲, C		Fundraising events	1c	217,772.				
ar A		Related organizations	1d	,				
nii Gis		Government grants (contributions)	1e					
Sir		All other contributions, gifts, grants, and	le					
er uti			11	154,310.				
ē₽		similar amounts not included above	11 4,	194,910.				
ы Бор	-	Noncash contributions included in lines 1a-1f: \$			4,372,082.			
<u>a O</u>	h	Total. Add lines 1a-1f						
	-			Business Code 900099		754 140		
lice	2 a			900099	754,140. 27,000.	754,140. 27,000.		
ue v		CONTRACTS	0.7.1					
n S /en	C	MERCHANDISE & BOOK	SAL	900099	2,714.	2,714.		
Jrar Re∕	d	l						
Program Service Revenue	е							
₽		All other program service revenue						
		Total. Add lines 2a-2f			783,854.			
	3	Investment income (including dividend			10 001			10 001
		other similar amounts)			10,081.			10,081.
	4	Income from investment of tax-exemp			100			100
	5	Royalties			120.			120.
		(i) F	Real	(ii) Personal				
		Gross rents						
		Less: rental expenses						
		Rental income or (loss)						
		Net rental income or (loss)		<u>, </u>				
	7 a		urities	(ii) Other				
		assets other than inventory						
	b	Less: cost or other basis	0.00	40 855				
			268.	43,755.				
	C	Gain or (loss)	268.	-43,755.	44 000			44 000
		Net gain or (loss)		····· •	-44,023.			-44,023.
an	8 a	Gross income from fundraising events	(not					
/eu		including \$ 217,772.						
Re		contributions reported on line 1c). See						
Other Reven		Part IV, line 18						
ŧ		Less: direct expenses		35,953.	0			
		Net income or (loss) from fundraising		····· •	0.			
	9 a	Gross income from gaming activities.						
		Part IV, line 19						
		Less: direct expenses		L				
		Net income or (loss) from gaming activ	vities	····· ►				
	10 a	Gross sales of inventory, less returns						
		and allowances						
		Less: cost of goods sold						
ł	С	Net income or (loss) from sales of inve	ntory					
ł	44	Miscellaneous Revenue GAIN ON CURRENCY CC	<u>\\\</u>	Business Code 900099	140.			140.
		DUBLICATION SALE RE		900099	-700.			-700.
			1.011	500055	-700.			-/00.
	C							+
		All other revenue		L	-560.			
		Total. Add lines 11a-11d			<u> </u>	783,854.	0	-34,382.
332009 10-29-	12	Total revenue. See instructions.		····· P	J, IZI, JJ4.	103,034.	0	Form 990 (2013)
10-29-	13							I UIIII JJU (2013)

9

08481112 793927 17290 2013.05000 RESULTS EDUCATIONAL FUND, I 17290_1

Part IX Statement of Functional Expenses

RESULTS EDUCATIONAL FUND, INC.

95-3747267 Page 10

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A). Check if Schedule O contains a response or note to any line in this Part IX (A) Total expenses (B) (D) (C)Do not include amounts reported on lines 6b. Management and general expenses Program service Fundraising 7b, 8b, 9b, and 10b of Part VIII. expenses expenses Grants and other assistance to governments and 1 organizations in the United States. See Part IV, line 21 Grants and other assistance to individuals in 2 the United States. See Part IV, line 22 3 Grants and other assistance to governments. organizations, and individuals outside the 3,764,710. 3,764,710. United States. See Part IV, lines 15 and 16 4 Benefits paid to or for members 5 Compensation of current officers, directors, 262,495. 229,245. 22,537. 10,713. trustees, and key employees Compensation not included above, to disqualified 6 persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 2,645,037. 2,316,747. 222,773. Other salaries and wages 105,517. 7 Pension plan accruals and contributions (include 8 29,854. 26,149. 2,514. section 401(k) and 403(b) employer contributions) 1,191. 224,948. 23,654. Other employee benefits 189,661. 11,633. 9 231,640. 206,325. 14,955. 10,360. Payroll taxes 10 11 Fees for services (non-employees): Management а 17,048. 6,006. 10,316. 726. Legal b 38,226. 51,876. 13,650. Accounting С d Lobbying Professional fundraising services. See Part IV. line 17 ρ Investment management fees _____ Other, (If line 11g amount exceeds 10% of line 25, 738,993. 668,585. 62,942. 7,466. column (A) amount, list line 11g expenses on Sch 0.) 6,958. 5,045. 1,553. 360. Advertising and promotion 12 205,239. 98,372. 90,817. 16,050. 13 Office expenses 16,197. 14,665. 31,843. 981. Information technology 14 15 Royalties 198,684. 172,477. 16,446. 9,761. 16 Occupancy 811,843. 755,102. 39,079. 17,662. 17 Travel 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 525,521. 365,891. 63,366. 96,264. Conferences, conventions, and meetings 19 315. 315. 20 Interest Payments to affiliates 21 25,313. 22,784. 1,238. 1,291. 22 Depreciation, depletion, and amortization 22,720. 26,128. 2,138. 1,270. 23 Insurance Other expenses. Itemize expenses not covered 24 above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.) 59,454. 59,454. BAD DEBT EXPENSE а DUES AND SUBSCRIPTIONS 28,711 28,598. 113. h 21,808. 11,380. 895. EQUIPMENT RENTAL AND MA 9,533. С 14,755. LICENSES AND FEES 5,300. 9,455. d е All other expenses 9,923,173. 8,919,644. 701,821. 301,708. Total functional expenses. Add lines 1 through 24e 25 Joint costs. Complete this line only if the organization 26 reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here if following SOP 98-2 (ASC 958-720)

332010 10-29-13

08481112 793927 17290

08481112 793927 17290

11 2013.05000 RESULTS EDUCATIONAL FUND, I 17290_1

RESULTS EDUCATIONAL FUND, INC. Form 990 (2013)
Part X Balance Sheet

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

		Check il Schedule O contains a response or h	ote to any				
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			773,143.	1	579,140.
	2	Savings and temporary cash investments			7,929,458.	2	3,943,148.
	3	Pledges and grants receivable, net			55,314.	3	
	4	Accounts receivable, net			7,951.	4	328,904.
	5	Loans and other receivables from current and			.,	•	
	Ŭ	trustees, key employees, and highest compen					
						5	
	6	Part II of Schedule L Loans and other receivables from other disqua				-	
	Ŭ	section 4958(f)(1)), persons described in section	•				
		employers and sponsoring organizations of se					
S		employees' beneficiary organizations (see inst				6	
Assets	7	Notes and loans receivable, net				7	
As	8	Inventories for sale or use				8	
	9	B			435,308.	9	159,094.
		Land, buildings, and equipment: cost or other		·····	100,000	5	20570511
		basis. Complete Part VI of Schedule D		477,852.			
	h	Less: accumulated depreciation	10h	73,321.	80,611.	10c	404,531.
	11	Investments - publicly traded securities			•••,•==•	11	
	12	Investments - other securities. See Part IV, line				12	
	13	Investments - program-related. See Part IV, line				13	
	14	Intangible assets				14	
	15	Other assets. See Part IV, line 11			13,502.	15	65,689.
	16	Total assets. Add lines 1 through 15 (must eq			9,295,287.	16	5,480,506.
	17	Accounts payable and accrued expenses			251,972.	17	788,288.
	18	Grants payable			•	18	
	19	Deferred revenue				19	450,157.
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complete				21	
ŝ	22	Loans and other payables to current and form					
Liabilities		key employees, highest compensated employe					
abil						22	
	23	Secured mortgages and notes payable to unre				23	
	24	Unsecured notes and loans payable to unrelat				24	
	25	Other liabilities (including federal income tax, p					
		parties, and other liabilities not included on line	es 17-24).	Complete Part X of			
		Schedule D				25	
	26	Total liabilities. Add lines 17 through 25			251,972.	26	1,238,445.
		Organizations that follow SFAS 117 (ASC 95	i8), check	here 🕨 🗴 and			
es		complete lines 27 through 29, and lines 33 a	nd 34.				
nc	27	Unrestricted net assets			260,685.	27	254,561.
3ale	28	Temporarily restricted net assets	8,782,630.	28	3,987,500.		
Β	29	D		<u></u>		29	
Fur		Organizations that do not follow SFAS 117 (ASC 958)	, check here 🕨 🗌			
ç		and complete lines 30 through 34.					
ets	30	Capital stock or trust principal, or current fund	s			30	
Ass	31	Paid-in or capital surplus, or land, building, or e				31	
Net Assets or Fund Balances	32	Retained earnings, endowment, accumulated	income, o	r other funds		32	
z	33	Total net assets or fund balances			9,043,315.	33	4,242,061.
	34	Total liabilities and net assets/fund balances			9,295,287.	34	5,480,506.

95-3747267 Page 11

Form **990** (2013)

m	990	(2013)	
			_

08481112 793927 17290

	1990 (2013) RESULTS EDUCATIONAL FUND, INC.	95-	3747267	Pa	ge 12
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1	5,12		
2	Total expenses (must equal Part IX, column (A), line 25)	2	9,92		
3	Revenue less expenses. Subtract line 2 from line 1	3	-4,80		
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	9,04		
5	Net unrealized gains (losses) on investments	5		3	65.
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,				
	column (B))	10	4,24	2,0	61.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				X
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	d on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	te basis	,		
	consolidated basis, or both:				
	Separate basis IConsolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audit	,		
	review, or compilation of its financial statements and selection of an independent accountant?		2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	ngle Au	dit		
	Act and OMB Circular A-133?		За		Х
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ	ired au	dit		
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		

Form 990 (2013)

SCHEDULE A	
------------	--

(Form 990 or 990-EZ)

Public Charity Status and Public Support Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

Attach to Form 990 or Form 990-F7

Open to Public

OMB No. 1545-0047

Department of Internal Reve	of the Treasury nue Service	Information about	► Attach to but Schedule A (Form 990				at www.in	a av/form	000	Open to Inspe	o Publi ection	ic
Name of	the organizati			01 000 LL)			at // // // .// 3			identificati	on nu	mber
	-		EDUCATIONAL	FUND	, INC	•				5-3747		
Part I	Reason		ity Status (All organiz				t.) See inst	ructions.				
The organ			because it is: (For lines 1									
1 🗂		-	s, or association of chur	-		•	-	-				
2	A school des	cribed in section 17	'0(b)(1)(A)(ii). (Attach Sc	hedule E.)								
3	A hospital or	a cooperative hospi	tal service organization of	described	in section	170(b)(1)	(A)(iii).					
4	A medical res	search organization	operated in conjunction	with a hos	pital desc	ribed in se	ction 170	(b)(1)(A)(ii	i). Enter	the hospital	's nam	ıe,
	city, and stat	e:										
5	An organizati	on operated for the	benefit of a college or ur	niversity ov	wned or op	perated by	a governi	mental uni	t describ	oed in		
	section 170	(b)(1)(A)(iv). (Comple	ete Part II.)									
6	A federal, sta	te, or local governm	ent or governmental unit	t describe	d in sectio	n 170(b)(⁻	1)(A)(v).					
7 X	An organizati	on that normally rec	eives a substantial part	of its supp	ort from a	governme	ental unit c	or from the	general	public desc	ribed i	in
	section 170(b)(1)(A)(vi). (Comple	te Part II.)									
8 🛄	A community	trust described in s	ection 170(b)(1)(A)(vi).	(Complete	Part II.)							
9	An organizati	on that normally rec	eives: (1) more than 33 1	1/3% of its	support f	rom contri	butions, m	nembershi	p fees, a	and gross re	ceipts	from
	activities rela	ted to its exempt fur	nctions - subject to certa	ain excepti	ons, and (2) no more	e than 33 1	/3% of its	suppor	t from gross	invest	ment
	income and u	unrelated business t	axable income (less sect	tion 511 ta	x) from bu	isinesses a	acquired b	y the orga	anization	after June 3	30, 197	′5.
	See section	509(a)(2). (Complete	e Part III.)									
10 🔛	An organizati	on organized and op	perated exclusively to te	st for publ	ic safety. S	See sectio	on 509(a)(4	ŀ).				
11 📖			perated exclusively for th									or
		•••••	ations described in section		-		2). See sec	tion 509(a)(3). Ch	eck the box	that	
			organization and comple									
	a 📖 Type I		• •	ype III - Fu		•				n-functional		-
e 📖		· · ·	t the organization is not		•		•		-	-		
		•	han one or more publicly		•				9(a)(1) or	section 509)(a)(2).	
f	-		ten determination from t		-							
-			nis box									. 📖
g	•		organization accepted ar			-		•			Vaa	No
			irectly controls, either al upported organization?								Yes	No
			n described in (i) above?									<u> </u>
			person described in (i) above?									<u> </u>
h			about the supported or									<u> </u>
				gamzation	(0).							
(i) Name	of supported	(ii) EIN	(iii) Type of organization	(iv) Is the c	rganization	(v) Did you	u notify the	(vi) is	the .	(vii) Amount	t of mor	netarv
• •	anization	(1) 211	(described on lines 1-9	in col. (i) lis		organizat	ion in col.	(vi) Is organizatio (i) organiz	ed in the	. ,	port	lotal y
Ū			above or IRC section	governing	document?	(i) of you	r support?	U.S	.?		-	
			(see instructions))	Yes	No	Yes	No	Yes	No			

Form 990 or 990-EZ.

LHA For Paperwork Reduction Act Notice, see the Instructions for

Schedule A (Form 990 or 990-EZ) 2013

332021 09-25-13

<u>Total</u>

13

08481112 793927 17290

Schedule A (Form 990 or 990-EZ) 2013 RESULTS EDUCATIONAL FUND, INC.

95-3747267 Page 2

Part II

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	5173664.	2582737.	1566785.	7345515.	4372082.	21040783.
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge \dots						
4	Total. Add lines 1 through 3	5173664.	2582737.	1566785.	7345515.	4372082.	21040783.
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)						5732625.
6	Public support. Subtract line 5 from line 4.						15308158.
Sec	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
7	Amounts from line 4	5173664.	2582737.	1566785.	7345515.	4372082.	21040783.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources \dots	7,223.	6,361.	6,003.	13,818.	10,201.	43,606.
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 IV.)	22,078.	13,691.	73,510.	5,501.	2,154.	116,934.
11	Total support. Add lines 7 through 10						21201323.
12	Gross receipts from related activities,	etc. (see instruction	ons)			12 2	,329,483.
13	First five years. If the Form 990 is for	r the organization's	first, second, thir	d, fourth, or fifth ta	ax year as a sectio	n 501(c)(3)	_
0	organization, check this box and stor	here					
	ction C. Computation of Publ						70.00
	Public support percentage for 2013 (,		.,,		14	72.20 %
	Public support percentage from 2012					15	63.67 %
1 6a	33 1/3% support test - 2013. If the c	-			14 is 33 1/3% or n	nore, check this be	
	stop here. The organization qualifies		-				
b	33 1/3% support test - 2012. If the c						
	and stop here. The organization qual						
17a	10% -facts-and-circumstances tes						
	and if the organization meets the "fac			-	-	-	
	meets the "facts-and-circumstances"						
b	10% -facts-and-circumstances tes						
	more, and if the organization meets the						e
	organization meets the "facts-and-cire						
18	Private foundation. If the organization	n did not check a	box on line 13, 16	a, 16b, 17a, or 17t			
					Sche	dule A (Form 990) or 990-EZ) 2013

08481112 793927 17290

Schedule A (Form 990 or 990 EZ) 2013 RESULTS EDUCATIONAL FUND, INC. Part III 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						
Calendar year (or fiscal year beginning in) 🕨	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1 Gifts, grants, contributions, and						
membership fees received. (Do not						
include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services per- formed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or bus-						
iness under section 513						
4 Tax revenues levied for the organ- ization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities						
furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and						
3 received from disqualified persons b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support (Subtract line 7c from line 6.)						
Section B. Total Support			•	•		
Calendar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income						
(less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)		<u> </u>	 	<u> </u>		1
14 First five years. If the Form 990 is for	C C			2		zation,
check this box and stop here Section C. Computation of Publi						▶∟
15 Public support percentage for 2013 (li			column (fl)		15	%
16 Public support percentage from 2012					16	%
Section D. Computation of Inves						/0
17 Investment income percentage for 20					17	%
18 Investment income percentage from 2					18	%
19a 33 1/3% support tests - 2013. If the					33 1/3%, and line	
more than 33 1/3%, check this box ar						
b 33 1/3% support tests - 2012. If the						and
line 18 is not more than 33 1/3%, che	ck this box and s	top here. The org	anization qualifies	as a publicly supp	oorted organizatior	n ►
20 Private foundation. If the organization	n did not check a	box on line 14, 19	a, or 19b, check t	this box and see in	structions	
332023 09-25-13			15	Scl	hedule A (Form 99	90 or 990-EZ) 2013

Part IV 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).

* *	PUBLIC	DISCLOSURE	COPY	* *
-----	--------	------------	------	-----

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 . OMB No. 1545-0047

2013

Employer identification number

Name	of the	organization
Name		Uganization

Schedule B

(Form 990, 990-EZ.

Department of the Treasury

Internal Revenue Service

or 990-PF)

-		
	RESULTS EDUCATIONAL FUND, INC.	95-3747267
Organization type (ch	neck 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, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II.

Special Rules

X For a section 501(c)(3) organization 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) and received from any one contributor, during the year, a contribution 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 a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 for use *exclusively* for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.

□ For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use *exclusively* for religious, charitable, etc., purposes, but these contributions did not total to 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., purpose, charitable, etc., contributions of \$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) (2013)

08481112 793927 17290

Name of organization

Employer identification number

Person

(d)

Type of contribution

X

95-3747267

RESULTS EDUCATIONAL FUND, INC.

		\$ <u>325,000.</u>	Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2		\$ <u>100,000.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3		\$ <u>97,256.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4		\$ <u>119,166.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5		\$ <u>119,590.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>6</u> 323452 10-2		\$ <u>100,000.</u> Schedule B (Form	Person X Payroll Noncash (Complete Part II for noncash contributions.) 990, 990-EZ, or 990-PF) (2013)
	18		

Schedule B (Form 990, 990-EZ, or 990-PF) (2013)	P
Name of organization	Employer identification number
RESULTS EDUCATIONAL FUND, INC.	95-3747267
Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed	ed.

Page **3**

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

	\$	
(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	\$	
(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	\$	
(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	 \$	
· · · · · · · · · · · · · · · · · · ·	(b) Description of noncash property given	(b) (c) Description of noncash property given (c) (b) (c) (c) (c) (c) (c) (c) (c) (c) (c) (c) FMV (or estimate) (c) FMV (or estimate) (see instructions) (c) (see instructions) (see instructions) (b) (see instructions) (see instructions) (see instructions) (see instructions) (c) (b) (c) (b) S (c) FMV (or estimate) (see instructions) (c) (b) FMV (or estimate) (see instructions) (see instructions)

08481112 793927 17290

19

t III	EDUCATIONAL FUND, IN Exclusively religious, charitable, etc., indi year. Complete columns (a) through (e) and it	ividual contributions to section 501(c) the following line entry. For organizatio	95-3747267 (7), (8), or (10) organizations that total more than \$1,000 to ons completing Part III, enter the year. (Enter this information once.) \blacktriangleright \$
t	the total of <i>exclusively</i> religious, charitable, e Use duplicate copies of Part III if additior	tc., contributions of \$1,000 or less for	the year. (Enter this information once.) S
No. m *t I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		(e) Transfer of gift	[
	Transferee's name, address, a	and ZIP + 4	Relationship of transferor to transferee
lo. m t I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address, a	(e) Transfer of gift	t Relationship of transferor to transferee
lo. n t l	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address, a	(e) Transfer of gift	t Relationship of transferor to transferee
lo. n t l	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address, a	(e) Transfer of gift	t Relationship of transferor to transferee

~ ~		0	- I F in an ai				1 (OMB No. 154	45-0047
		Supplement						20-	12
(Forr	n 990)	Complete if the org Part IV, line 6, 7, 8, 9, 10), 11a, 11b, 11c, 1	1d, 11e, 11f, 12a, or	90, 12b.			LU	
	ment of the Treasury I Revenue Service	Information about Schedule D (Formation)	Attach to Form 9 rm 990) and its in	90. structions is at www	w irs aov/fi	orm990		Open to Inspection	
Nam	e of the organizati	-	·····		v iis govin		er iden	ntificatior	n numbe
		RESULTS EDUCATIONA					95-3	37472	67
Pai	tl Organiza	ations Maintaining Donor Advise	ed Funds or O	ther Similar Fur	nds or A	ccount	S.Com	plete if th	е
	organizatio	n answered "Yes" to Form 990, Part IV, lir							
				advised funds	()	b) Funds a	and oth	ier accou	nts
1		nd of year							
2		outions to (during year)							
3		from (during year)			-				
4		It end of year		a stalla stalla stalla su su		-1-			
5	-	on inform all donors and donor advisors in	-					Yes	
6		on's property, subject to the organization's on inform all grantees, donors, and donor					ــــــ	162	
U		poses and not for the benefit of the donor							
		vate benefit?		• • •		-		Yes	
Pa		ation Easements. Complete if the or							
1		servation easements held by the organiza	-						
	Preservation	n of land for public use (e.g., recreation or	education)	Preservation of an	historicall	y importa	nt land	area	
	Protection o	of natural habitat		Preservation of a d	certified his	storic stru	cture		
	Preservation	n of open space							
2	Complete lines 2a	through 2d if the organization held a qual	ified conservation	contribution in the fo	rm of a co	nservatio	n easer	ment on t	he last
	day of the tax yea	r.			1				- V
							ld at the	e End of the	e lax yea
a		onservation easements				2a			
b	•	ricted by conservation easements		(a)		2b 2c			
c d		vation easements included in (c) acquired				20			
u		nal Register				2d			
3		vation easements modified, transferred, re					irina the	e tax	
	year ►	,,		,					
4	Number of states	where property subject to conservation ea	asement is located	▶					
5	Does the organiza	tion have a written policy regarding the pe	riodic monitoring,	inspection, handling	of			_	
	violations, and enf	forcement of the conservation easements	it holds?					Yes	
6		er hours devoted to monitoring, inspecting	-		-	-	·		
7		ses incurred in monitoring, inspecting, and							-
8		vation easement reported on line 2(d) abo	, ,			, (,		1.	—
•)(4)(B)(ii)?						Yes	
9	-	be how the organization reports conserva- ble, the text of the footnote to the organiza		•					
	conservation ease		alion s in anciai sta	itements that describ		jainzation	S acco		
Pa		ations Maintaining Collections of	of Art, Historic	al Treasures, or	Other S	Similar	Asset	ts.	
		f the organization answered "Yes" to Form							
1a	If the organization	elected, as permitted under SFAS 116 (A	SC 958), not to rej	oort in its revenue sta	atement ar	nd balance	e sheet	works of	art,
	historical treasure	s, or other similar assets held for public ex	hibition, education	n, or research in furth	erance of	public ser	vice, p	rovide, in	Part XIII,
	the text of the foo	tnote to its financial statements that desc	ribes these items.						
b	If the organization	elected, as permitted under SFAS 116 (A	SC 958), to report	in its revenue statem	nent and b	alance sh	eet wor	rks of art,	historica
		r similar assets held for public exhibition, e	ducation, or resea	rch in furtherance of	public ser	vice, prov	ide the	following	g amount
	relating to these it					. .			
		luded in Form 990, Part VIII, line 1				► <u>\$</u> _			
~	.,			insilau ana sta fau finau		► \$_			
2	-	received or held works of art, historical tre			iciai gain,	provide			
~	-	unts required to be reported under SFAS ⁻		-		¢			
a b		d in Form 990, Part VIII, line 1 n Form 990, Part X							
						► Ψ_			

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. ³³²⁰⁵¹ ⁰⁹⁻²⁵⁻¹³

21 2013.05000 RESULTS EDUCATIONAL FUND, I 17290_1

08481112 793927 17290

		EDUCATION		-					4726		age 2
Pa	t III Organizations Maintaining C	Collections of A	rt, His	torical Tr	reasures,	or Othe	er Simila	ir Asse	ts(contin	ued)	
3	Using the organization's acquisition, access	ion, and other record	ds, chec	k any of the	e following that	at are a s	ignificant ι	ise of its	collectio	n item	IS
	(check all that apply):										
а	Public exhibition	c			change progra						
b	Scholarly research	e		Other							
с	Preservation for future generations										
4	Provide a description of the organization's c							se in Par	t XIII.		
5	During the year, did the organization solicit o								٦.,		٦
Do	to be sold to raise funds rather than to be m t IV Escrow and Custodial Arran								Yes		No
Fa	t IV Escrow and Custodial Arran reported an amount on Form 990, Pa		ete if the	organizatio	on answered	"Yes" to	Form 990,	Part IV,	line 9, or		
10			dian/ for	contributio	ns or other as	scote not	included				
Id	Is the organization an agent, trustee, custod on Form 990, Part X?								Yes		No
h	If "Yes," explain the arrangement in Part XIII								162	L	
b		and complete the lo	nowing	lable.					Amount		
c	Beginning balance						1c		7 mount		
	Additions during the year										
	Distributions during the year										
f	Ending balance										
2a	Did the organization include an amount on F								Yes		No
	If "Yes," explain the arrangement in Part XIII]
Pa	t V Endowment Funds. Complete i	if the organization ar	swered	"Yes" to Fo	orm 990, Part	IV, line 1	0.				
		(a) Current year	(b) F	rior year	(c) Two yea	rs back	(d) Three ye	ears back	(e) Four	years	back
	Beginning of year balance										
	Contributions										
	Net investment earnings, gains, and losses										
d	Grants or scholarships										
е	Other expenditures for facilities										
	and programs										
	Administrative expenses										
-	End of year balance										
2	Provide the estimated percentage of the cur	•	-	g, column (a)) held as:						
	Board designated or quasi-endowment		_%								
	Permanent endowment ► Temporarily restricted endowment ►	%									
C	The percentages in lines 2a, 2b, and 2c sho										
30	Are there endowment funds not in the posse	•	ation the	at are held a	and administ	ared for t	he organiz	ation			
0u	by:						ne organizi		Г	Yes	No
	(i) unrelated organizations								3a(i)		
	(ii) related organizations										
b	If "Yes" to 3a(ii), are the related organization	s listed as required o	on Sche	dule R?					3b		
4	Describe in Part XIII the intended uses of the								· •		
Pa	t VI Land, Buildings, and Equipm										
	Complete if the organization answere	d "Yes" to Form 990), Part IV	, line 11a. S	See Form 990	, Part X,	line 10.				
	Description of property	(a) Cost or o	other	(b) Cos	t or other	(c) A	ccumulate	d	(d) Bool	k valu	е
		basis (investr	ment)	basis	(other)	dep	oreciation				
1a	Land										
	Buildings			32	26,260.		9,64	6.	31	5,6	14.
с	Leasehold improvements										
d	Equipment			15	51,592.		63,67	/5.	8'	/,9	17.
	Other								- 10		
Tota	. Add lines 1a through 1e. (Column (d) must e	equal Form 990, Part	X, colur	nn (B), line	10(c).)					-	31.
							5	Schedule	D (Form	1 990)	2013

332052 09-25-13

Schedule D	(Form 990)	2013

RESULTS EDUCATIONAL FUND, INC	RESULTS	EDUCATIONAL	FUND,	INC
-------------------------------	---------	-------------	-------	-----

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	
(a) Description of security or category (including name of security)	(b) Book value			d-of-year market value
(1) Financial derivatives				
(2) Closely-held equity interests				
(3) Other				
(A)				
(B)				
(C)				
(D)				
(E)				
(F)				
<u>(G)</u>				
(H) Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)				
Part VIII Investments - Program Related.				
Complete if the organization answered "Yes"	to Form 000 Part IV	line 11c See Form 990	Part V lina 13	
(a) Description of investment	(b) Book value			d-of-year market value
(1)	((-,		, ,
(1)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ►				
Part IX Other Assets.				
Complete if the organization answered "Yes"		, line 11d. See Form 990,	Part X, line 15.	
. ,	Description			(b) Book value
<u>(1)</u>				
(2)				
(3)				
<u>(4)</u>				
(5) (6)				
(7)				
(8)				
(9)				
Total. (Column (b) must equal Form 990, Part X, col. (B) line	e 15.)			
Part X Other Liabilities.	,		· · · · · ·	L
Complete if the organization answered "Yes"	to Form 990, Part IV	, line 11e or 11f. See Forn	n 990, Part X, line 25	
1. (a) Description of liability		(b) Book value		
(1) Federal income taxes]	
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)			-	
(9)			-	
Total. (Column (b) must equal Form 990, Part X, col. (B) line	e 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

Schedule D (Form 990) 2013

9	5-	3	7	47	2	67	Page

4

Schedule D (Form 990) 2013	RESULTS	EDUCATIONAL	FUND,	INC.

Pa	T XI Reconciliation of Revenue per Audited Financial Statem	ients with Revenue	e per Return.	
	Complete if the organization answered "Yes" to Form 990, Part IV, line 12a			
1	Total revenue, gains, and other support per audited financial statements			
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
а	Net unrealized gains on investments	2a		
b	Donated services and use of facilities	2b		
с	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII.)	2d		
е	Add lines 2a through 2d			
3	Subtract line 2e from line 1			
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		
С	Add lines 4a and 4b			
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			
Pa	rt XII Reconciliation of Expenses per Audited Financial Staten	nents With Expense	es per Return.	
	Complete if the organization answered "Yes" to Form 990, Part IV, line 12a	1.		
1	Total expenses and losses per audited financial statements			
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
а	Donated services and use of facilities	2 a		
b	Prior year adjustments	2 b		
С	Other losses	2 c		
d	Other (Describe in Part XIII.)	2d		
е	Add lines 2a through 2d			
3	Subtract line 2e from line 1			
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		
С	Add lines 4a and 4b			
5	Total expenses. Add lines 3 and 4c. (<i>This must equal Form 990, Part I, line 18.</i>)			

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

PART X, LINE 2:

THE ORGANIZATION RECOGNIZES THE EFFECT OF INCOME TAX

POSITIONS ONLY IF THOSE POSITIONS ARE MORE LIKELY THAN NOT OF BEING

SUSTAINED. THE ORGANIZATION DOES NOT BELIEVE ITS FINANCIAL STATEMENTS

INCLUDE ANY UNCERTAIN TAX POSITIONS.

332054 09-25-13

Schedule D (Form 990) 2013

SCHEDULE F	Statomo	nt of Act	ivities Outside the U	nitod Sta	otos 🗆	OMB No. 1545-0047
			n answered "Yes" on Form 990, Part			2013
Department of the Treasury	Information ab		orm 990. F See separate instruction (Form 990) and its instructions is at			Open to Public Inspection
Internal Revenue Service		Sul Schedule F		www.irs.gov/fc		tification number
RESULTS EDUCATI					95-37472	
		ctivities Ou	tside the United States. Compl	ete if the organ	ization answered	"Yes" on
Form 990, Part IV 1 For grantmakers, Does	,	maintain recor	ds to substantiate the amount of its gr	ants and other	assistance	
•	•		the selection criteria used to award th		·	Yes 🗌 No
2 For grantmakers. Desc United States.	ribe in Part V the	e organization's	procedures for monitoring the use of it	s grants and o	ther assistance o	utside the
			an be duplicated if additional space is			
(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, grants to recipients located in the region)	is a pro describe	vity listed in (d) gram service, e specific type ce(s) in region	(f) Total expenditures for and investments in region
				RESEARCH OF	' IMF HEALTH	
SUB-SAHARAN AFRICA	0	0	PROGRAM SERVICES	AND EDUCATI	ON POLICIIES	290,396.
					D EDUCATION	
EUROPE	0	0	PROGRAM SERVICES	ON TB & HIV	/AIDS	975,822.
EAST ASIA & THE PACIFIC	0	0	PROGRAM SERVICES	ADVOCACY AN ON TB & HIV	ID EDUCATION	610,596.
SOUTH ASIA	0	0	PROGRAM SERVICES	ADVOCACY AN ON TB & HIV	ID EDUCATION	418,773.
						, -
NORTH AMERICA	0	0	PROGRAM SERVICES	ADVOCACY AN ON TB & HIV	ID EDUCATION	446,610.
3 a Sub-total	0	0				2,742,197.
b Total from continuation sheets to Part I	0	0				0.
c Totals (add lines 3a and 3b)	0	0				2,742,197.

 $\mbox{LHA}\,$ For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule F (Form 990) 2013

332071 10-03-13

95-3747267

Page 2

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.

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
			TB ACTION					
			PROJECT-ADVOCACY AND					
			EDUCATION ON TB &					
		SOUTH ASIA	HIV/AIDS	418,773.	INT'L WIRE	Ο.		
			TB ACTION					
			PROJECT-ADVOCACY AND					
			EDUCATION ON TB &					
		EUROPE	HIV/AIDS	546,424.	INT'L WIRE	Ο.		
			TB ACTION					
			PROJECT-ADVOCACY AND					
		EAST ASIA AND THE	EDUCATION ON TB &					
		PACIFIC	HIV/AIDS	443,366.	INT'L WIRE	Ο.		
			TB ACTION					
			PROJECT-ADVOCACY AND					
			EDUCATION ON TB &					
		EUROPE	HIV/AIDS	146,640.	INT'L WIRE	Ο.		
			TB ACTION					
			PROJECT-ADVOCACY AND					
			EDUCATION ON TB &					
		NORTH AMERICA	HIV/AIDS	446,610.	INT'L WIRE	Ο.		
			TB ACTION					
			PROJECT-ADVOCACY AND					
		SUB-SAHARAN	EDUCATION ON TB &					
		AFRICA	HIV/AIDS	290,396.	INT'L WIRE	Ο.		
			TB ACTION					
			PROJECT-ADVOCACY AND					
			EDUCATION ON TB &					
		EUROPE	HIV/AIDS	282,758.	INT'L WIRE	Ο.		
			TB ACTION					
			PROJECT-ADVOCACY AND					
		EAST ASIA AND THE	EDUCATION ON TB &					
		PACIFIC	HIV/AIDS	167,230.	INT'L WIRE	Ο.		
2 Enter total number of	recipient organizatio	ns listed above that are	recognized as charities by the	,		xempt bv		
			n 501(c)(3) equivalency letter		-			8
								0

RESULTS	EDUCATIONAL	FUND,	INC.
---------	-------------	-------	------

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.

Schedule F (Form 990) 2013

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

95-3747267

1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? <i>If</i> "Yes," <i>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)</i>	Yes	X No
2	Did the organization have an interest in a foreign trust during the tax year? <i>If</i> "Yes," <i>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)</i>	Yes	X 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	X 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? <i>If</i> "Yes," <i>the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund.</i> (see Instructions for Form 8621)	Yes	X 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	X No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? <i>If</i> "Yes," <i>the organization may be required to file Form 5713, International Boycott Report. (see Instructions for Form 5713)</i>	Yes	X No

Schedule F (Form 990) 2013

Part V	Supplemental Information
	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 2:

GRANT RECIPIENTS ARE REQUIRED TO SUBMIT DOCUMENTATION

SUBSTANTIATING ALL FUNDS REQUESTED AND RECEIVED.

332075 10-03-13

SCHEDULE G (Form 990 or 990-EZ) Department of the Treasury Internal Revenue Service	Complete if the o	ental Information Regarding e organization answered "Yes" to I organization entered more than \$1 Attach to Form 990 bout Schedule G (Form 990 or 990-EZ)	Form 9 5,000) or Fo	990, P on Fo rm 99	art IV, lines 17, 18, o rm 990-EZ, line 6a. 00-EZ.	or 19	, or if the	OMB No. 1545-0047
Name of the organization	n	EDUCATIONAL FUND,						lentification number 7267
Part I Fundrais		Complete if the organization answe) Form 990, Part IV, li	ine 1		
 a Mail solicitat b Internet and c Phone solici d In-person so 2 a Did the organization key employees list 	ions email solicitations tations licitations on have a written o red in Form 990, P n highest paid indi	f ☐ Solicitat g ☐ Special or oral agreement with any individual art VII) or entity in connection with p ividuals or entities (fundraisers) purs	tion of tion of fundra (inclue	non-g gover aising ding o ional f	overnment grants nment grants events fficers, directors, trus fundraising services?	stees	Y	
(i) Name and addres or entity (fund		(ii) Activity	(iii) fundi have c or cor contrib	ustody	(iv) Gross receipts from activity	tò (o	Amount paid or retained by fundraiser ted in col. (i)	
			Yes	No		L		
		on is registered or licensed to solicit o		. D utions	s or has been notified	d it is	exempt from	registration
LHA For Paperwork Re	eduction Act Not	ice, see the Instructions for Form	990 or	990-	EZ. S	Schee	dule G (Form	990 or 990-EZ) 2013

332081 09-12-13

Schedule G (F	Form 990 or 990-EZ)) 2013 RESULTS	EDUCATIONAL	FUND,	INC
---------------	---------------------	----------------	-------------	-------	-----

 Schedule G (Form 990 or 990-EZ) 2013 RESULTS
 EDUCATIONAL
 FUND,
 INC.
 95-3747267
 Page 2

 Part II
 Fundraising Events.
 Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000

		(a) Event #1	(b) Event #2	(c) Other events	() –
			HOUSTON		(d) Total events
			EVENT	16	(add col. (a) through
		(event type)	(event type)	(total number)	col. (c))
1			(even type)	(total humber)	
1	Gross receipts	150,291.	30,805.	72,629.	253,725
2	Less: Contributions	135,270.	19,238.	63,264.	217,772
3	Gross income (line 1 minus line 2)	15,021.	11,567.	9,365.	35,953
4	Cash prizes				
5	Noncash prizes				
6	Rent/facility costs				
6	Food and beverages				
8					
9	· · · · · · · · · · · · · · · · · · ·		11,567.	9,365.	35,953
10	Direct expense summary. Add lines 4 throu	gh 9 in column (d)		🕨	35,953
11		line 3, column (d)		<u></u>	C
	III Gaming. Complete if the organization \$15,000 on Form 990-EZ, line 6a.			eponed more than	
		(a) Bingo	(b) Pull tabs/instant	(c) Other gaming	(d) Total gaming (ad
		(u) Billigo	bingo/progressive bingo		col. (a) through col. (c
1	Gross revenue				
2	Cash prizes				
. 3	Noncash prizes				
4	Rent/facility costs				
2	Rent/facility costs				
5	Other direct expenses	Yes %	Yes %	Yes %	
5		Yes %	└── Yes% └── No	└── Yes% └── No	
5	Other direct expenses	└── Yes % └── No	No	No	
5 6 7	Other direct expenses	Yes% No gh 5 in column (d)	□ No	□ No ►	
5 6 7 8	Other direct expenses	gh 5 in column (d)	□ No	□ No ►	
5 6 7 8	Other direct expenses Volunteer labor Direct expense summary. Add lines 2 throu Net gaming income summary. Subtract line	gh 5 in column (d)	□ No	□ No ►	
5 6 7 8 8	Other direct expenses Volunteer labor Direct expense summary. Add lines 2 throu Net gaming income summary. Subtract line nter the state(s) in which the organization ope the organization licensed to operate gaming a	gh 5 in column (d)	No No	□ No ►	Yes N
5 6 7 8 8	Other direct expenses Volunteer labor Direct expense summary. Add lines 2 throu Net gaming income summary. Subtract line	gh 5 in column (d)	No No	□ No ►	Yes N
5 6 7 8 EI a Is b If	Other direct expenses	gh 5 in column (d)	No	No	
5 6 7 8 8 8 8 8 8 1 8 1 8 1 9 1 1 9 1 9 1 9 1	Other direct expenses Volunteer labor Direct expense summary. Add lines 2 throu Net gaming income summary. Subtract line nter the state(s) in which the organization ope the organization licensed to operate gaming a	gh 5 in column (d)	No	No ►	
5 6 7 8 8 8 8 8 8 1 8 1 8 1 9 1 1 9 1 9 1 9 1	Other direct expenses	gh 5 in column (d)	No	No ►	

Sch	nedule G (Form 990 or 990-EZ) 2013 RESULTS EDUCATIONAL FUND, INC. 95-3	<u>374</u> 7	267	Page 3
11			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
	Indicate the percentage of gaming activity operated in:			
	a The organization's facility			%
	a An outside facility	13b		%
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records:			
	Name			
	Address			
15a	a Does the organization have a contract with a third party from whom the organization receives gaming revenue?	🗀	Yes	No No
b	o If "Yes," enter the amount of gaming revenue received by the organization 🕨 \$ and the amount			
	of gaming revenue retained by the third party $ ho$ \$			
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			
47				
	Mandatory distributions:			
a	a Is the organization required under state law to make charitable distributions from the gaming proceeds to		Yes	🗌 No
h	retain the state gaming license? • Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the	—	100	
	organization's own exempt activities during the tax year > \$			
Pa	Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v), and Part III, I	ines 9	9b, 1	0b, 15b,
	15c, 16, and 17b, as applicable. Also complete this part to provide any additional information (see instructions).			
_				
3320	83 09-12-13 Schedule G (Forr 32	n 990 (ur 99(-=z)2013

08481112 793927 17290 2013.05000 RESULTS EDUCATIONAL FUND, I 17290_1

(Form 990 or 990-EZ) Department of the Treasury

Supplemental Information to Form 990 or 990-EZ Complete to provide information for responses to specific questions on

Form 990 or 990-EZ or to provide any additional information. Attach to Form 990 or 990-EZ.

Internal Revenue Service Name of the organization

RESULTS EDUCATIONAL FUND, INC.

Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990 Employer identification number 95-3747267

OMB No. 1545-0047

Open to Public

Inspection

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

CAMPAIGNS.

FORM 990, PART VI, SECTION B, LINE 11:

MEMBERS OF THE FINANCE COMMITTEE OF THE GOVERNING BOARD REVIEW

THE FORM 990 BEFORE IT IS SIGNED BY THE EXECUTIVE DIRECTOR AND FILED WITH

THE IRS.

FORM 990, PART VI, SECTION B, LINE 12C:

THE ORGANIZATION'S EXECUTIVE DIRECTOR ENSURES THAT EACH MEMBER

OF THE BOARD OF DIRECTORS COMPLETES AND SUBMITS ANNUALLY A CONFLICT OF

INTEREST FORM TO DISCLOSE ANY INTERESTS THAT MAY GIVE RISE TO CONFLICTS.

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

THE ORGANIZATION'S BOARD EXECUTIVE COMMITTEE DETERMINES THE

SALARY OF THE EXECUTIVE DIRECTOR.

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

AK, AZ, AR, CA, CO, CT, DC, FL, GA, HI, IL, KS, KY, ME, MD, MN, MO, NH, NJ, NM, NY, NC, OH, OK, OR

PA, RI, SC, UT, VA, WA, WV, WI

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

THE ORGANIZATION MAKES ITS 1023, 990, GOVERNING DOCUMENTS,

CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS AVAILABLE TO THE

PUBLIC UPON REASONABLE REQUEST.

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule O (Form 990 or 990-EZ) (2013) 332211 09-04-13

08481112 793927 17290

Name of the organization RESULTS EI	DUCATIONAL FUND, INC.	Employer identification nun 95-3747267
FORM 990, PART XII, LIN		
	T CHANGED ITS AUDIT OVERSIG	ĪT
	ELECTION OF AN INDEPENDENT A	
TAX YEAR.		
332212		
332212)9-04-13	34	Schedule O (Form 990 or 990-EZ) (2

SCHEDULE R	
(Form 990)	

Related Organizations and Unrelated Partnerships

Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37. Attach to Form 990. See separate instructions.

Department of the Treasury Internal Revenue Service

Name of the organization

Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990

RESULTS EDUCATIONAL FUND, INC.

Part I Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity

Identification of Related Tax-Exempt Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt Part II organizations during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section	(f) Direct controlling entity	cont	(g) 512(b)(13) trolled titty?	
				501(c)(3))		Yes	No	
RESULTS, INC 52-1411039								
1101 15TH STREET NW	GRASSROOTS LOBBY TO END				RESULTS			
WASHINGTON, DC 20005	HUNGER AND POVERTY	DISTRICT OF COLUMBIA	501(C)(4)		EDUCATIONAL FUND	Х		

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

OMB No. 1545-0047 2013

Open to Public . Inspection

Employer identification number

95-3747267

Part III Identification of Related Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.

(a)	(b)	(c)	(d)		e)	(f)	(g	1)	()	ו)	(i)		(j)	(k)
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign	Direct controlling entity	(related, excluded fr	ant income unrelated, om tax under		of total ome	Shaı end-o ass	f-year	Disprop alloca	ortionate tions?	Code V-UE amount in b 20 of Sched	ox ^{ma} ule ^{pa}	anaging artner?	
		country)		sections	512-514)					Yes	No	K-1 (Form 10	65) Y e	es No	
	4														
	4														
														+-	
	-														
	-														
	-														
				+										+	
	-														
	-														
	1														
	7														
IV Identification of Related C organizations treated as a c	Organizations Taxable corporation or trust dur	as a Corpo	oration or Trust Co year.	omplete if th	e organizatio	on answe	ered "Yes	" on Forn	n 990, Pa	art IV, I	ine 34	because it ha	d one	or mo	re relate
(a)			(b)	(c)	(d)		(e)		(f))		(g)	(۲	ר)	(i) Sectio
Name, address, and of related organizat		Prim	ary activity	Legal domicile (state or foreign	Direct cont entity		Type of (C corp, S	entity	Share c inco				Perce owne		Section 512(b)(control entity

of related organization		(state or foreign	entity	(C corp, S corp, or trust)	income	end-of-year assets	ownership	ent	tity?			
		country)		ortracty		400010		Yes	No			

Schedule R (Form 990) 2013 RESULTS EDUCATIONAL FUND, INC.

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.					Yes	No	
1 During the tax year, did the organization engage in any of the following transaction	is with one or more r	related organizations listed	l in Parts II-IV?				
	a Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity						
b Gift, grant, or capital contribution to related organization(s)						Х	
c Gift, grant, or capital contribution from related organization(s)				1c		Х	
d Loans or loan guarantees to or for related organization(s)						Х	
e Loans or loan guarantees by related organization(s)						Х	
5,5,6,7,							
f Dividends from related organization(s)				1f		Х	
g Sale of assets to related organization(s)						Х	
h Purchase of assets from related organization(s)						Х	
i Exchange of assets with related organization(s)				1i		Х	
j Lease of facilities, equipment, or other assets to related organization(s)				1j		Х	
k Lease of facilities, equipment, or other assets from related organization(s)				1k		Х	
I Performance of services or membership or fundraising solicitations for related organization(s)							
m Performance of services or membership or fundraising solicitations by related organization(s)							
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)							
 Sharing of paid employees with related organization(s) 							
p Reimbursement paid to related organization(s) for expenses				1p	Х		
q Reimbursement paid by related organization(s) for expenses					Х		
r Other transfer of cash or property to related organization(s)				1r		Х	
s Other transfer of cash or property from related organization(s)						Х	
2 If the answer to any of the above is "Yes," see the instructions for information on w				•			
(a)	(b)	(c)	(d)				
Name of related organization	Transaction	Amount involved	Method of determining amount in	volved			
	type (a-s)						
(1) RESULTS, INC.	0	229,480.	HOURS WORKED				
(2)							
<u>(3)</u>							
<u>(4)</u>							

(5)

(6)

Schedule R (Form 990) 2013 RESULTS EDUCATIONAL FUND, INC.

Part VI Unrelated Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under section 512-514)	(e) Are a partners 501(c) orgs.) all s sec.)(3) :?	(f) Share of total income	end-or-year	(I Dispr tior alloca	n) opor- nate tions?	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) Genera manag partne	al or F ging er?	(k) Percentage ownership
				Yes	<u>No</u>			Yes	No		Yes I	NO	
											$\left \right $		

Schedule R (Form 990) 2013

n	
r responses to questions on Schedule R (see instructions).	
20	Schedule R (Form 990)
דנ.	
	n responses to questions on Schedule R (see instructions).

Page 2

If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II and check this box

Note. Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868.

 If you Part I 	are filing for an Automatic 3-Month Extension, complete Additional (Not Automatic) 3-Month Ex			al (no ci	nies ne	adad)
i arti			· · · ·		•	, see instructions
Type or	Name of exempt organization or other filer, see instruc	tions.				tion number (EIN) or
print						
File by the	RESULTS EDUCATIONAL FUND, IN	iC .			95-3	747267
due date fo filing your return. See	Number, street, and room or suite no. If a P.O. box, se	Social se	curity num	ber (SSN)		
instructions	^{3.} City, town or post office, state, and ZIP code. For a for WASHINGTON, DC 20005	reign add	ress, see instructions.			
Enter the	e Return code for the return that this application is for (file	a separa	te application for each return)			01
Applica	tion	Return	Application			Return
Is For		Code	Is For			Code
	0 or Form 990-EZ	01				
Form 99		02	Form 1041-A			08
Form 47	20 (individual)	03	Form 4720 (other than individual)			09
Form 99	0-PF	04	Form 5227			10
Form 990-T (sec. 401(a) or 408(a) trust) 05 Form 6069						11
Form 990-T (trust other than above) 06 Form 8870						12
STOP! D	o not complete Part II if you were not already granted THE ORGANIZATIO		natic 3-month extension on a prev	iously file	d Form 8	368.
Telep ● If the ● If this box ▶ 4 In 5 Fc 6 If ff 7 St T T	equest an additional 3-month extension of time until or calendar year 2013, or other tax year beginning the tax year entered in line 5 is for less than 12 months, ch Change in accounting period ate in detail why you need the extension HE ORGANIZATION REQUIRES ADDI O ENSURE A COMPLETE AND ACCUR	in the Ur aroup Exe and atta OVEMI neck reas TIONA ATE I	Fax No. ▶ nited States, check this box emption Number (GEN) ch a list with the names and EINs of BER 15, 2014.	f this is fo all memb g Final r	r the whole ers the ext eturn	e group, check this tension is for.
	this application is for Forms 990-BL, 990-PF, 990-T, 4720,	or 6069,	enter the tentative tax, less any			0
	nrefundable credits. See instructions.			<u>8a</u>	\$	0.
	this application is for Forms 990-PF, 990-T, 4720, or 6069,					
	x payments made. Include any prior year overpayment allo	owed as a	credit and any amount paid	8b	¢	0.
	reviously with Form 8868. Alance due. Subtract line 8b from line 8a. Include your pay	ment wit	h this form if required by using	40	\$	
	TPS (Electronic Federal Tax Payment System). See instru-		in this form, in required, by doining	8c	\$	0.
			at be completed for Part II o		Ψ	
	nalties of perjury, I declare that I have examined this form, includir correct, and complete, and that I am authorized to prepare this for	ng accomp	-	-	f my knowle	dge and belief,
Signature	Title D	IREC	FOR OF FINANCE	Date		

Form 8868 (Rev. 1-2014)

323842 12-31-13 **Caution:** Forms printed from within Adobe Acrobat products may not meet IRS or state taxing agency specifications. When using Acrobat 5.x products, uncheck the "Shrink oversized pages to paper size" and uncheck the "Expand small pages to paper size" options, in the Adobe "Print" dialog. When using Acrobat 6.x and later products versions, select "None" in the "Page Scaling" selection box in the Adobe "Print" dialog.

STATE COPY

California Exempt Organization TAXABLE YEAR Annual Information Return

2013

328941 11-14-13 FORM

1	99	

Calendar Yea	/ear 2013 or fiscal year beginning (mm/dd/yyyy) , and ending (mm/dd/yyyy)							
	ganization Name	California corpo	pration number					
RESULT	S EDUCATIONAL FUND, INC.	1061	854					
Address (suite								
	5TH STREET NW		747267					
	STR STREET NW State ZIP Code	33-3	747207					
-								
WASHIN								
A First Ret			•					
	I Information Return • Yes 🔀 No 🛛 during the year: (1) participate							
C IRC Sect	ion 4947(a)(1) trust Ves 🔽 No 🛛 or (2) attempted to influence le	or (2) attempted to influence legislation or any ballot measure,						
D Final Info	rmation Return? or (3) made an election under							
•	Dissolved • Surrendered (Withdrawn) (relating to lobbying by public	(relating to lobbying by public charities)? • 🗌 Yes 🗴 No						
•		If "Yes," complete and attach form FTB 3509.						
E Check ad	counting method: K Is the organization exempt und	K Is the organization exempt under R&TC Section 23701g? • Yes X No						
(1)		If "Yes," enter the gross receipts from nonmember						
F Federal r	eturn filed? sources		\$					
(1)●	990T (2) ● 990 PF (3) ● Sch H (990) L If organization is exempt unde							
· · /	proup filing for the subordinates/affiliates? • Yes X No exclusively religious, education							
	ttach a roster. See instructions supported primarily (50% or n							
	ganization in a group exemption? Yes X No check box. No filing fee is requ							
	vhat is the parent's name?		ny?					
11 103, 1	N Did the organization file Form							
I Did the c	reanization have any changes in its estivities, governing		• Yes X No					
	0 Is the organization under audit							
			● Yes X No					
	xplain, and attach copies of revised documents.							
Part I	Complete Part I unless not required to file this form. See General Instructions B and C.		000 440					
	1 Gross sales or receipts from other sources. From Side 2, Part II, line 8		1 829,448. ₀₀					
	2 Gross dues and assessments from members and affiliates		2 00					
	3 Gross contributions, gifts, grants, and similar amounts receivedST		3 4,372,082. ₀₀					
Receipts	· · · · · · · · · · · · · · · · · · ·	MT 2						
and	This line must be completed. If the result is less than \$50,000, see General Instruction B	•	4 5,201,530. ₀₀					
Revenues	5 Cost of goods sold • 5	00						
	f 6 Cost or other basis, and sales expenses of assets sold $ullet$ $f 6$ $f 44$,	023.00						
	7 Total costs. Add line 5 and line 6		7 44,023.00					
	8 Total gross income. Subtract line 7 from line 4	•	8 5,157,507. ₀₀					
	9 Total expenses and disbursements. From Side 2, Part II, line 18		9 8,938,727. ₀₀					
Expenses	10 Excess of receipts over expenses and disbursements. Subtract line 9 from line 8		10 -3,781,220.00					
	11 Filing fee \$10 or \$25. See General Instruction F		11 N/A 00					
	12 Total payments		12 00					
Filing	13 Penalties and Interest. See General Instruction J		13 00					
Fee	14 Use tax. See General Instruction K	_ F	14 00					
	 Balance due. Add line 11, line 13, and line 14. Then subtract line 12 from the result 		15 00					
	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer							
Sign		has any knowledo Date	ge. I ● Telephone					
Here	Signature of officer ► DIRECTOR OF FI	Jale	202-783-4800					
	Date		● PTIN					
	Prenarer's	Check if self-employed	□ ₽01361002					
Daid								
Paid Decenaria	Firm's name (or yours, RTRTS .TONFS & MARFSCA DA							
Preparer's	if self-		52-1853933 • Telephone					
Use Only	employed) 10500 LITTLE PATUXENT PARKWAY, SUITE 770	1	·					
	COLUMBIA, MD 21044		410-884-0220					
	May the FTB discuss this return with the preparer shown above? See instructions	• <u>X</u>	Yes No					

022

328951 11-14-13

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.

	1	Gross sales or receipts from all but	cinace activitiae. San instructi	000	^	4	35,953.00
	2					2	10,081.00
	-	Interest				2	
Decelate	3	Dividends				-	00
Receipts	4	Gross rents				4	120
from	5	Gross royalties	· · · · · · · · · · · · · · · · · · ·	0		5	120.00
Other	6	Gross amount received from sale of	of assets (See Instructions)	STATI	EMENT $3 \bullet$	6	0.00
Sources	7	Other income		SEE STATI	EMENT 4 •	7	783,294.00
	8	Total gross sales or receipts from				8	829,448. ₀₀
	9	Contributions, gifts, grants, and sir					2,742,197. ₀₀
	10	Disbursements to or for members			•	10	00
	11	Compensation of officers, directors				11	264,609. ₀₀
	12	Other salaries and wages					2,645,037.00
Expenses	13	Interest				13	315.00
and	14	Taxes				14	231,640. ₀₀
Disburse-	15	Rents			•	15	198,684. ₀₀
ments	16	Depreciation and depletion (See ins	structions)		•	16	25,313. ₀₀
	17	Other Expenses and Disbursement					2,830,932. ₀₀
	18	Total expenses and disbursements	s. Add line 9 through line 17.	Enter here and on Side 1, Part			8,938,727. ₀₀
<u>Schedu</u>	le L	Balance Sheets	Beginning of ta	ixable year		of taxabl	e year
Assets			(a)	(b)	(C)		(d)
1 Cash				8,702,601.		•	4,522,288.
2 Net acc	counts	receivable		7,951.		•	328,904.
		ceivable				•	
						•	
		state government obligations				•	
6 Investr	nents	in other bonds				•	
		in stock				•	
8 Mortga						•	
9 Other i	nvestr	nents				•	
10 a Dep	reciab	le assets	172,805.		477,85	2.	
		mulated depreciation (92,194.)	80,611.(73,321	•)	404,531.
						•	
12 Other a	assets	STMT 8		504,124.		•	224,783.
				9,295,287.			5,480,506.
Liabilities							<u> </u>
14 Accour	nts pa	yable		251,972.		•	788,288.
		s, gifts, or grants payable		,		•	
		otes payable				•	
		ayable				•	
18 Other I	iabiliti	es STMT 9					450,157.
		or principle fund				•	100,107.
		al surplus. Attach reconciliation				•	
		nings or income fund		9,043,315.			4,242,061.
				9,295,287.			5,480,506.
		s and net worth	a haaka with income normal				J,400,J00.
Schedu				urn L, line 13, column (d), is less tł	1an \$50,000.		
1 Net inc	ome r	per books	• -3,781,22	0. 7 Income recorded on	books this year		
2 Federa				not included in this r			

		• 5,701,220•	I Income recorded on books this year	
2	Federal income tax	•	not included in this return.	•
3	Excess of capital losses over capital gains	•	8 Deductions in this return not charged	
4	Income not recorded on books this year	•	against book income this year	•
5	Expenses recorded on books this year not		9 Total. Add line 7 and line 8	
	deducted in this return	•	10 Net income per return.	
6	Total. Add line 1 through line 5	-3,781,220.	Subtract line 9 from line 6	-3,781,220.

022

FORM 199 CASE	1 199 CASH CONTRIBUTIONS OF \$5000 OR MORE INCLUDED ON PART I, LINE 3			
CONTRIBUTOR'S NAME	CONTRIBUTOR'S ADDRESS	DATE OF GIFT	AMOUNT	
ANNIE E CASEY FOUNDATION	701 ST. PAUL ST BALTIMORE, MD 21202	12/31/13	25,000.	
FIDELITY CHARITABLE GIFT FUND	PO BOX 55158 BOSTON, MA 02109	12/31/13	325,000.	
BILL & MELINDA GATES FOUNDATION	PO BOX 23350 SEATTLE, WA 98102	12/31/13	100,000.	
NICHOLAS CRAIG	4 QUARRY LANE HARVARD, MA 01451	12/31/13	20,000.	
GORDON IRLAM	23 CORONADO AVENUE LOS ALTOS, CA 94022	12/31/13	97,256.	
JOHNSON & JOHNSON	ONE JOHNSON & JOHNSON PLAZA NEW BRUNSWICK, NJ 08933	12/31/13	25,000.	
MICHOL O'CONNOR	1310 MILFORD STREET HOUSTON, TX 77006	12/31/13	10,000.	
THE QED GROUP, LLC	1250 I STREET NW STE 1100 WASHINGTON, DC 20005	12/31/13	25,066.	
MARSHALL & PAM SAUNDERS	1330 ORANGE AVE. #309 CORONADO, CA 92118	12/31/13	119,166.	
PETER FIEKOWSKY	952 S. SPRINGER ROAD LOS ALTOS, CA 94024	12/31/13	119,590.	
CHARLES GUST	2833 CASCADIA AVE. SOUTH SEATTLE, WA 98144	12/31/13	6,000.	
ACTIVE NETWORK	10182 TELESIS COURT, SUITE 100 SAN DIEGO, CA 92121	12/31/13	29,135.	
ROGER HUDSON	3339 STARLITE CIRCLE ANCHORAGE, AK 99517	12/31/13	5,368.	
WORLD SAVING BANK INSTITUTE	11 RUE MARIE-THERESE BRUSSELS, 1000, FRANCE	12/31/13	7,000.	
THE SKOLL FUNDATION	250 UNIVERSITY AVE. SUITE 200 PALO ALTO, CA 94301	12/31/13	10,000.	

RESULTS EDUCATIONAL FUN	D, INC.		95-3747267
CONRAD HILTON FOUNDATION	30440 AGOURA ROAD AGOURA HILLS, CA 91301	12/31/13	10,000.
THE SYCAMORE FOUNDATION	227 W TRADE STREET, SUITE 2100 CHARLOTTE, NC 28202	12/31/13	10,000.
FRED AND COURTNEY STEVES	2337 BLUE BONNETT BLVD HOUSTON, TX 77030	12/31/13	15,000.
ZIONS FIRST NATIONAL BANK	1 SOUTH MAIN STREET SALT LAKE CITY, UT 84133	12/31/13	100,000.
DEUTSCHE BANK AMERICAS FOUNDATION	60 WALL STREET NYC60-2312 NEW YORK, NY 10005	12/31/13	50,000.
TOTAL INCLUDED ON LINE 3			1,108,581.

FORM 199	NONCASH CONTRI INCLUDED		•		MORE	STATEMENT	2
CONTRIBUTOR'S NAME	c	ONTRI	BUTOR ' S	ADDRES	S		
ROGER HUDSON	3	339 S.	TARLITE	CIRCLE	ANCHORAGE	, AK 99517	
PROPERTY DESCRIPTIC	DN D	ATE OI	F GIFT	FMV O	F GIFT	AMOUNT OF	GIFT
STOCK DONATION		07/32	L/13		6,938.	6,	938.
TOTAL INCLUDED ON I	JINE 3					6,5	938.

FORM 199 GROSS AMOUN	T FROM SALE O	F ASSETS	3	S	TATEMENI	r 3
DESCRIPTION		TE IRED	DATI SOLI		THOD	
				PUR	CHASED	
	COST OR OTHER BASIS	DEPREC	с.	EXPENSE OF SALE	GROS SALES E	
	268.		0.	0.		0.
DESCRIPTION		TE IRED	DATI SOLI		THOD UIRED	
				PUR	CHASED	
	COST OR OTHER BASIS	DEPREC	с.	EXPENSE OF SALE	GROS SALES E	
	43,755.		0.	0.		0.
TOTAL TO FORM 199, PAGE 2, LN 6	44,023.		0.	0.		0.
FORM 199	OTHER INCOME			S	TATEMENT	r 4
DESCRIPTION					AMOUNT	2
GAIN ON CURRENCY CONVERSION PUBLICATION SALE REFUNDS HONORARIUM					-	140. -700. 0.
EDUCATIONAL EVENTS CONTRACTS MERCHANDISE & BOOK SALES					27,	140. 000. 714.

TOTAL TO FORM 199, PART II, LINE 7

783,294.

FORM 199	CASH CONTRIBUTIONS, GIFTS, GRANT AND SIMILAR AMOUNTS PAID	s s	TATEMENT 5
ACTIVITY CLASSIFIC	CATION: TB ACTION PROJECT		
DONEES NAME	DONEES ADDRESS	RELATIONSHIP	AMOUNT
RESULTS UK	2ND FLOOR, 31-33 BONDWAY, VAUXHALL, LONDON SW8 1SJ - UNITED KINGDOM	NONE	546,424.
DONEES NAME	DONEES ADDRESS	RELATIONSHIP	AMOUNT
AIDES	14 AVE SCANDICCI 93508 PANTIN CEDEX, - FRANCE	NONE	146,640.
DONEES NAME	DONEES ADDRESS	RELATIONSHIP	AMOUNT
GHA FRANCE	14 BOULEVARD DE DOUAUMONT, 75017 PARIS, - FRANCE	NONE	282,758.
DONEES NAME	DONEES ADDRESS	RELATIONSHIP	AMOUNT
RESULTS CANADA	9 LAURIER, PO BOX 1485, GATINEAU, QC J8X 3Y3 - CANADA	NONE	446,610.
DONEES NAME	DONEES ADDRESS	RELATIONSHIP	AMOUNT
KENYA AIDS NGO CONSORTIUM	CHAKA ROAD OFF ARGWINGS KODHEK RD PO BOX 69866-0040 NAIROBI, - KENYA	NONE	290,396.
DONEES NAME	DONEES ADDRESS	RELATIONSHIP	AMOUNT
RESULTS JAPAN	#503 SANKYU-BLDG. 3-6-14, KASUMINGASEKI, CHIYODA-KU, TOKYO, 100-0013 - JAPAN	NONE	443,366.

=

=

DONEES NAME	DONEES ADDRESS	RELATIONSHIP	AMOUNT
RESULTS INTERNATIONL AUSTRALIA	PO BOX 1019, NEWPORT BEACH, NSW 2016 - AUSTRALIA	NONE	167,230.
DONEES NAME	DONEES ADDRESS	RELATIONSHIP	AMOUNT
GHA INDIA	6 BASHA ST., CHOOLAIMEDU, CHENNAI 600 094 - INDIA	NONE	418,773.
	TOTAL FOR THIS ACTIVITY		2,742,197.
TOTAL INCLUDED ON FOR	M 199, PART II, LINE 9		2,742,197.

FORM 199	COMPENSATION	\mathbf{OF}	OFFICERS,	DIRECTORS	AND	TRUSTEES	STATEMENT	6	,
----------	--------------	---------------	-----------	-----------	-----	----------	-----------	---	---

NAME AND ADDRESS	TITLE AND AVERAGE HRS WORKED/WK	COMPENSATION
SCOTT LECKMAN 1101 15TH STREET NW WASHINGTON, DC 20005	CHAIRMAN 5.00	0.
GINNY VOGTS 1101 15TH STREET NW WASHINGTON, DC 20005	SECRETARY 5.00	0.
JAN TWOMBLY 1101 15TH STREET NW WASHINGTON, DC 20005	TREASURER 5.00	0.
SAM DALEY-HARRIS 1101 15TH STREET NW WASHINGTON, DC 20005	FOUNDER/DIRECTOR 40.00	136,858.
HEIDE CRAIG 1101 15TH STREET NW WASHINGTON, DC 20005	DIRECTOR 5.00	2,114.

RESULTS EDUCATIONAL FUND, INC.		95-3747267
KEN SCHATZ 1101 15TH STREET NW WASHINGTON, DC 20005	DIRECTOR 5.00	0.
MARY LANG SOLLINGER 1101 15TH STREET NW WASHINGTON, DC 20005	DIRECTOR 5.00	0.
MARION WRIGHT EDELMAN 1101 15TH STREET NW WASHINGTON, DC 20005	DIRECTOR 5.00	0.
VICKY GUZMAN DE LUNA, MD 1101 15TH STREET NW WASHINGTON, DC 20005	DIRECTOR 5.00	0.
VALERIE HARPER 1101 15TH STREET NW WASHINGTON, DC 20005	DIRECTOR 5.00	0.
HON. SHERWOOD BOEHLERT 1101 15TH STREET NW WASHINGTON, DC 20005	DIRECTOR 5.00	0.
HON. JAMES WALSH 1101 15TH STREET NW WASHINGTON, DC 20005	DIRECTOR 5.00	0.
MARIANNE WILLIAMSON 1101 15TH STREET NW WASHINGTON, DC 20005	DIRECTOR 5.00	0.
PROF. MUHAMMAD YUNUS 1101 15TH STREET NW WASHINGTON, DC 20005	DIRECTOR 5.00	0.
LYDIA PENDLEY 1101 15TH STREET NW WASHINGTON, DC 20005	DIRECTOR 5.00	0.
HON. ROBERT BENNETT 1101 15TH STREET NW WASHINGTON, DC 20005	DIRECTOR 5.00	0.
KUL GAUTAM 1101 15TH STREET NW WASHINGTON, DC 20005	DIRECTOR 5.00	0.
PATRICK HUGHES 1101 15TH STREET NW WASHINGTON, DC 20005	DIRECTOR 5.00	0.

RESULTS EDUCATIONAL FUND, INC.		95-3747267
ERNEST LEOVINSOHN 1101 15TH STREET NW WASHINGTON, DC 20005	DIRECTOR 5.00	0.
BRIAN SHAW 1101 15TH STREET NW WASHINGTON, DC 20005	DIRECTOR 5.00	0.
JOANNE CARTER 1101 15TH STREET NW WASHINGTON, DC 20005	EXECUTIVE DIRECTOR 34.00	125,637.
LARRY REED 1101 15TH STREET NW WASHINGTON, DC 20005	DIRECTOR, MCS 40.00	0.
MARK BUTLER 1101 15TH STREET NW WASHINGTON, DC 20005	DIRECTOR OF FINANCE 38.00	0.
VICTORIA TRELAND 1101 15TH STREET NW WASHINGTON, DC 20005	DIRECTOR OF PROGRAM DEV. 38.00	0.
ED GRAGERT 1101 15TH STREET NW WASHINGTON, DC 20005	DIRECTOR, GCE-US 40.00	0.
TOTAL TO FORM 199, PART II, LINE 11		264,609.

FORM 199	OTHER	EXPENSES	STATEMENT 7
DESCRIPTION			AMOUNT
BAD DEBT EXPENSE DUES AND SUBSCRIPTIONS EQUIPMENT RENTAL AND MA LICENSES AND FEES DIRECT EXPENSES OF FUNDRA PENSION PLAN CONTRIBUTION OTHER EMPLOYEE BENEFITS LEGAL FEES ACCOUNTING FEES OTHER PROFESSIONAL FEES ADVERTISING AND PROMOTION OFFICE EXPENSES INFORMATION TECHNOLOGY TRAVEL CONFERENCES AND CONVENTIC INSURANCE	ſ		59,454. 28,711. 21,808. 14,755. 35,953. 29,854. 224,948. 17,048. 51,876. 738,993. 6,958. 205,239. 31,843. 811,843. 525,521. 26,128.
TOTAL TO FORM 199, PART I	I, LINE 17		2,830,932.

FORM 199	OTHER ASSETS		STATEMENT	8
DESCRIPTION		BEG. OF YEAR	END OF YEA	AR
PLEDGES AND GRANTS REC PREPAID EXPENSES AND D DEPOSITS		55,314. 435,308. 13,502.		
TOTAL TO FORM 199, SCH	DULE L, LINE 12	504,124.	224,78	83.
FORM 199	OTHER LIABILITIES		STATEMENT	9
DESCRIPTION		BEG. OF YEAR	END OF YEA	AR
DEFERRED REVENUE		0.	450,15	57.
TOTAL TO FORM 199, SCH	EDULE L, LINE 18	0.	450,15	57.
FORM 199	FUND BALANCES		STATEMENT	10
DESCRIPTION		BEG. OF YEAR	END OF YEA	AR
UNRESTRICTED ASSETS TEMPORARILY RESTRICTED	ASSETS	260,685. 8,782,630.	254,50 3,987,50	
TOTAL TO FORM 199, SCH	EDULE L, LINE 21	9,043,315.	4,242,00	<u></u> 61.

2010	-	ion Depi	reciatio			zation					85	
Attach to Form 100 or Form 1	00W.			FORM	199			FE	IN	95-37		
Corporation name									Califor	nia corporatio	on number	
RESULTS EDUCA										106185	4	
1 Maximum deduction unde									1		\$25,000	
2 Total cost of IRC Section 1											φ20,000	
3 Threshold cost of IRC Sec									·		\$200,000	
4 Reduction in limitation. Su				0							<i><i><i><i>q</i>²000000</i></i></i>	
5 Dollar limitation for taxable												
) escription o				usiness use o		c) Elected c					
6												
7 Listed property (elected IR												
8 Total elected cost of IRC S									. 8			
9 Tentative deduction. Enter									. 9			
10 Carryover of disallowed de												
11 Business income limitation												
12 IRC Section 179 expense of							1		. 12			
13 Carryover of disallowed de												
Part II Depreciation and Ele (a)	(b)		(c)	uction onder F (d		1	(f)			(a)	(b)	
Description property	Date acqu (mm/dd/y	ired Co	st or r basis	Depreciation allowable in e	allowed or	(e) Depreciation Method	(f) Life of rate	r	Depre	g) eciation is year	(h) Additional first year depreciation	
14												
SEE STATEMENT			5,793.		1,662.							
15 Add the amounts in colum	(0)	()	al of column (h	n) may not exce	ed \$2,000.				<u> </u>	F 212		
See instructions for line 14	4, column (h)						15	2	5,313.		
Part III Summary 16 Total: If the corporation is	alacting:											
IRC Section 179 expense, Additional first year depred Depreciation (if no election	add the amo ciation under n is made), e	r R&TC Section 24 Inter the amount f	1356, add the a rom line 15, co	amounts on line olumn (g)						2	<u>5,313.</u>	
17 Total depreciation claimed									17	<u>ک</u>	5,313.	
18 Depreciation adjustment. I If line 17 is less than line 1												
amounts are used to deter						•			18		0.	
Part IV Amortization		Some before state			101111 10000,1		15 1100055001	y•)	. 10			
(a) Description of prope	rty	(b) Date acquired (mm/dd/yyyy)	Cos	(c) st or basis	Amortization	d) n allowed or earlier years	(e) R&TC section	Peri perce	(f) od or entage	() Amort for thi	ization	
19							(see instruction	s)				
19								-				
								_				
								+				
20 Total. Add the amounts in	column (g)								. 20			
21 Total amortization claimed	for federal p	ourposes from fea	leral Form 456	2, line 44					21			
22 Amortization adjustment. I Side 1, line 6. If line 21 is I									22			

022

7621134

.

CA 38	85		DEPRE	CIATION			STATEN	ient 11
	NO./ IPTION	DATE IN SERVICE	COST OR BASIS	PRIOR DEPR	METHOD	LIFE	DEPRE- CIATION	BONUS
	DELL SERVER	04/01/04	2,294.	2,294.	SL	5.00	0.	
	DELL SERVER	02/03/04	3,826.	3,826.	SL	5.00	0.	
	COMPUTER	04/30/05	1,471.	1,471.	SL	5.00	0.	
	FAX MACHINE	04/21/06	330.	330.	SL	5.00	0.	
	COMPUTER	05/25/06	590.	590.	SL	5.00	0.	
	SERVER	05/25/06	540.	540.	SL	5.00	0.	
	TELEPHONE CA	APITAL LEAS 05/31/06		21,609.	SL	7.00	1,384.	
	COMPUTER	07/18/06	803.	803.	SL	5.00	0.	
	DELL COMPUTI	10/31/06	573.	573.	SL	5.00	0.	
	DELL COMPUTI	ERS 05/29/07	2,411.	2,411.	SL	5.00	0.	
	FURNITURE	08/22/07	5,100.	3,947.	SL	7.00	0.	
	3 EXECUTIVE	DESKS 08/22/07	1,227.	949.	SL	7.00	175.	
	2 DESKS	10/19/07	646.	484.	SL	7.00	0.	
	FURNITURE	10/19/07	1,379.	1,034.	SL	7.00	197.	
	DELL COMPUT	07/31/07	1,731.	1,731.	SL	5.00	0.	
	LAPTOP (MCS	01/31/07	1,659.	1,659.	SL	5.00	0.	
	LAPTOP (MCS	04/02/07	1,234.	1,234.	SL	5.00	0.	
	LAPTOP (MCS	05/02/07	1,056.	1,056.	SL	5.00	0.	
	LAPTOP (MCS	06/02/07	1,182.	1,182.	SL	5.00	0.	
	LAPTOP (MCS) 01/09/07	915.	915.	SL	5.00	0.	
	2 DESKS	07/25/07	646.	507.	SL	7.00	0.	
	LAPTOP (MCS	05/01/07	755.	755.	SL	5.00	0.	
12	DELL COMPUTI	ER 02/28/08	2,811.	2,764.	SL	5.00	47.	

73	DELL COMPUTE	ERS 02/28/08	1	736.	1,706.	ст	5.00	30.
74	DELL COMPUTE	ER	-		-			
75	4 STORAGE CI	03/04/08 REDENZA (1		682.	658.	SL	5.00	0.
76	6-4 DRAWER I	06/03/08	-	631.	1,002.	\mathtt{SL}	7.00	0.
		06/03/08		893.	3,204.	\mathtt{SL}	7.00	699.
77	2 SHELF BOOM	CASES 06/03/08	1,	492.	976.	SL	7.00	213.
78	2 – 2 DRAWE	R LATERAL 06/03/08		767.	503.	ST.	7.00	0.
79	PEDESTAL DES	SK						
80	COMPUTER	06/03/08		588.	385.	SL	7.00	0.
81	DELL COMPUTI	11/30/09 ER	1,	701.	1,077.	\mathtt{SL}	5.00	340.
		02/28/10	1,	407.	820.	\mathtt{SL}	5.00	281.
82	DELL COMPUTI	£R 02/28/10	1,	407.	820.	SL	5.00	281.
83	DELL COMPUTI	ER 02/28/10	1.	407.	820.	\mathbf{SL}	5.00	281.
84	POWER SUPPLY	Y FOR SERV	7ER	797.	464.		5.00	0.
85	DELL COMPUTI							
86	DELL COMPUTI	03/31/10 ER		988.	560.	\mathtt{SL}	5.00	0.
87	COMPUTER	03/31/10		988.	560.	\mathtt{SL}	5.00	0.
		05/31/10		580.	309.	\mathtt{SL}	5.00	0.
88	XEROX	06/28/10	1,	890.	976.	SL	5.00	0.
89	COMPUTER	07/04/10	1	918.	959.	ST.	5.00	384.
90	COMPUTER		-					
91	COMPUTER	07/31/10		839.	420.		5.00	0.
92	COMPUTER	08/31/10		789.	381.	\mathtt{SL}	5.00	0.
	T610 SERVERV	08/31/10		640.	309.	\mathtt{SL}	5.00	0.
		10/19/10		086.	5,439.	SL	5.00	2,417.
94	DELL COMPUTI	ER 11/04/10		794.	344.	SL	5.00	0.
95	DELL COMPUTE			794.		CT.	5.00	0.
96	2 DDESKTOPS							
97	HP LAPTOPS	11/04/10	2,	338.	1,014.	SĹ	5.00	468.
98	DELL LAPTOP	01/30/11	1,	458.	584.	SL	5.00	0.
		01/31/11		961.	384.	SL	5.00	0.
33	SB LAPTOP	01/31/11		741.	296.	SL	5.00	0.

							
101	LAEGREID LAE						-
102	BRYDEN COMPU	02/28/11 JTER	509.	195.	SL	5.00	0.
	BOUCHANE LAP	03/31/11	808.	297.	\mathtt{SL}	5.00	0.
		03/31/11	823.	302.	SL	5.00	0.
104	REIDINGER CC	OMPUTER 03/31/11	760.	279.	SL	5.00	0.
105	CHAMPLAIN CC	MPUTER 01/30/11	988.	346.	ST.	5.00	0.
106	REEDS CHAIR						
107	ОСНОА СОМРИЛ	05/31/11 TER	558.	133.	SL	7.00	0.
109	DELL LAPTOP	07/03/11	1,043.	313.	SL	5.00	209.
			1,112.	315.	SL	5.00	222.
109	CONFERENCE F	ROOM COMPU 08/31/11		294.	SL	5.00	208.
110	MACKBOOK FOF		BOUCHANE		at	F 00	226
111	MACKBOOK FOF		1,682. ISEN	4/6.	SL	5.00	336.
110	NEW OPETCE E		1,682. RELOCATION (100		SL	5.00	336.
		09/07/11	25,536.		SL	7.00	0.
113	ADDITIONAL F		PURCHASES 1,378.	246.	SL	7.00	197.
114	MCS LAPTOPS						•
115	COMPUTERS FO		852. IAN & SARAH BEAR		SL	5.00	0.
		01/01/11	1,835.		SL	5.00	0.
116	LAPTOP COMPU	JTER FOR M 12/31/11	IANDY SLUTSKER 968.	210.	SL	5.00	0.
117	LAPTOP COMPU	JTER FOR L	ARRY REED				
118	LAPTOP COMPU	01/30/12 JTER FOR J		1/0.	SL	5.00	0.
119	DESKTOP FOR	02/29/12 SMALL CON	882. IFERENCE ROOM	162.	SL	5.00	0.
		03/31/12	745.	124.	SL	5.00	0.
120	LAPTOP FOR C	03/31/12	11CHOVICH 986.	164.	SL	5.00	0.
121	PHONE FOR SM	IALL CONFE 03/31/12	RENCE ROOM 532.	89.	GT.	5.00	0.
122	COMPUTER FOR	R NAKIA BE	LL				
123	3 COMPUTERS	05/07/12 FOR ACTIC	655. N INTERNS	87.	SL	5.00	0.
		05/07/12	1,965.	262.	SL	5.00	65.
124	LAPTOP COMPU	05/07/12	649.	87.	SL	5.00	0.
125	LAPTOP COMPU	JTER FOR A 05/07/12	CTION 649.	87.	SL	5.00	0.
126	COMPUTERS FC	OR MARK BU	TLER AND JACKIE	REIDIN	IGER		
127	LAPTOPS FOR	05/31/12 KOLLEEN B	2,320. SOUCHANE & DANIE	309. LLE DOU		5.00	464.
		05/31/12	2,510.	335.		5.00	502.

128	LAPTOPS FOR JD BERGERON A	ND BRIDGET	DOUGHERTY			
	05/31/12	1,400.	187. SL	5.00	0.	
129	HIV AND TB COSTUMES				4	
1 2 0	06/11/12 HIV AND TB COSTUMES	4,000.	467. SL	5.00	1,000.	
130	07/18/12	4 000	400. SL	5.00	1,000.	
131	COMPUTER FOR ALLISON GROS	SMAN	400. DI	5.00	1,000.	
101	08/09/12	714.	60. SL	5.00	0.	
132	COMPUTER FOR ALYSON GOLDS	MITH			-	
	08/31/12	1,097.	91. SL	5.00	454.	
133	LAPTOP FOR ALDWYN HAMILTO	N				
	08/31/12	1,234.	103. SL	5.00	247.	
134	COMPUTER FOR MEGAN MURPHY 08/31/12	F00	40 GT	F 00	0	
125	COMPUTER FOR ANGELA PERIE		49. SL	5.00	0.	
100	10/31/12	1 206	63 GT.	5.00	259.	
136	LEASEHOLD IMPROVEMENT (PR				239.	
	05/24/13	23.217.	SL	10.00	1,354.	
137	LEASEHOLD IMPROVEMENT (CC	NSTRUCTION	PERMIT)	20000	_,	
-	LEASEHOLD IMPROVEMENT (CC 05/30/13	2,030.	SL	10.00	118.	
138	LEASEHOLD IMPROVEMENT (CA 06/24/13	BLING/WIRI	NG)			
	06/24/13	12,977.	\mathtt{SL}	10.00	649.	
139	LEASEHOLD IMPROVEMENT (FU					
4.4.0	06/27/13			10.00	245.	
140	LEASEHOLD IMPROVEMENT (PC					
1/1	07/26/13	$3, 9 \perp 2$		10.00	163.	
141	LEASEHOLD IMPROVEMENT (CA 07/30/13	1 205	NG 27 ST.	10.00	50.	
142	LEASEHOLD IMPROVEMENT (AD	DITIONAL C.	ABLE RUN)	10.00	50.	
	08/12/13			10.00	26.	
143	LEASEHOLD IMPROVEMENT (CA					
	08/19/13			10.00	290.	
144	LEASEHOLD IMPROVEMENT (PC					
4 4 5	08/26/13	2,280.	SL	10.00	76.	
145	LEASEHOLD IMPROVEMENT (OF				FO	
116	09/06/13 LEASEHOLD IMPROVEMENT (PM				59.	
140	09/30/13 2			10.00	6,616.	
147	COMPUTER (ALLISON GROSSMA				0,010.	
	06/28/13	1,140.	SL	5.00	114.	
148	FURNITURE/ZOOM - CUBICLES		311)			
	07/09/13	26,964.	\mathtt{SL}	10.00	1,348.	
149	FURNITURE/ZOOM - CUBICLES					
4 - 6	08/26/13	32,980.	\mathtt{SL}	10.00	1,099.	
150	LAPTOP - TOSHIBA (JOANNE			F 00	110	
151	09/30/13 LAPTOP - DELL (COLIN SMIT	2,204.	SL	5.00	110.	
101	10/31/13	1,170.	SL	5.00	39.	
152	LAPTOP - DELL (MEREDITH D	-	Ц	5.00	55.	
	10/31/13	1,170.	\mathtt{SL}	5.00	39.	
153	LAPTOP - DELL (JEN STEPHE	-				
	12/02/13	1,100.	\mathtt{SL}	5.00	18.	
154	4 STORAGE CREDENZA (20F2)					
	06/03/08	1,427.	1,001. SL	7.00	204.	
		<u> </u>	01 660	-	 25 212	
TOTAL	DEPR TO FORM 3885 5	65,793.	91,662.	_	25,313.	
				=		

=

Date Ac	ccepted				DO NO	T MAIL T	HIS FO	ORM TO THE FTB
	113	fornia e-file R mpt Organiza		orization f	or			FORM 8453-EO
Exempt O	rganization name						Identifying	number
RESU	ILTS EDUCATI	ONAL FUND, IN	1C.				95-3	747267
Part I	Electronic Return I	nformation (whole dollars	s only)					
1 To	tal gross receipts (Forn	n 199, line 4)					1_	5,201,530 ₀₀
	tal gross income (Form							5,157,507 ₀₀
3 To	tal expenses and disbu	ursements (Form 199, line	9)					
Part II	Settle Your Accour	t Electronically for Taxa	ble Year 2013					
4	Electronic funds with	ndrawal 4a Amount		4b Wi	thdrawal dat	e (mm/dd/y	ууу)	
Part III	Banking Informatio	n (Have you verified the e	exempt organization's	banking informat	tion?)			
5 Rou	uting number					_		
6 Acc	count number			7 Type of a	ccount:	Checking		Savings
	Declaration of Office ze the exempt organization	:er n's account be settled as des	ignated in Part II. If I che	ck Part II, Box 4, I a	uthorize an ele	ectronic funds	withdrav	val for the amount listed
statemer	nts be transmitted to the F	he fee liability and all applical TB by the ERO, transmitter, c sclose to my ERO, intermed	r intermediate service pr	ovider. If the proce	essing of the e delay.	xempt organi	zation's r	
Part V	Declaration of Elec	tronic Return Originator	r (ERO) and Paid Pre	oarer.				
I declare am only accurate provided 1345, 20 the exem I declare	that I have reviewed the a an Intermediate Service P ly reflects the data on the I the organization officer w 013 e-file Handbook for Au opt organization return is f that I have examined the	bove exempt organization's rovider, I understand that I a return.) I have obtained the c rith a copy of all forms and in thorized e-file Providers. I w iled, whichever is later, and I above exempt organization's e this declaration based on al	return and that the entrie m not responsible for rev organization officer's sigr formation that I will file v ill keep form FTB 8453-E will make a copy availab return and accompanyir	s on form FTB 8453 viewing the exempt nature on form FTB vith the FTB, and I h O on file for four ye le to the FTB upon n ng schedules and st	organization's 8453-EO befor nave followed a ars from the d request. If I am	return. I declare transmitting all other requinue date of the n also the paid	are, howe g this retu rements d return or preparer	ver, that form FTB 8453-EC Irn to the FTB; I have lescribed in FTB Pub. four years from the date , under penalties of perjury
ERO	ERO's- signature			Date	Check if also paid preparer	Check if self- employ	ed 📃	ERO'S PTIN
Must	Firm's name (or yours if self-employed)	RIBIS JONES	AND MARESC	A PA			FEIN 5	2-1853933
Sign	and address	10500 LITTLE COLUMBIA, MI		PARKWAY,	ST 770		ZIP Code	21044
		e that I have examined the at nd complete. I make this dec	oove organization's retur					
Paid	Paid preparer's			Date	C if	Check	_	preparer's PTIN P01361002
Prepa Must	Firm's name (or yours	RIBIS, JO	NES & MARE	SCA, P.A.		mployed		52-1853933
Sign	if self-employed) and address		LE PATUXEN			E 770	FEIN	JZ IUJJJJJ

For Privacy Notice, get FTB 1131 ENG/SP.

08481112 793927 17290

329021 11-21-13

Sign

 $\mathsf{ZIP}\;\mathsf{Code}21044$

FTB 8453-EO 2013

022 D

COLUMBIA, MD

MAIL TO: Registry of Charitable Trusts P.O. Box 903447 Sacramento, CA 94203-4470 Telephone: (916) 445-2021

WEB SITE ADDRESS:

http://ag.ca.gov/charities/

ANNUAL REGISTRATION RENEWAL FEE REPORT TO ATTORNEY GENERAL OF CALIFORNIA

Sections 12586 and 12587, California Government Code 11 Cal. Code Regs. sections 301-307, 311 and 312

Failure to submit this report annually no later than four months and fifteen days after the end of the organization's accounting period may result in the loss of tax exemption and the assessment of a minimum tax of \$800, plus interest, and/or fines or filing penalties as defined in Government Code section 12586.1. IRS extensions will be honored.

State Charity Registration Number: CT 047456	-	Check if:									
		-									
RESULTS EDUCATIONAL FUND, INC. Name of Organization	Am	ended report									
1101 15TH STREET NW Address (Number and Street)	Corporate	or Organization No.	1061854								
WASHINGTON, DC 20005 City or Town, State and ZIP Code 20005	Federal Er	nployer I.D. No.	95-3747267								
ANNUAL REGISTRATION RENEWAL FEE SCHEDULE (11 Cal. Code Regs. sections 301-307, 311 and 312) Make Check Payable to Attorney General's Registry of Charitable Trusts											
Gross Annual Revenue Fee Gross Annual Revenue	Fee	Gross Annual F	Revenue	Fee	e						
Less than \$25,000 0 Between \$100,001 and \$250,0 Between \$25,000 and \$100,000 \$25 Between \$250,001 and \$1 mill			0,001 and \$10 million 00,001 and \$50 million 50 million	\$1: \$2: \$30	25						
PART A - ACTIVITIES											
For your most recent full accounting period (beginning 01/01/2013 ending 12/31/2013) list: Gross annual revenue \$5,121,554. Total assets \$5,480,506.											
PART B - STATEMENTS REGARDING ORGANIZATION DURING THE PERIO	d of this re	PORT									
Note: If you answer "yes" to any of the questions below, you must attach a separate sheet providing an explanation and details for each "yes" response. Please review RRF-1 instructions for information required.											
1. During this reporting period, were there any contracts, loans, leases or other financial transactions between the organization											
and any officer, director or trustee thereof either directly or with an entity in which any such officer, director or trustee had any financial interest?											
2. During this reporting period, was there any theft, embezzlement, diversion or funds?	or misuse of th	ne organization's cl	haritable property		x						
3. During this reporting period, did non-program expenditures exceed 50% of	gross revenue	es?			x						
 During this reporting period, were any organization funds used to pay any p with the Internal Revenue Service, attach a copy. 	enalty, fine or	judgment? If you	filed a Form 4720		x						
5. During this reporting period, were the services of a commercial fundraiser on If "yes," provide an attachment listing the name, address, and telephone numbers.	•		ole purposes used?		x						
6. During this reporting period, did the organization receive any governmental name of the agency, mailing address, contact person, and telephone numb	•	, provide an attach	nment listing the		x						
 During this reporting period, did the organization hold a raffle for charitable the number of raffles and the date(s) they occurred. 	purposes? If '	'yes," provide an a	ttachment indicating		x						
8. Does the organization conduct a vehicle donation program? If "yes," provid operated by the charity or whether the organization contracts with a comm		•			x						
9. Did your organization have prepared an audited financial statement in acco principles for this reporting period?	rdance with g	enerally accepted	accounting	х							
Organization's area code and telephone number <u>202-783-4800</u>											
Organization's e-mail address											
I declare under penalty of perjury that I have examined this report, including accompanying documents, and to the best of my knowledge and belief, it is true, correct and complete.											
MARK BUTLER DIRECTOR OF FINANCE											
Signature of authorized officer Printed Name	Ti	tle	Date								
329291											

Department of the Treasury Internal Revenue Service

** PUBLIC DISCLOSURE COPY **

Return of Organization Exempt From Income Tax

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

▶ Do not enter Social Security numbers on this form as it may be made public.

Information about Form 990 and its instructions is at www irs gov/form990



Α	For th	e 2013 calendar year, or tax year beginning and	ending		
В	Check if applicab	e: C Name of organization		D Employer identifica	ation number
	Addre	RESULTS EDUCATIONAL FUND, INC.			
	Name			95-37	47267
	Initial returr	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	E Telephone number	
	Termi	TIOT TOTIL DIKEET NW		202-7	83-4800
	Amer	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	5,201,530.
	Appli tion pend	WASHINGION, DC 20005		H(a) Is this a group ret	
	pena	F Name and address of principal officer: UOANNE CARTER			Yes X No
		SAME AS C ABOVE		H(b) Are all subordinates incl	
		empt status: $X 501(c)(3) = 501(c) () < (insert no.) = 4947(a)(1) c$	or 🛄 527		st. (see instructions)
_		te: WWW.RESULTS.ORG		H(c) Group exemption	
	-	f organization: 🚺 Corporation 🔄 Trust 🔄 Association 🔛 Other 🕨	L Year	of formation: 1981 M	State of legal domicile: CA
Ρ	art I	Summary			דאס
Se	1	Briefly describe the organization's mission or most significant activities: GENER HUNGER AND THE WORST ASPECTS OF POVERTY.	AIING	ING WIDD IO	
Activities & Governance		Check this box	ad of more	than 25% of its not ass	oto
ver	2	5		1 1	eis. 20
ဗီ	4	Number of independent voting members of the governing body (Part VI, line 1a)			19
کە د	5	Total number of individuals employed in calendar year 2013 (Part V, line 2a)		·····	59
itie	6	Total number of volunteers (estimate if necessary)			0
cti	-	Total unrelated business revenue from Part VIII, column (C), line 12			0.
∢		Net unrelated business taxable income from Form 990-T, line 34			0.
		······································		Prior Year	Current Year
¢	8	Contributions and grants (Part VIII, line 1h)		7,345,515.	4,372,082.
Revenue	9	Program service revenue (Part VIII, line 2g)		144,287.	783,854.
eve	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		11,718.	-33,942.
Ξ.	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		7,019.	-440.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) .		7,508,539.	5,121,554.
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		2,516,598.	3,764,710.
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.
es	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) $_{\rm .}$		3,047,295.	3,393,974.
ens	16a	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) Professional fundraising fees (Part IX, column (A), line 11e) Total fundraising expenses (Part IX, column (D), line 25) 301,70		0.	0.
Expenses	b				
ш	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		2,497,652.	2,764,489.
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		8,061,545.	9,923,173.
	19	Revenue less expenses. Subtract line 18 from line 12		-553,006.	-4,801,619.
Assets or Balances			Be	ginning of Current Year	End of Year
Bala	20	Total assets (Part X, line 16)	······	9,295,287.	5,480,506.
Plet A	21	Total liabilities (Part X, line 26)		251,972.	1,238,445.
		Net assets or fund balances. Subtract line 21 from line 20		9,043,315.	4,242,061.
Ρ	artil				

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

Sign		Signature	of officer						Date	
Here			BUTLER,	DIRECTOR	OF	FINANCE				
		Type or pr	int name and title					_		
-	Prin	it/Type prepa	arer's name		Prepa	arer's signature		Date	Check PTIN	
Paid	DA.	VID A.	JONES						self-employed P01361002	
Preparer			RIBIS,	JONES &		ESCA, P.A.			Firm's EIN 52-1853933	
Use Only	Firn	n's address	10500 1	LITTLE PAT	UXE	NT PARKWAY,	SUITE	770		
			COLUMB	[A, MD 210)44				Phone no. 410 - 884 - 0220	
May the IF	May the IRS discuss this return with the preparer shown above? (see instructions)									
332001 10-2	32001 10-29-13 LHA For Paperwork Reduction Act Notice, see the separate instructions. Form 990 (2013)									

	n 990 (2013) RESULTS EDUCATIONAL FUND, INC. 95-3747267 rt III Statement of Program Service Accomplishments	Pa
1 4	Check if Schedule O contains a response or note to any line in this Part III	
1	Briefly describe the organization's mission:	
•	GENERATING THE WILL TO END HUNGER AND THE WORST ASPECTS OF POVERTY.	
2	Did the organization undertake any significant program services during the year which were not listed on	
	the prior Form 990 or 990-EZ?	X
	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?	X
	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, an	nd
	revenue, if any, for each program service reported.	
4a	(Code:) (Expenses \$ 6,471,715. including grants of \$ 3,727,533.) (Revenue \$	
	ACTION - THE ADVOCACY TO CONTROL TUBERCULOSIS INTERNATIONALLY	
	("ACTION") PROGRAM IS PART OF AN INTERNATIONAL PARTNERSHIP OF CIVIL	
	SOCIETY ORGANIZATIONS THAT BEGAN WORKING TOGETHER TO MOBILIZE NEW	
	RESOURCES AGAINST TUBERCULOSIS ("TB"). ACTION PARTNERS HAVE HELPED	
	INFLUENCE LEADERS TO CONTRIBUTE MORE THAN \$1.4 BILLION FOR THE GLOBA	L
	TB FIGHT THROUGH BILATERAL AND MULTILATERAL FUNDING. A SIGNIFICANT	
	AMOUNT OF FUNDING THROUGH THE GLOBAL FUND WENT TOWARDS FIGHTING AIDS	-
	TB, AND MALARIA. BUILDING ON ITS SUCCESSES IN FIGHTING TB AROUND THE	
	WORLD, ACTION HAS EXPANDED ITS ADVOCACY EFFORTS TO INCLUDE CHILD	
	SURVIVAL, PARTICULARLY IN THE AREAS OF VACCINES AND UNDER-NUTRITION.	
1b	(Code:) (Expenses \$ 1,196,403. including grants of \$) (Revenue \$)	
	MICROCREDIT EDUCATION AND OUTREACH - THIS PROGRAM IS ALIGNED WITH THE	
	MICROCREDIT SUMMIT CAMPAIGN ("MCS"), WHICH BRINGS TOGETHER MICROFINA	
	PRACTITIONERS, ADVOCATES, EDUCATIONAL INSTITUTIONS, AND VARIOUS OTHER	R
	STAKEHOLDERS TO PROMOTE BEST PRACTICES IN MICROFINANCE, AND TO	
	STIMULATE THE INTERCHANGING OF KNOWLEDGE AND IDEAS. MCS IS WORKING TO	
	ENSURE THAT 175 MILLION OF THE WORLD'S POOREST FAMILIES, ESPECIALLY	
	WOMEN OF THOSE FAMILIES, ARE RECEIVING CREDIT FOR SELF-EMPLOYMENT AND	D
	OTHER FINANCIAL AND BUSINESS SERVICES BY 2015, AND THAT 100 MILLION	
	FAMILIES RISE ABOVE THE US \$1.25 A DAY THRESHOLD ADJUSTED FOR	
	PURCHASING POWER PARITY BETWEEN 1990 AND 2015.	
		_
4c	(Code:) (Expenses \$1, 251, 526 . including grants of \$37, 177 .) (Revenue \$783, 8	
	POVERTY OUTREACH AND ADVOCACY - RESULTS EDUCATIONAL FUND, INC. ("REF	
	FOCUSES ON POVERTY OUTREACH AND ADVOCACY. REF IDENTIFIES AND PROMOTE	S
	THE MOST EFFECTIVE SOLUTIONS TO POVERTY BY:	
	PERFORMING CUTTING-EDGE RESEARCH ON POVERTY ISSUES AND PROGRAMS AND	
	OVERSIGHT OF U.S. SPENDING RELATED TO POVERTY DOMESTICALLY AND	
	INTERNATIONALLY; BUILDING SUPPORT FOR PROVEN POVERTY-FIGHTING	
	STRATEGIES BY ENGAGING AND EDUCATING THE PUBLIC, POLICY MAKERS, AND	
	OPINION LEADERS, LEADING EDUCATIONAL TRIPS, WORKING IN COALITIONS, A	
	ENCOURAGING THE MEDIA TO REPORT ON SOLUTIONS TO POVERTY; AND SUPPORT	Ι
	POWERFUL CITIZENSHIP BY TRAINING VOLUNTEERS IN PUBLIC SPEAKING,	
	GENERATING MEDIA, HOSTING COMMUNITY FORUMS, AND EDUCATING THEIR	
	COMMUNITIES AND ELECTED OFFICIALS ABOUT ISSUES RELATED TO ITS	
4d	Other program services (Describe in Schedule O.)	
	(Expenses \$ including grants of \$) (Revenue \$)	
4e	Total program service expenses 8,919,644.	
	Form 99(0
200	SEE SCHEDULE O FOR CONTINUATION(S)	
81	.112 793927 17290 2013.05000 RESULTS EDUCATIONAL FUND, I 17290)_

08481112 793927 17290

RESULTS EDUCATIONAL FUND, INC. Form 990 (2013) RESULTS EDUC Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If</i> "Yes," <i>complete Schedule C, Part I</i>	3		x
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D. Part III	8		x
9	Schedule D, Part III	-		
5	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		х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		Х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	Х	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
с	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			x
ام	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		~
a	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	444		x
•	Part X, line 16? <i>If</i> "Yes," <i>complete Schedule D, Part IX</i>	11d 11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	110		
•	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a		Х
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	Х	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
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		v	
	or more? If "Yes," complete Schedule F, Parts I and IV	14b	X	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any	45	х	
16	foreign organization? If "Yes," complete Schedule F, Parts II and IV Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	15	Δ	
16	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		x
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	10		
••	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		x
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18	х	
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		Х
20a		20a		Х
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Form **990** (2013)

Form 990 (2013) RESULTS EDUCATIONAL FUND, INC. Part IV Checklist of Required Schedules (continued) Continued) Continued Con

1	95-3747267
• •	JJ J/4/20/

Page 4

			Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
22	Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States on Part IX, column (A), line 2? <i>If</i> "Yes," <i>complete Schedule I, Parts I and III</i>	22		x
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			37
	Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If</i> "Yes," <i>answer lines 24b through 24d and complete</i>			
	Schedule K. If "No", go to line 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	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		<u> </u>
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		<u> </u>
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? If "Yes," complete Schedule L, Part I	25a		x
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		x
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or			
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so,			
	complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member	07		x
20	of any of these persons? If "Yes," complete Schedule L, Part III	27		
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 IV	28a		x
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		x
	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		x
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		x
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			<u> </u>
	Schedule N, Part II	32		х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34	X	
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	X	
D	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If</i> "Yes," <i>complete Schedule R, Part V, line 2</i>	35b	x	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	350		
00	If "Yes," complete Schedule R, Part V, line 2	36		x
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			v
20	and that is treated as a partnership for federal income tax purposes? <i>If</i> "Yes," <i>complete Schedule R, Part VI</i>	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38	x	
		30		L

Form 990 (2013)

					Yes	No			
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	46						
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0						
с	Did the organization comply with backup withholding rules for reportable payments to vendors and r	eporta	able gaming						
	(gambling) winnings to prize winners?			1c	Х				
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	2a	59						
b									
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions								
3a				3a		Х			
b	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule			3b					
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other								
	financial account in a foreign country (such as a bank account, securities account, or other financial	accou	int)?	4a	Х				
b	If "Yes," enter the name of the foreign country: > SPAIN		, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,						
	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial	Αссοι	ints.						
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a		Х			
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transa			5b		Х			
с	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			5c					
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the								
	any contributions that were not tax deductible as charitable contributions?			6a		Х			
b	If "Yes," did the organization include with every solicitation an express statement that such contribut								
	were not tax deductible?		-	6b					
7	Organizations that may receive deductible contributions under section 170(c).								
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and se	rvices	provided to the payor?	7a		Х			
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b					
с	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it w								
	to file Form 8282?			7c		Х			
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d							
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit of	contra	ct?	7e		X			
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit cont	ract?		7f		Х			
g	If the organization received a contribution of qualified intellectual property, did the organization file F	orm 8	899 as required?	7g					
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organiz	ation	file a Form 1098-C?	7h					
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. D	id the s	supporting						
	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at	any tir	ne during the year?	8					
9	Sponsoring organizations maintaining donor advised funds.								
а	Did the organization make any taxable distributions under section 4966?			9a					
b	Did the organization make a distribution to a donor, donor advisor, or related person?			9b					
10	Section 501(c)(7) organizations. Enter:								
а	Initiation fees and capital contributions included on Part VIII, line 12	10a							
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b							
11	Section 501(c)(12) organizations. Enter:	ı	1						
а	Gross income from members or shareholders	11a							
b	Gross income from other sources (Do not net amounts due or paid to other sources against								
	amounts due or received from them.)	11b							
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form		?	12a					
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b							
13	Section 501(c)(29) qualified nonprofit health insurance issuers.								
а	Is the organization licensed to issue qualified health plans in more than one state?			13a					
	Note. See the instructions for additional information the organization must report on Schedule O.								
b	Enter the amount of reserves the organization is required to maintain by the states in which the		1						
	organization is licensed to issue qualified health plans	13b							
	Enter the amount of reserves on hand	13c				X			
				14a		<u> </u>			
þ	If "Yes," has it filed a Form 720 to report these payments? If "No." provide an explanation in Schedul	еU		14b					

INC.

Form	990	(2013)

332005 10-29-13

Form 990 (2013)

Part V

95-3747267 Page 5

.....

013)		EDUCATIONAL	,	
Statements F	Regarding Otl	her IRS Filings and	I Tax Cor	npliance

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

95-3747267 Page 6

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

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

Sec	tion 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	1a	20	_		
	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 0.		1.0			
b	Enter the number of voting members included in line 1a, above, who are independent	1b	19			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship					v
	officer, director, trustee, or key employee?			2		<u> </u>
3	Did the organization delegate control over management duties customarily performed by or under th					v
	of officers, directors, or trustees, or key employees to a management company or other person?			3		X X
4	Did the organization make any significant changes to its governing documents since the prior Form 9			4		X
5	Did the organization become aware during the year of a significant diversion of the organization's as			5		X
6	Did the organization have members or stockholders?			6		
7a	Did the organization have members, stockholders, or other persons who had the power to elect or a			_		v
	more members of the governing body?			7a		<u> </u>
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, s					х
~	persons other than the governing body? Did the organization contemporaneously document the meetings held or written actions undertaken during the ye			7b		
8		-	-	0.0	Х	
a L	The governing body?			8a 8b	X	
b	Each committee with authority to act on behalf of the governing body?			dð	л	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be rea organization's mailing address? If "Yes," provide the names and addresses in Schedule O					х
<u>Sec</u>	tion B. Policies (This Section B requests information about policies not required by the Internal R		- Coda)	9		Δ
000		evenu	= Coue.)		Yes	No
10-2	Did the organization have local chapters, branches, or affiliates?			10a	X	
	If "Yes," did the organization have written policies and procedures governing the activities of such c			104		
D	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			11a	X	
	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	ay bore		114		
12a	Did the organization have a written conflict of interest policy? <i>If "No," go to line 13</i>			12a	х	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise	e to con	flicts?	12b	X	
	Did the organization regularly and consistently monitor and enforce compliance with the policy? <i>If</i> "Y			12.0		
Ŭ	in Schedule O how this was done			12c	х	
13	Did the organization have a written whistleblower policy?			13	Х	
14	Did the organization have a written document retention and destruction policy?			14	Х	
15	Did the process for determining compensation of the following persons include a review and approv					
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?					
а	The organization's CEO, Executive Director, or top management official			15a	Х	
b	Other officers or key employees of the organization			15b		Х
	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 arrange	ment v	vith a			
	taxable entity during the year?			16a		Х
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate					
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the orga	inizatio	n's			
	exempt status with respect to such arrangements?			16b		
Sec	tion C. Disclosure					
17	List the states with which a copy of this Form 990 is required to be filed AK, AZ, AR, CA, C	CO,C	T, DC, FL, GA	.,HI	,IL	,KS
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-	T (Sect	ion 501(c)(3)s only)	availab	le	
	for public inspection. Indicate how you made these available. Check all that apply. X Own website Another's website X Upon request Other (explain)	n in Sci	hedule O)			
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, co		,	d finar	ncial	
	statements available to the public during the tax year.		,			
20	State the name, physical address, and telephone number of the person who possesses the books a THE ORGANIZATION $-202-783-4800$	ind rec	ords of the organiza	tion: 🕨	-	
	1101 15TH STREET NW, WASHINGTON, DC 20005					
33200	3 10-29-13 SEE SCHEDULE O FOR FULL LIST OF STATES			Form	990	(2013)

2013.05000 RESULTS EDUCATIONAL FUND, I 17290_1

Part VII	Compensation of Officers, Directors, Trustees, Key Employees, Hignest Compensated	
	Employees, and Independent Contractors	
	Check if Schedule O contains a response or note to any line in this Part VII	
Section A.	Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees	
1a Comple	ete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax	year.
	all of the experimentarian's express officers, directors, tructors (whether individuals or experimetions), respectively a second s	~

• List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid. • List all of the organization's current key employees, if any. See instructions for definition of "key employee."

• List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received report-

able compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations. • List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of

reportable compensation from the organization and any related organizations.

• List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

(A)	(B)	(C)					(D)	(E)	(F)	
Name and Title	Average	(do	not c		ition more		one	Reportable	Reportable	Estimated
	hours per	box	box, unless person is both an officer and a director/trustee)		compensation	compensation	amount of			
	week						,	from	from related	other
	(list any hours for	lirecto				-		the organization	organizations (W-2/1099-MISC)	compensation from the
	related	e or c	stee			nsated		(W-2/1099-MISC)	(112/1000/11100)	organization
	organizations	truste	al tru:		yee	mpei		(and related
	below	Individual trustee or director	Institutional trustee	er	Key employee	est cc loyee	ıer			organizations
	line)	Indiv	Insti	Officer	Key	Highest compensated employee	Former			
(1) SCOTT LECKMAN	5.00							_	_	_
CHAIRMAN	2.00	Х		Х				0.	0.	0.
(2) GINNY VOGTS	5.00							_	_	_
SECRETARY	2.00	Х		Х				0.	0.	0.
(3) JAN TWOMBLY	5.00							_	_	_
TREASURER	2.00	Х		Х				0.	0.	0.
(4) SAM DALEY-HARRIS	40.00									
FOUNDER/DIRECTOR	0.00	Х						121,110.	0.	15,748.
(5) HEIDE CRAIG	5.00									
DIRECTOR	2.00	Х						2,114.	0.	0.
(6) KEN SCHATZ	5.00							_	_	_
DIRECTOR	2.00	Х						0.	0.	0.
(7) MARY LANG SOLLINGER	5.00							_	_	_
DIRECTOR	2.00	х						0.	0.	0.
(8) MARION WRIGHT EDELMAN	5.00							_	_	_
DIRECTOR	2.00	х						0.	0.	0.
(9) VICKY GUZMAN DE LUNA, MD	5.00									
DIRECTOR	2.00	Х						0.	0.	0.
(10) VALERIE HARPER	5.00									
DIRECTOR	2.00	Х						0.	0.	0.
(11) HON. SHERWOOD BOEHLERT	5.00									•
DIRECTOR	2.00	Х						0.	0.	0.
(12) HON. JAMES WALSH	5.00									0
DIRECTOR	2.00	Х						0.	0.	0.
(13) MARIANNE WILLIAMSON	5.00								0	0
DIRECTOR	2.00	Х						0.	0.	0.
(14) PROF. MUHAMMAD YUNUS	5.00							0	0	0
DIRECTOR	2.00	Х						0.	0.	0.
(15) LYDIA PENDLEY	5.00							0	0	0
DIRECTOR	2.00	X						0.	0.	0.
(16) HON. ROBERT BENNETT	5.00							0	0	0
DIRECTOR	2.00	Ă						0.	0.	0.
(17) KUL GAUTAM	5.00	37						_	^	^
DIRECTOR	2.00	Ă						0.	0.	0.
332007 10-29-13										Form 990 (2013)

08481112 793927 17290

95-3747267 Page 8

Part VII Section A. Officers, Directors, Trus		ploy	ees,			ighe	st C	Compensated Employe	es (continued)				
(A)	(B)			(0				(D)	(E)			(F)	
Name and title	Average	Average Position (do not check more than one					one	Reportable	Reportable		E۶	stimate	ed
	hours per	box	, unles	ss pe	rson	is bot	h an	compensation	compensatio	n	an	nount	of
	week		cer an	dad	irecto	or/trus	tee)	from	from related			other	
	(list any	ector						the	organizations			ipensa	
	hours for	or dir	ę.			ated		organization	(W-2/1099-MIS	iC)		rom th	
	related organizations	Istee	truste			pens		(W-2/1099-MISC)			•	anizat	
	below	ual tru	onali		oloye	ee com						d relat	
	line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	ormer				orga	anizati	ons
(18) PATRICK HUGHES	5.00	-		0	ž	ᆂᅙ	ш.						
DIRECTOR	2.00	х						0.		Ο.			0.
(19) ERNEST LEOVINSOHN	5.00												
DIRECTOR	2.00	X						0.		0.			0.
(20) BRIAN SHAW DIRECTOR	5.00	x						0.		ο.			0.
(21) JOANNE CARTER	34.00	^			-			0.		<u> </u>			<u> </u>
EXECUTIVE DIRECTOR	6.00			х				133,800.		0.	1	4.0	08.
(22) LARRY REED	40.00											- / 0	<u></u>
DIRECTOR, MCS						x		124,230.		Ο.		9,3	04.
(23) MARK BUTLER	38.00												
DIRECTOR OF FINANCE	2.00					Х		104,715.		0.	1	2,0	04.
(24) VICTORIA TRELAND	38.00							105 504				- 0	6 F
DIRECTOR OF PROGRAM DEV. (25) ED GRAGERT	2.00					X		105,594.		0.		7,8	65.
DIRECTOR, GCE-US	40.00					x		112,666.		ο.		56	90.
								112,000.		<u> </u>		5,0	<u> </u>
1b Sub-total								704,229.		0.	6	4,6	19.
c Total from continuation sheets to Part VI	I, Section A							0.		0.			0.
d Total (add lines 1b and 1c)								704,229.		0.	6	4,6	19.
2 Total number of individuals (including but n	ot limited to th	ose	liste	ed al	bove	e) wł	no r	received more than \$100	0,000 of reportabl	е			6
compensation from the organization												Yes	No
3 Did the organization list any former officer,	director. or tru	ustee	e. ke	v er	npla	ovee	. or	highest compensated e	mplovee on	Γ			
line 1a? If "Yes," complete Schedule J for s				-	•	-	-				3		Х
4 For any individual listed on line 1a, is the su		le co	ompe	ensa	atior	n and	d ot	her compensation from		Ī			
and related organizations greater than \$150	0,000? If "Yes,	" со	mple	ete S	Sche	edule	e J i	for such individual			4		X
5 Did any person listed on line 1a receive or a													v
rendered to the organization? If "Yes," com Section B. Independent Contractors	plete Schedule	e J f	or sı	ich	pers	son .					5	L	X
1 Complete this table for your five highest co	mnensated inc	lene	nde	nt c	ont	racto	ors t	that received more than	\$100.000 of com	inens	ation	from	
the organization. Report compensation for	-									pene	20011	10111	
(A)				<u> </u>				(B)			(0)	
Name and business	address	NC	ONE	3				Description of s	ervices	C	ompe	nsatio	n
							_						
							_						
2 Total number of independent contractors (i \$100,000 of compensation from the organi		ot lii	mite	d to		se li: 0	stec	d above) who received m	nore than				
\$100,000 of compensation norm the organi						-					_	_	

Form **990** (2013)

332008 10-29-13

Form	990	(20	13)
			_

 Form 990 (2013)
 RESULTS EDUCATIONAL FUND, INC.
 95-3747267
 Page 9

 Part VIII
 Statement of Revenue

	Check if Schedule O contains a response or note to any line in this Part VIII								
				<u></u>	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514	
Contributions, Gifts, Grants and Other Similar Amounts	b c d	Federated campaigns Membership dues Fundraising events Related organizations Government grants (contribut		217,772.					
Contributior and Other S	g	All other contributions, gifts, grant similar amounts not included above Noncash contributions included in lines Total. Add lines 1a-1f	/e 1f 4 , 1a-1f: \$	154,310.	4,372,082.				
Other Revenue Other Revenue Revenue	2 a b c d	EDUCATIONAL EVENTS CONTRACTS MERCHANDISE & BOOK SAL All other program service revenue Total. Add lines 2a-2f		Business Code 900099 900099 900099		754,140. 27,000. 2,714.			
				►	783,854.				
	3 4 5	Investment income (including other similar amounts) Income from investment of tax	proceeds	10,081.			10,081.		
	6 a	Royalties Gross rents Less: rental expenses	(i) Real	(ii) Personal				1201	
	d	Rental income or (loss) Net rental income or (loss) Gross amount from sales of	(i) Securities	► (ii) Other					
	с	assets other than inventory Less: cost or other basis and sales expenses Gain or (loss) Net gain or (loss)		43,755. -43,755. ►	-44,023.			-44,023.	
		Gross income from fundraising including \$ 217,7 contributions reported on line Part IV, line 18	35,953.						
	с	Less: direct expenses b Net income or (loss) from fundraising events Gross income from gaming activities. See Part IV, line 19 a		35,953.	0.				
	с 10 а	Less: direct expenses Net income or (loss) from gam Gross sales of inventory, less and allowances							
	с 11 а	Less: cost of goods sold Net income or (loss) from sale Miscellaneous Revenu GAIN ON CURRENCO	► Business Code 900099	140.			140.		
		All other revenue		900099	-700.			-700.	
33200 10-29-	12	Total revenue. See instructions.			5,121,554.	783,854.	0.	-34,382. Form 990 (2013)	

9<u>5-3747267 Page 10</u>

Sect	ion 501(c)(3) and 501(c)(4) organizations must com	plete all columns. All oth	ner organizations must co	omplete column (A).		
	Check if Schedule O contains a respor	nse or note to any line in				
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses	
1	Grants and other assistance to 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 \dots	3,764,710.	3,764,710.			
4	Benefits paid to or for members					
5	Compensation of current officers, directors,					
	trustees, and key employees	262,495.	229,245.	22,537.	10,713.	
6	Compensation not included above, to disqualified					
	persons (as defined under section 4958(f)(1)) and					
	persons described in section 4958(c)(3)(B)					
7	Other salaries and wages	2,645,037.	2,316,747.	222,773.	105,517.	
8	Pension plan accruals and contributions (include	00 054		0 54.4		
	section 401(k) and 403(b) employer contributions)	29,854.	26,149.	2,514.	1,191.	
9	Other employee benefits	224,948.	189,661.	23,654.	11,633.	
10	Payroll taxes	231,640.	206,325.	14,955.	10,360.	
11	Fees for services (non-employees):					
	Management		<u> </u>	10 21 6		
	Legal	17,048.	6,006.	10,316.	726.	
	Accounting	51,876.	13,650.	38,226.		
	Lobbying					
е	Professional fundraising services. See Part IV, line 17					
f	Investment management fees					
g	Other. (If line 11g amount exceeds 10% of line 25,	720 002	<i>66</i> 0 505	62 042	7 166	
	column (A) amount, list line 11g expenses on Sch O.)	738,993.	668,585.	62,942. 1,553.	7,466. 360.	
12	Advertising and promotion	6,958. 205,239.	5,045. 98,372.	90,817.	16,050.	
13	Office expenses	31,843.	16,197.	14,665.	981.	
14	Information technology	51,043.	10,197•	14,005.	901.	
15	Royalties	198,684.	172,477.	16,446.	9,761.	
16		811,843.	755,102.	39,079.	17,662.	
17	Travel Payments of travel or entertainment expenses	011,045.	755,102.	33,013.	17,002.	
18	for any federal, state, or local public officials					
19	Conferences, conventions, and meetings	525,521.	365,891.	63,366.	96,264.	
20		315.	,	315.		
20 21	Interest Payments to affiliates					
22	Depreciation, depletion, and amortization	25,313.	22,784.	1,238.	1,291.	
23	Insurance	26,128.	22,720.	2,138.	1,270.	
24	Other expenses. Itemize expenses not covered	,	,	,	•	
	above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25. column (A)					
	amount, list line 24e expenses on Schedule 0.)					
а	BAD DEBT EXPENSE	59,454.		59,454.		
b	DUES AND SUBSCRIPTIONS	28,711.	28,598.		113.	
с	EQUIPMENT RENTAL AND MA	21,808.	11,380.	9,533.	895.	
d	LICENSES AND FEES	14,755.		5,300.	9,455.	
е	All other expenses					
25	Total functional expenses. Add lines 1 through 24e	9,923,173.	8,919,644.	701,821.	301,708.	
26	Joint costs. Complete this line only if the organization					
	reported in column (B) joint costs from a combined					
	educational campaign and fundraising solicitation.					
	Check here if following SOP 98-2 (ASC 958-720)					

08481112 793927 17290

2013.05000 RESULTS EDUCATIONAL FUND, I 17290_1

Form **990** (2013)

^{332010 10-29-13}

95-3747267 Page 11

Pa	rt X	Balance Sheet					
		Check if Schedule O contains a response or no	ote to any	line in this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			773,143.	1	579,140.
	2	Savings and temporary cash investments		7,929,458.	2	3,943,148.	
	3	Pledges and grants receivable, net			55,314.	3	
	4	Accounts receivable, net			7,951.	4	328,904.
	5	Loans and other receivables from current and					
		trustees, key employees, and highest compension					
		Part II of Schedule L				5	
	6	Loans and other receivables from other disqua				_	
	_	section 4958(f)(1)), persons described in sectio	-				
		employers and sponsoring organizations of se					
Ś		employees' beneficiary organizations (see instr		6			
Assets	7	Notes and loans receivable, net				7	
As	8	Inventories for sale or use				8	
	9	Prepaid expenses and deferred charges			435,308.		159,094.
		Land, buildings, and equipment: cost or other			,		
		basis. Complete Part VI of Schedule D		477,852.			
	Ь	Less: accumulated depreciation		73,321.	80,611.	10c	404,531.
	11	Investments - publicly traded securities				11	
	12	Investments - other securities. See Part IV, line				12	
	13	Investments - program-related. See Part IV, line			13		
	14	Intangible assets		14			
	15	Other assets. See Part IV, line 11	13,502.		65,689.		
	16	Total assets. Add lines 1 through 15 (must eq		9,295,287.		5,480,506.	
	17	Accounts payable and accrued expenses			251,972.	17	788,288.
	18	Grants payable			18		
	19	Deferred revenue			19	450,157.	
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complete				21	
Ś	22	Loans and other payables to current and forme					
itie		key employees, highest compensated employe					
Liabilities		Complete Part II of Schedule L		22			
Ë	23	Secured mortgages and notes payable to unre		23			
	24	Unsecured notes and loans payable to unrelat		24			
	25	Other liabilities (including federal income tax, p					
		parties, and other liabilities not included on line					
		Schedule D		25			
	26	Total liabilities. Add lines 17 through 25			251,972.	26	1,238,445.
		Organizations that follow SFAS 117 (ASC 95	k here ▶ X and				
nces		complete lines 27 through 29, and lines 33 a					
	27	Unrestricted net assets	260,685.	27	254,561.		
ala	28	Temporarily restricted net assets			8,782,630.	28	3,987,500.
Net Assets or Fund Balances	29		<u></u> [29		
		Organizations that do not follow SFAS 117 (
		and complete lines 30 through 34.					
	30	Capital stock or trust principal, or current fund			30		
	31		aid-in or capital surplus, or land, building, or equipment fund				
	32		etained earnings, endowment, accumulated income, or other funds				
	33	Total net assets or fund balances	9,043,315.	33	4,242,061.		
	34	Total liabilities and net assets/fund balances	9,295,287.	34	5,480,506.		

Form **990** (2013)

332011 10-29-13

Form 990 (2013)

1

2

3

4

5

6 7

8

9 10

Part XI Reconciliation of Net Assets

Donated services and use of facilities

Part XII Financial Statements and Reporting

separate basis, consolidated basis, or both:

Separate basis

Investment expenses

column (B))

		-	000	
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3b		
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit			
	Act and OMB Circular A-133?	3a		Х
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			
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.			
	review, or compilation of its financial statements and selection of an independent accountant?	2c	Х	
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit,			
	Separate basis Consolidated basis Both consolidated and separate basis			
	consolidated basis, or both:			

Both consolidated and separate basis

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

Form 990 (2013)

RESULTS EDUCATIONAL FUND, INC.

Total revenue (must equal Part VIII, column (A), line 12)

Total expenses (must equal Part IX, column (A), line 25)

Revenue less expenses. Subtract line 2 from line 1

Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))

Net unrealized gains (losses) on investments

Prior period adjustments

Other changes in net assets or fund balances (explain in Schedule O)

If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.

2a Were the organization's financial statements compiled or reviewed by an independent accountant?

b Were the organization's financial statements audited by an independent accountant?

If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis,

If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a

Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,

Accounting method used to prepare the Form 990: Cash X Accrual Other

Consolidated basis

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

95-3747267 Page 12

1

2

3

4

5

6

7

8

9

10

5,121,554.

9,923,173.

-4,801,619.

9,043,315.

4,242,061.

Yes

х

2a

2b

365.

0.

X

No

Х

Form 990 or 990-EZ.
332021 09-25-13

Total

08481112 7939	177 17290

LHA For Paperwork Reduction Act Notice, see the Instructions for

Schedule A (Form 990 or 990-EZ) 2013

Internal Re	venue Service	Information about the second secon	out Schedule A (Form 990	or 990-EZ)	and its inst	ructions is	at www.irs	s.aov/form	990.	Inspe	ection	
Name o	f the organizat			-						identificat	ion nu	mber
		RESULTS	EDUCATIONAL	, FUND	, INC	•			9	5-3747	267	
Part	Reason	for Public Char	ity Status (All organiz	ations mu	st complet	e this part	.) See inst	ructions.				
The org			because it is: (For lines 1									
1 Ľ	7	•	s, or association of chur			•						
2	-	A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.)										
3			tal service organization		in section	170(b)(1)	(A)(iii).					
4	- ·		operated in conjunction					(b)(1)(A)(ii	i). Enter	the hospita	l's narr	ıe,
	city, and stat								-	·		
5	- ·		benefit of a college or ur	niversity ov	wned or op	perated by	a governi	mental uni	t describ	oed in		
		(b)(1)(A)(iv). (Comple					-					
6	A federal, sta	ate, or local governm	ent or governmental uni	t described	d in sectio	n 170(b)(1	I)(A)(v).					
7 X			eives a substantial part					or from the	general	public desc	ribed i	in
		(b)(1)(A)(vi). (Comple				•			0			
8			section 170(b)(1)(A)(vi).	(Complete	Part II.)							
9			eives: (1) more than 33 1			rom contri	butions, m	nembershi	p fees, a	and gross re	ceipts	from
			nctions - subject to certa									
	income and	unrelated business t	axable income (less sect	tion 511 ta	x) from bu	sinesses a	acquired b	y the orga	nization	after June 3	30, 197	75.
	See section	509(a)(2). (Complete	e Part III.)									
10 🗌	🗌 An organizat	ion organized and or	perated exclusively to te	st for publ	ic safety. S	See sectio	n 509(a)(4	ŀ).				
11 🗌] An organizat	ion organized and or	perated exclusively for th	ne benefit (of, to perfo	orm the fur	nctions of,	or to carr	y out the	e purposes o	of one	or
	more publicly	y supported organiza	ations described in section	on 509(a)(⁻	1) or sectio	on 509(a)(2	2). See sec	tion 509(a)(3). Ch	neck the box	that	
	describes the	e type of sup <u>porti</u> ng	organization and comple	ete lines 1	1e through	n 11h.						
	а 🗌 Туре	I b 🗌 т <u>у</u>	ype II c 🗌 Ty	ype III - Fu	nctionally i	integrated	d	і 🗔 Тур	e III - No	n-functional	ly integ	grated
e	By checking	this box, I certify that	at the organization is not	controlled	l directly o	r indirectly	y by one oi	r more dis	qualified	persons ot	ner tha	ın
	foundation m	nanagers and other t	han one or more publicly	y supporte	d organiza	ations desc	cribed in s	ection 509	9(a)(1) or	section 509	∂(a)(2).	
f	If the organiz	ation received a writ	tten determination from t	the IRS tha	at it is a Ty	ре I, Туре	II, or Type	e III				
	supporting o	rganization, check th	nis box									. L
g	Since Augus	t 17, 2006, has the c	organization accepted ar	ny gift or co	ontributior	n from any	of the follo	owing per	sons?			
	(i) A perso	n who directly or ind	lirectly controls, either al	one or tog	ether with	persons c	lescribed i	in (ii) and (iii) below	/,	Yes	No
	the gov	erning body of the s	upported organization?							11g(i)		
	(ii) A family	member of a persor	n described in (i) above?							11g(ii)		
	(iii) A 35%	controlled entity of a	i person described in (i) o	or (ii) above	e?					11g(iii)		
h	Provide the f	ollowing information	about the supported or	ganization	(s).							
		i	i			i				.		
(i) Nar	ne of supported	(ii) EIN	(iii) Type of organization	(iv) Is the o	rganization	(v) Did you	u notify the	(vi) Is organizație	the on in col.	(vii) Amoun	t of mor	netary
0	rganization		(described on lines 1-9 above or IRC section	in col. (I) lis	sted in your	organizat	1011 111 001.	(i) organiz	ed in the	sup	port	
			(see instructions)		_		i	U.S				
			(//	Yes	No	Yes	No	Yes	No			
				ļ								
		1		1					1	1		

Public Charity Status and Public Support Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

Attach to Form 990 or Form 990-EZ.

3 ZU

С

OMB No. 1545-0047

(Form 990 or 990-EZ)	
----------------------	--

Department of the Treasury Internal Revenue Service

SCHEDULE A

		_	

. Inspection

Ope	n to	Publi

Schedule A (Form 990 or 990-EZ) 2013 RESULTS EDUCATIONAL FUND, INC.

95-3747267 Page 2

Part II

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Se	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	5173664.	2582737.	1566785.	7345515.	4372082.	21040783.
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge \dots						
4	Total. Add lines 1 through 3	5173664.	2582737.	1566785.	7345515.	4372082.	21040783.
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)						5732625.
6	Public support. Subtract line 5 from line 4.						15308158.
Se	ction B. Total Support			-	-	_	
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2009	(b) 2010	(c) 2011	(d) 2012 7345515.	(e) 2013	(f) Total
7	Amounts from line 4	5173664.	2582737.	1566785.	7345515.	4372082.	21040783.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources \dots	7,223.	6,361.	6,003.	13,818.	10,201.	43,606.
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 IV.)	22,078.	13,691.	73,510.	5,501.	2,154.	
11	Total support. Add lines 7 through 10						21201323.
	Gross receipts from related activities,						,329,483.
13	First five years. If the Form 990 is for	r the organization's	s first, second, thir	d, fourth, or fifth ta	ax year as a sectio	n 501(c)(3)	
Se	organization, check this box and stor ction C. Computation of Publ	ic Support Pe	rcentage				>
	Public support percentage for 2013 (column (f))		14	72.20 %
	Public support percentage from 2012					15	63.67 %
	33 1/3% support test - 2013. If the c					nore, check this b	ox and
	stop here. The organization qualifies						
b	b 33 1/3% support test - 2012. 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 qual						
17a	10% -facts-and-circumstances tes						
	and if the organization meets the "fac						
	meets the "facts-and-circumstances"			-	-	-	
b	10% -facts-and-circumstances tes	-	-	• • • •			
	more, and if the organization meets th						
	organization meets the "facts-and-circ						>
18	Private foundation. If the organization						ns ►
) or 990-EZ) 2013

Schedule A (Form 990 or 990-EZ) 2013 RESULTS EDUCATIONAL FUND, INC. Part III 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.)

<u> </u>	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services per- formed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or bus-						
	iness under section 513						
4	Tax revenues levied for the organ- ization's benefit and either paid to						
~	or expended on its behalf						+
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and						
b	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						
с	Add lines 7a and 7b						
	Public support (Subtract line 7c from line 6.)						
Sec	ction B. Total Support		-		-		
	ndar year (or fiscal year beginning in) 🕨	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b	Unrelated business taxable income						
	(less section 511 taxes) from businesses acquired after June 30, 1975						
	Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is						
12	regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First five years. If the Form 990 is for	the organization'	s first, second, thir	d, fourth, or fifth t	tax year as a section	on 501(c)(3) organ	ization,
	check this box and stop here						▶□
	ction C. Computation of Publi						
15	Public support percentage for 2013 (li	ne 8, column (f) d	ivided by line 13, o	olumn (f))		15	%
	Public support percentage from 2012					16	%
	ction D. Computation of Inves					<u> </u>	
	Investment income percentage for 20					17	%
	Investment income percentage from 2						%
19a	33 1/3% support tests - 2013. If the						
1-	more than 33 1/3%, check this box ar						
a	33 1/3% support tests - 2012. If the	•					
20	line 18 is not more than 33 1/3%, che						
	Private foundation. If the organization 23 09-25-13	T UIU HUL CHECK a	JUX UT IIIE 14, 19	a, ur 190, check t			90 or 990-EZ) 2013

Part IV 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).

220024 00 05 12	Schodulo & (Earm 000 at 000 E7) 0012
332024 09-25-13	Schedule A (Form 990 or 990-EZ) 2013

08481112 793927 17290

* *	PUBLIC	DISCLOSURE	COPY	* *
-----	--------	------------	------	-----

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 . OMB No. 1545-0047

2013

Employer identification number

Name	of the	organization
Name		Uganization

Schedule B

(Form 990, 990-EZ.

Department of the Treasury

Internal Revenue Service

or 990-PF)

-		
	RESULTS EDUCATIONAL FUND, INC.	95-3747267
Organization type (ch	neck 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, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II.

Special Rules

X For a section 501(c)(3) organization 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) and received from any one contributor, during the year, a contribution 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 a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 for use *exclusively* for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.

□ For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use *exclusively* for religious, charitable, etc., purposes, but these contributions did not total to 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., purpose, charitable, etc., contributions of \$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) (2013)

Name of organization

Employer identification number

RESULTS EDUCATIONAL FUND, INC.

95-3747267

Part I	Contributors (see instructions). Use duplicate copies of Part I if addition	duplicate copies of Part I if additional space is needed.				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
<u> 1</u>		\$325,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
2		\$ <u>100,000.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
3		\$97,256.	Person X Payroll Noncash (Complete Part II for noncash contributions.)			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
4		\$ <u>119,166.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
5		\$ 119,590.	Person X Payroll Noncash (Complete Part II for noncash contributions.)			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
6		\$ <u>100,000.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)			

Schedule B (Form 990, 990-EZ, or 990-PF) (2013)

323452 10-24-13

Schedule B (Form 990, 990-EZ, or 990-PF) (2013)	F
Name of organization	Employer identification number
RESULTS EDUCATIONAL FUND, INC.	95-3747267

Page 3

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

	NONCASH Property (see instructions). Use duplicate copies of Pa		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
-			
_			
-		\$	
(a) No.	(b)	(c)	(d)
from Part I	Description of noncash property given	FMV (or estimate) (see instructions)	Date received
-			
-		 \$	
		V	
(a) No.	(b)	(c) FMV (or estimate)	(d)
from Part I	Description of noncash property given	(see instructions)	Date received
- -		\ \$	
-			
(a) No.	(b)	(c) FMV (or estimate)	(d)
from Part I	Description of noncash property given	(see instructions)	Date received
-			
-		\\$	
-			
(a) No.	(b)	(c) FMV (or estimate)	(d)
from Part I	Description of noncash property given	(see instructions)	Date received
-			
-		\$	
(-)			
(a) No.	(b)	(c) FMV (or estimate)	(d)
from Part I	Description of noncash property given	(see instructions)	Date received
-		<u> </u>	
3453 10-24-13	<u></u>	\$Schedule B (Form	990, 990-EZ, or 990-PF) (2

08481112 793927 17290

lame of orga	nization		Employer identification number
RESULT	S EDUCATIONAL FUND, IN	2.	95-3747267
Part III	Exclusively religious, charitable, etc., indiv year. Complete columns (a) through (e) and th the total of exclusively religious, charitable, etc Use duplicate copies of Part III if additiona	idual contributions to section 501(c e following line entry. For organizatio ., contributions of \$1,000 or less for	;)(7), (8), or (10) organizations that total more than \$1,000 for the
(a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
Part I			
-		(e) Transfer of gif	
-	Transferee's name, address, ar	d ZIP + 4	Relationship of transferor to transferee
(a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
Part I		(c) use of girt	
-		(e) Transfer of gif	
-	Transferee's name, address, ar	d ZIP + 4	Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
[: 		(e) Transfer of gif	
-	Transferee's name, address, ar	d ZIP + 4	Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
: 			
		ft	
-	Transferee's name, address, ar	d ZIP + 4	Relationship of transferor to transferee
-			
23454 10-24-1	3		Schedule B (Form 990, 990-EZ, or 990-PF) (201

_					OMB No. 1545-0047
	HEDULE D		al Financial Statements		2012
(Fori	m 990)	► Complete if the org Part IV. line 6, 7, 8, 9, 10	ganization answered "Yes," to Form 990, 0, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.		2013
	tment of the Treasury al Revenue Service		Attach to Form 990. orm 990) and its instructions is at <u>www.irs.gov/</u>		Open to Public Inspection
	e of the organizati	-	and its instructions is at www.irs.gov/		oloyer identification number
	ie er tile er gamzat	RESULTS EDUCATIONA	AL FUND, INC.		95-3747267
Pa	rt I Organiza	ations Maintaining Donor Advise	ed Funds or Other Similar Funds or A	Accou	Ints. Complete if the
	organizatio	on answered "Yes" to Form 990, Part IV, lin			
			(a) Donor advised funds	(b) Fun	ds and other accounts
1		nd of year			
2		outions to (during year)			
3		from (during year)			
4		at end of year		1 -	
5	-		writing that the assets held in donor advised fu		Yes No
6			s exclusive legal control? advisors in writing that grant funds can be used		
Ŭ			or donor advisor, or for any other purpose confe		
				-	
Pa			rganization answered "Yes" to Form 990, Part IV		
1	Purpose(s) of con	servation easements held by the organizat	tion (check all th <u>at a</u> pply).		
	Preservation	n of land for public use (e.g., recreation or	education) Preservation of an historica	lly impo	ortant land area
	Protection c	of natural habitat	Preservation of a certified h	istoric	structure
		n of open space			
2		. .	lified conservation contribution in the form of a c	onserv	ation easement on the last
	day of the tax yea	ır.			lield at the Fed of the Tax Veen
-	Total number of a	anonyotion accomenta		2a	Held at the End of the Tax Year
a b				2a 2b	
c c			tructure included in (a)	20 2c	
d			I after 8/17/06, and not on a historic structure		
			, 	2d	
3			eleased, extinguished, or terminated by the orga	nizatio	n during the tax
	year 🕨				
4	Number of states	where property subject to conservation ea	asement is located		
5	-	ation have a written policy regarding the pe			
_		forcement of the conservation easements			Yes I No
6 7			, and enforcing conservation easements during	-	
7 0			I enforcing conservation easements during the y ove satisfy the requirements of section 170(h)(4)(۵ <u> </u>
8		• • • • • • •			Yes No
9			tion easements in its revenue and expense state		
		e .	ation's financial statements that describes the or		
	conservation ease			•	-
Pa	rt III Organiza	ations Maintaining Collections of	of Art, Historical Treasures, or Other	Simil	ar Assets.
	Complete i	if the organization answered "Yes" to Form	n 990, Part IV, line 8.		
1 a	-		SC 958), not to report in its revenue statement a		
			whibition, education, or research in furtherance o	f public	service, provide, in Part XIII,
		otnote to its financial statements that described upday SEAC 110 (A		halessi	
b	-		SC 958), to report in its revenue statement and l		
	relating to these it	-	education, or research in furtherance of public se	ervice,	provide the following amounts
	-			►	\$
					* \$
2	.,		easures, or other similar assets for financial gain		le
		punts required to be reported under SFAS			
а	-		·····	►	\$
h		n Form 990 Part X			\$

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. ³³²⁰⁵¹ ⁰⁹⁻²⁵⁻¹³

Schedule D (Form 990) 2013

Sche	dule D (Form 990) 2013 RESULTS	EDUCATION	AL F	UND, I	INC.			95-37	47267	7 Pa	ige 2
Par	t III Organizations Maintaining C	Collections of A	rt, Hist	torical T	reasures, c	or Oth	er Simila	ar Asse	ts (contin	ued)	
3	Using the organization's acquisition, access (check all that apply):	ion, and other record	ls, checł	< any of the	e following tha	t are a s	significant	use of its	collectior	item:	3
а	Public exhibition	d			change progra						
b	Scholarly research	е		Other							
с	Preservation for future generations										
4	Provide a description of the organization's c							ose in Par	XIII.		
5	During the year, did the organization solicit of				•				-		1
	to be sold to raise funds rather than to be m								Yes		No
Par	t IV Escrow and Custodial Arran		ete if the	organizati	on answered "	'Yes" to	Form 990	, Part IV, I	ine 9, or		
	reported an amount on Form 990, Pa										
	Is the organization an agent, trustee, custod on Form 990, Part X?								Yes		No
b	If "Yes," explain the arrangement in Part XIII	and complete the fo	llowing t	able:							
									Amount		
	Beginning balance										
	Additions during the year										
е	Distributions during the year										
f	Ending balance								1		
	Did the organization include an amount on F								Yes		No
	If "Yes," explain the arrangement in Part XIII t V Endowment Funds. Complete										<u> </u>
1 0					(c) Two year		(d) Three y	aare back	(e) Four	voarel	hack
10	Beginning of year balance	(a) Current year	(0) P	rior year		3 Dack	(u) Three y		(e) i oui	yoursi	Jack
	Contributions										
	Net investment earnings, gains, and losses										
	Grants or scholarships										
	Other expenditures for facilities										
-	and programs										
f	Administrative expenses										
	End of year balance										
2	Provide the estimated percentage of the cur		e (line 1	g, column	(a)) held as:						
а	Board designated or quasi-endowment		%								
b	Permanent endowment	%									
с	Temporarily restricted endowment	%									
	The percentages in lines 2a, 2b, and 2c show	uld equal 100%.									
3a	Are there endowment funds not in the posse	ession of the organiz	ation tha	at are held	and administe	red for t	the organiz	ation	-		
	by:									Yes	No
	(i) unrelated organizations								3a(i)		
	(ii) related organizations								3a(ii)		
b	If "Yes" to 3a(ii), are the related organization								3b		
4	Describe in Part XIII the intended uses of the		owment 1	funds.							
Par	t VI Land, Buildings, and Equipm					B 1 V					
	Complete if the organization answere							.	() > .		
	Description of property	(a) Cost or o basis (investr		• •	st or other s (other)		ccumulate preciation	d	(d) Book	value	,
	Land						0 6	16	747		1 4
	Buildings			3.	26,260.		9,6	40.	316	5,61	14.
	Leasehold improvements			11	51 500		63,6	75	0	7 0 7	17
	Equipment			1:	51,592.		03,0	15.	0	7,92	L / •
	Other		V och:	on (D) lin-	10(0))				10/	1,53	1
Iota	Add lines 1a through 1e. (Column (d) must e	equal Form 990, Part	∧, coiun	ııı (¤), line	10(0).)		<u></u> .	Paka di si			
							-	Schedule	rorm) ש	ສສດ)	2013

332052 09-25-13

|--|

Part VII Investments - Other Securities.			
Complete if the organization answered "Yes"			
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or e	nd-of-year market value
(1) Financial derivatives			
(2) Closely-held equity interests			
(3) Other			
(A)			
<u>(B)</u>			
(C)			
(D)			
(E)			
(F)			
(G)			
(H) Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)			
Part VIII Investments - Program Related.			
Complete if the organization answered "Yes"	to Form 000 Dart IV line	11a Saa Farm 000 Dart V lina 12	
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or e	nd-of-vear market value
(1)	(2) 20011 121010		
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX Other Assets.		·	
Complete if the organization answered "Yes"	to Form 990, Part IV, line	11d. See Form 990, Part X, line 15.	
(a)	Description		(b) Book value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line Part X Other Liabilities.	e 15.)		>
Complete if the organization answered "Yes"	to Form 990, Part IV, line		5.
1.(a) Description of liability		(b) Book value	
(1) Federal income taxes			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) lin			
2. Liability for uncertain tax positions. In Part XIII, provide			
organization's liability for uncertain tax positions under	- FIN 48 (ASC 740). Check	chere if the text of the foothote has bee	n provided in Part XIII 🕰

Schedule D (Form 990) 2013

95-3747267 _{Page}

2013	RESULTS	EDUCATIONAL	FUNE

Sche	dule D (Form 990) 2013 RESULTS EDUCATIONAL FUND ,	INC.	95-3747267 _{Page} 4
Pa	t XI Reconciliation of Revenue per Audited Financial Stater	ments With Rev	enue per Return.
	Complete if the organization answered "Yes" to Form 990, Part IV, line 12	2a.	
1	Total revenue, gains, and other support per audited financial statements		
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
а	Net unrealized gains on investments	2a	
b	Donated services and use of facilities	2b	
С	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	2d	
е	Add lines 2a through 2d		2e
3	Subtract line 2e from line 1		
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	
с	Add lines 4a and 4b		4c
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		
Pa	t XII Reconciliation of Expenses per Audited Financial State	•	enses per Return.
	Complete if the organization answered "Yes" to Form 990, Part IV, line 12	2a.	
1	Total expenses and losses per audited financial statements		
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
а	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
С	Other losses	2c	
d	Other (Describe in Part XIII.)	2d	
е	Add lines 2a through 2d		2e
3	Subtract line 2e from line 1		
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b		
b	Other (Describe in Part XIII.)	4b	
С	Add lines 4a and 4b		
5	Total expenses. Add lines 3 and 4c . (<i>This must equal Form 990, Part I, line 18.</i>)		

Part XIII Supplemental Information.

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

PART X, LINE 2:

THE ORGANIZATION RECOGNIZES THE EFFECT OF INCOME TAX

POSITIONS ONLY IF THOSE POSITIONS ARE MORE LIKELY THAN NOT OF BEING

SUSTAINED. THE ORGANIZATION DOES NOT BELIEVE ITS FINANCIAL STATEMENTS

INCLUDE ANY UNCERTAIN TAX POSITIONS.

332054 09-25-13

Schedule D (Form 990) 2013

SCHEDULE F	Stateme	nt of Act	ivities Outside the Ur	nited Sta	ates L	OMB No. 1545-0047
			n answered "Yes" on Form 990, Part			2013
Department of the Treasury Internal Revenue Service	Information ab		orm 990. See separate instruction (Form 990) and its instructions is at			Open to Public Inspection
Name of the organization	internation up			www.irs.gov/id		ntification number
					05 27/7	267
RESULTS EDUCATI			tside the United States. Complete	ete if the organ	95-3747	
Form 990, Part IV				ete il tile organ		
-	-		ds to substantiate the amount of its gr the selection criteria used to award the			X Yes 🗌 No
United States.		C C	procedures for monitoring the use of it		ther assistance of	outside the
3 Activities per Region. (T (a) Region	he following Part (b) Number of	I, line 3 table ca	an be duplicated if additional space is (d) Activities conducted in region		vity listed in (d)	(f) Total
	offices in the region	employees, agents, and independent contractors in region	(by type) (e.g., fundraising, program services, investments, grants to recipients located in the region)	is a pro describe	gram service, e specific type ce(s) in region	expenditures for and investments in region
				RESEARCH OF	F IMF HEALTH	
SUB-SAHARAN AFRICA	0	0	PROGRAM SERVICES	AND EDUCATI	ON POLICIIES	290,396.
				ADVOCACY AN	ND EDUCATION	
EUROPE	0	0	PROGRAM SERVICES	ON TB & HIV	/AIDS	975,822.
EAST ASIA & THE				ADVOCACY AN	ND EDUCATION	
PACIFIC	0	0	PROGRAM SERVICES	ON TB & HIV		610,596.
				ADVOCACY AN	ID EDUCATION	
SOUTH ASIA	0	0	PROGRAM SERVICES	ON TB & HIV		418,773.
NORTH AMERICA	0	0	PROGRAM SERVICES	ADVOCACY AN ON TB & HIV	ND EDUCATION	446,610.
					,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
3 a Sub-total	0	0				2,742,197.
b Total from continuation		· · · · · ·				, ,
sheets to Part I	0	0				0.
c Totals (add lines 3a and 3b)	0	0				2,742,197.
and 00/	· · ·					-,,,,

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

Schedule F (Form 990) 2013

332071 10-03-13

Page 2

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.

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
			TB ACTION					
			PROJECT-ADVOCACY AND					
			EDUCATION ON TB &					
		SOUTH ASIA	HIV/AIDS	418,773.	INT'L WIRE	Ο.		
			TB ACTION					
			PROJECT-ADVOCACY AND					
			EDUCATION ON TB &					
		EUROPE	HIV/AIDS	546,424.	INT'L WIRE	Ο.		
			TB ACTION					
			PROJECT-ADVOCACY AND					
		EAST ASIA AND THE	EDUCATION ON TB &					
		PACIFIC	HIV/AIDS	443,366.	INT'L WIRE	Ο.		
			TB ACTION					
			PROJECT-ADVOCACY AND					
			EDUCATION ON TB &					
		EUROPE	HIV/AIDS	146,640.	INT'L WIRE	Ο.		
			TB ACTION					
			PROJECT-ADVOCACY AND					
			EDUCATION ON TB &					
		NORTH AMERICA	HIV/AIDS	446,610.	INT'L WIRE	Ο.		
			TB ACTION					
			PROJECT-ADVOCACY AND					
		SUB-SAHARAN	EDUCATION ON TB &					
		AFRICA	HIV/AIDS	290,396.	INT'L WIRE	Ο.		
			TB ACTION					
			PROJECT-ADVOCACY AND					
			EDUCATION ON TB &					
		EUROPE	HIV/AIDS	282,758.	INT'L WIRE	Ο.		
			TB ACTION					
			PROJECT-ADVOCACY AND					
		EAST ASIA AND THE	EDUCATION ON TB &					
		PACIFIC	HIV/AIDS	167,230.	INT'L WIRE	Ο.		
2 Enter total number of	recipient organizatio	ns listed above that are	recognized as charities by the			xempt by		- 1
	· •		n 501(c)(3) equivalency letter	J		• •		8
3 Enter total number of	-		()()]			••••••••••••••••••••••••••••••••••••••		0

Schedule F (Form 990) 2013 RI	ESULTS EDUCA	TIONAL F	UND, INC	. 95	-3747267
	e to Individuals Outsid	e the United St	ates. Complete i	if the organization answered "Yes" o	on Form 990, Pa
Part III can be duplicated if ad			-		
(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance

RESULTS EDUCATIONAL FUND, INC.

art IV, line 16.

Schedule F (Form 990) 2013

(g) Description of non-cash assistance Page 3

(h) Method of valuation (book, FMV, appraisal, other)

1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? <i>If</i> "Yes," <i>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)</i>	Yes	X 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)	Yes	X 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	X 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? <i>If</i> "Yes," <i>the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund.</i> (see Instructions for Form 8621)	Yes	X 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	X 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)	Yes	X No

Schedule F (Form 990) 2013

Schedule F (Form 990) 2013 RESULTS EDUCATIONAL FUND, INC.	95-3747267 Page 5
Part V Supplemental Information	95-3747267 Page 5
Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (account	
investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting meth (estimated number of recipients), as applicable. Also complete this part to provide any additional info	
PART I, LINE 2:	
GRANT RECIPIENTS ARE REQUIRED TO SUBMIT DOCUMENTATION	
SUBSTANTIATING ALL FUNDS REQUESTED AND RECEIVED.	

Schedule F (Form 990) 2013

332075 10-03-13

SCHEDULE G	Supplana	ntol Information Departing	Euro	droia	ing or Coming	۸		OMB No. 1545-0047
(Form 990 or 990-EZ)	Complete if the	ntal Information Regarding organization answered "Yes" to F	orm 9	990, P	art IV, lines 17, 18, o			2013
Department of the Treasury Internal Revenue Service	C	organization entered more than \$1 Attach to Form 990						Open To Public Inspection
Name of the organization		bout Schedule G (Form 990 or 990-EZ)	and its	<u>instru</u>	ictions is at <u>www irs g</u>	ov/fc		Inspection lentification number
	RESULTS	EDUCATIONAL FUND,	IN	Ċ.			95-374	7267
Part I Fundrais required to	complete this par	 Complete if the organization answe t. 	red "Y	'es" to	9 Form 990, Part IV, li	ne 1	7. Form 990-E	Z filers are not
a 📃 Mail solicitat	ions email solicitations tations		ion of ion of	non-g gover	overnment grants nment grants			
key employees list	ed in Form 990, P n highest paid ind	or oral agreement with any individual art VII) or entity in connection with p ividuals or entities (fundraisers) purs e organization.	rofess	ional f	undraising services?		🗌 Ye	
(i) Name and addres or entity (func	s of individual	(ii) Activity	(iii) fundr have c or con contrib	raiser ustody ntrol of	(iv) Gross receipts from activity	tò (c	Amount paid or retained by fundraiser ted in col. (i)	(vi) Amount paid to (or retained by) organization
			Yes	No				
Total								
3 List all states in whi or licensing.	ich the organizatic	on is registered or licensed to solicit o	contrib	oution	s or has been notified	d it is	exempt from	registration

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

Schedule G (Form 990 or 990-EZ) 2013

332081 09-12-13

Sch		le G (Form 990 or 990-EZ) 2013 RESULT;				
		of fundraising event contributions and g	-			ts greater than \$5,000. (d) Total events
e			EVENT (event type)	EVENT (event type)	16 (total number)	(add col. (a) through col. (c))
Revenue	1	Gross receipts	150,291.	30,805.	72,629.	253,725.
	2	Less: Contributions	135,270.	19,238.	63,264.	217,772.
	3	Gross income (line 1 minus line 2)	15,021.	11,567.	9,365.	35,953.
	4	Cash prizes				
es	5	Noncash prizes				
Direct Expenses	6	Rent/facility costs				
Direct	7	Food and beverages				
	8 9 10	Entertainment Other direct expenses Direct expense summary. Add lines 4 throug	15,021.		9,365.	35,953. 35,953.
Pa	11	Net income summary. Subtract line 10 from	line 3, column (d)			0.
			answered "Yes" to Form	n 990, Part IV, line 19, or re	eported more than	
/enue		\$15,000 on Form 990-EZ, line 6a.	answered "Yes" to Form	n 990, Part IV, line 19, or re (b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Revenue	1		1	(b) Pull tabs/instant	(c) Other gaming	
	1	\$15,000 on Form 990-EZ, line 6a.	(a) Bingo	(b) Pull tabs/instant	(c) Other gaming	
Expenses		\$15,000 on Form 990-EZ, line 6a.	(a) Bingo	(b) Pull tabs/instant	(c) Other gaming	
senses		\$15,000 on Form 990-EZ, line 6a. Gross revenue	(a) Bingo	(b) Pull tabs/instant	(c) Other gaming	
Expenses	3	\$15,000 on Form 990-EZ, line 6a. Gross revenue Cash prizes Noncash prizes	(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	
Expenses	3	\$15,000 on Form 990-EZ, line 6a. Gross revenue Cash prizes Noncash prizes Rent/facility costs	(a) Bingo	(b) Pull tabs/instant	(c) Other gaming	
Expenses	3 4 5	\$15,000 on Form 990-EZ, line 6a. Gross revenue Cash prizes Noncash prizes Rent/facility costs Other direct expenses	(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	
Expenses	3 4 5 6	\$15,000 on Form 990-EZ, line 6a. Gross revenue Cash prizes Noncash prizes Rent/facility costs Other direct expenses Volunteer labor	(a) Bingo (a) Bingo (a) Bingo (b) Sin column (d)	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming (c) Other gaming () (c) Othe	
b 6 Direct Expenses	3 4 5 6 7 8 Entroites 1	\$15,000 on Form 990-EZ, line 6a. Gross revenue Cash prizes Noncash prizes Rent/facility costs Other direct expenses Volunteer labor Direct expense summary. Add lines 2 throug	(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	col. (a) through col. (c))

b If "Yes," explain:

332082 09-12-13

Schedule G (Form 990 or 990-EZ) 2013

Sch	edule G (Form 990 or 990-EZ) 2013 RESULTS EDUCATIONAL FUND, INC. 95-3	747	267	Page 3
11	Does the organization operate gaming activities with nonmembers?		Yes	No
	Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed		Yes	
12	to administer charitable gaming? Indicate the percentage of gaming activity operated in:		res	
		13a		%
	I The organization's facility An outside facility	13b		%
	Enter the name and address of the person who prepares the organization's gaming/special events books and records:			/0
••				
	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 \blacktriangleright \$			
с	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:			
	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 🕨 \$			
Pa	rt IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v), and Part III, li 15c, 16, and 17b, as applicable. Also complete this part to provide any additional information (see instructions).	nes 9,	9b, 10)b, 15b,
	····, ···, ····, ····, ····, ····, ····, ····, ·····, ·····, ······			
3320	83 09-12-13 Schedule G (Forn	n 990 (or 990	-EZ) 2013

(Form 990 or 990-EZ) Department of the Treasury

Supplemental Information to Form 990 or 990-EZ Complete to provide information for responses to specific questions on

Attach to Form 990 or 990-EZ.

Form 990 or 990-EZ or to provide any additional information. Open to Public

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

Internal Revenue Service Name of the organization

RESULTS EDUCATIONAL FUND, INC. Employer identification number 95-3747267

OMB No. 1545-0047

Inspection

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

CAMPAIGNS.

FORM 990, PART VI, SECTION B, LINE 11:

MEMBERS OF THE FINANCE COMMITTEE OF THE GOVERNING BOARD REVIEW

THE FORM 990 BEFORE IT IS SIGNED BY THE EXECUTIVE DIRECTOR AND FILED WITH

THE IRS.

FORM 990, PART VI, SECTION B, LINE 12C:

THE ORGANIZATION'S EXECUTIVE DIRECTOR ENSURES THAT EACH MEMBER

OF THE BOARD OF DIRECTORS COMPLETES AND SUBMITS ANNUALLY A CONFLICT OF

INTEREST FORM TO DISCLOSE ANY INTERESTS THAT MAY GIVE RISE TO CONFLICTS.

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

THE ORGANIZATION'S BOARD EXECUTIVE COMMITTEE DETERMINES THE

SALARY OF THE EXECUTIVE DIRECTOR.

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

AK, AZ, AR, CA, CO, CT, DC, FL, GA, HI, IL, KS, KY, ME, MD, MN, MO, NH, NJ, NM, NY, NC, OH, OK, OR

PA, RI, SC, UT, VA, WA, WV, WI

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

THE ORGANIZATION MAKES ITS 1023, 990, GOVERNING DOCUMENTS,

CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS AVAILABLE TO THE

PUBLIC UPON REASONABLE REQUEST.

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. 332211 09-04-13

Schedule O (Form 990 or 990-EZ) (2013)

Schedule O (Form 990 or 990-EZ) (2013)	Page 2
Name of the organization RESULTS EDUCATIONAL FUND, INC.	Employer identification number 95-3747267
FORM 990, PART XII, LINE 2C:	
THE ORGANIZATION HAS NOT CHANGED ITS AUDIT OVERSIGHT	
PROCESS OR PROCESS OF SELECTION OF AN INDEPENDENT ACCOUNT	ANT DURING THE
TAX YEAR.	
332212 09-04-13 Scheo	dule O (Form 990 or 990-EZ) (2013)

08481112 793927 17290 2013.05000 RESULTS EDUCATIONAL FUND, I 17290_1

SCHE	DULE R
(Form	990)

Related Organizations and Unrelated Partnerships

Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37. See separate instructions. ► Attach to Form 990.

Department of the Treasury Internal Revenue Service

Name of the organization

Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990

RESULTS EDUCATIONAL FUND, INC.

Part I Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity

Identification of Related Tax-Exempt Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt Part II organizations during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section	(f) Direct controlling entity	cont	g) 512(b)(13) rolled ity?
				501(c)(3))		Yes	No
RESULTS, INC 52-1411039							
1101 15TH STREET NW	GRASSROOTS LOBBY TO END				RESULTS		
WASHINGTON, DC 20005	HUNGER AND POVERTY	DISTRICT OF COLUMBIA	501(C)(4)		EDUCATIONAL FUND	Х	

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

OMB No. 1545-0047

2013

Open to Public

. Inspection

Employer identification number

95-3747267

Part III Identification of Related Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.

(a)	(b)	(c)	(d)		(e)		(f)	(9	g)	()	n)	(i)		(j)	(k)
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign	Direct controlling entity	(related, excluded fr	nant income unrelated, om tax under	inc	of total come	end-c	Share of I nd-of-year assets		ortionate tions?	amount in box 20 of Schedule		nanaging partner?	Percentag ownershi
		country)		sections	512-514)					Yes	No	K-1 (Form 10)65) y	'es No	
	_														
	_														
	_														
		_												_	
	_														
	-														
	-														
	-														
	-														
	-														
IV Identification of Related O organizations treated as a c	organizations Taxable corporation or trust dur	as a Corpo	oration or Trust Co year.	omplete if th	ne organizatio	on answ	ered "Yes	on Forr	n 990, Pa	art IV, I	ine 34	because it ha	ad one	e or mo	ore related
(a)			(b)	(c)	(d)		(e))	(f))		(g)		(h)	(i) Section
Name, address, and of related organizati		Prim		Legal domicile (state or foreign	Direct cont entity		Type of (C corp, S or tru	entity S corp,	Share c inco	of total			Perc	entage ership	512(b)(13

of related organization	i finary activity	toreign	entity	(C corp, S corp, or trust)	income	end-of-year assets	ownership	contr	rolled ity?
		country)		01 11 00 01				Yes	No

Schedule R (Form 990) 2013 RESULTS EDUCATIONAL FUND, INC

Yes No

Х

Х

Х

Х

Х

Х

Х

Х

X X

X X X

Х

Х

Х

Х

Х

Х

Schedule R (Form 990) 2013 RESOLIS EDUCATIONAL FOND, I				32-214120			
Part V Transactions With Related Organizations Complete if the organization and	swered "Yes" on Forr	n 990, Part IV, line 34, 35b	or 36.				
Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.							
1 During the tax year, did the organization engage in any of the following transactio	ons with one or more i	related organizations listed	in Parts II-IV?				
a Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity							
b Gift, grant, or capital contribution to related organization(s)				1b			
c Gift, grant, or capital contribution from related organization(s)							
d Loans or loan guarantees to or for related organization(s)							
e Loans or loan guarantees by related organization(s)				1e			
f Dividends from related organization(s)				1f			
g Sale of assets to related organization(s)				1g			
h Purchase of assets from related organization(s)				1h			
i Exchange of assets with related organization(s)				<u>1i</u>			
j Lease of facilities, equipment, or other assets to related organization(s)				<u>1j</u>			
k Lease of facilities, equipment, or other assets from related organization(s)				1k			
I Performance of services or membership or fundraising solicitations for related org	ganization(s)			11			
m Performance of services or membership or fundraising solicitations by related organization(s)							
n Sharing of facilities, equipment, mailing lists, or other assets with related organiza							
o Sharing of paid employees with related organization(s)				10			
p Reimbursement paid to related organization(s) for expenses							
q Reimbursement paid by related organization(s) for expenses				<u>1q</u>			
r Other transfer of cash or property to related organization(s)				1r			
s Other transfer of cash or property from related organization(s)							
2 If the answer to any of the above is "Yes," see the instructions for information on							
(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d Method of determinir				
(1) RESULTS, INC.	0	229,480.	HOURS WORKED				
(2)							
<u>(</u> ()							
(3)							
(4)							
(5)							
N77							
_(6)							

Schedule R (Form 990) 2013 RESULTS EDUCATIONAL FUND, INC.

Part VI Unrelated Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under section 512-514)	(e) Are a partners 501(c) orgs.) sec. (3) ?	(f) Share of total income	(g) Share of end-of-year assets	(I Dispr tior alloca	n) opor- nate tions? No	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) Gener manag partn Yes	al or F ging ler?	(k) ^D ercentage ownership

Schedule R (Form 990) 2013

Schedule R	(Form 990) 2013 RESULTS EDUCATIONAL FUND, INC.	95-5/4/20/ Page 5
Part VII	(Form 990) 2013 RESOLTS EDUCATIONAL FOND, INC.	
	Provide additional information for responses to questions on Schedule R (see instructions).	
332165 09-12-	13	Schedule R (Form 990) 2013