** 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.

Open to Public

Department of the Treasury Internal Revenue Service

► Information about Form 990 and its instructions is at www.lrs.gov/form990.

OMB No. 1545-0047 Inspection

A	For	the 2014 calendar year, or tax year beginning	and ending		
	Check		and ending	D Employer identi	ification number
		RESULTS EDUCATIONAL FUND, INC.			
	Na cha	me Doing business as		95-	3747267
	Init	m Number and street (or P.O. box if mail is not delivered to street address)	Room/su		
	Fin: retu terr	1101 15TH STREET NW		the second second	-783-48 00
Г	ate Am	to a sound of province, country, and zir or loreign postal code)	G Gross receipts \$	29,735,506.
F		NIA.		H(a) Is this a group	
_	tion	F Name and address of principal officer: JOANNE CARTER SAME AS C ABOVE		for subordinate	
$\overline{}$	Tax-e	exempt status: X 501(c)(3) 501(c) () (insert no.) 4947(a	V4\nr E	H(b) Are all subordinates If "No." attach	
		site: WWW.RESULTS.ORG	<u> </u>	,	a list. (see instructions)
	_	of organization: X Corporation Trust Association Other	I Ye	H(c) Group exempti	M State of legal domicile; CA
P	art l		12,10	ur 57 10 madon. 25 0 1	M State of legal dolllicile, CA
Activities & Governance	1	Briefly describe the organization's mission or most significant activities: GE HUNGER AND THE WORST ASPECTS OF POVERT	NERĀTIN	G THE WILL	TO END
Ē	2	Check this box if the organization discontinued its operations or di		ore than 25% of its not a	
ōve	3			3	1
જ	4	Number of independent voting members of the governing body (Part VI, line	1b)	4	
es	5	otal number of individuals employed in calendar year 2014 (Part V, line 2a)		5	
ävit	6	lotal number of volunteers (estimate if necessary)		8	15
Aci	7 8	Total unrelated business revenue from Part VIII, column (C), line 12		7a	
_	 _ 	Net unrelated business taxable income from Form 990-T, line 34		7b	0.
	8	Contain the many of the contain the contai	L	Prior Year	Current Year
Пe	9	Contributions and grants (Part VIII, line 1h)		4,372,082.	
Revenue	10	Program service revenue (Part VIII, line 2g)		783,854.	
æ	111	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	·····	-33,942.	
	12	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 1:		-440. 5,121,554.	8,657.
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	<u> </u>	3,764,710.	
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0.	3,646,559.
S	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-1	iu)	3,393,974.	
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)	· · · · · · ·	0.	0.
ž	b	Total fundraising expenses (Part IX, column (D), line 25) 242	628.		
ш	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		2,764,489.	4,290,185.
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		9,923,173.	11,453,555.
<u>_ 125</u>	19	Revenue less expenses. Subtract line 18 from line 12		-4,801,619.	18,246,862.
sets or		* • • • • • • • • • • • • • • • • • • •	В	eginning of Current Year	End of Year
Bagg	20	Total assets (Part X, line 16)		5,480,506.	23,200,025.
Net Ass Fund Ba	21	Total liabilities (Part X, line 26)	······ [<u> </u>	1,238,445.	711,256.
		Net assets or fund balances. Subtract line 21 from line 20 Signature Block		4,242,061.	22,488,769.
		lities of perjury, I declare that I have examined this return, including accompanying sched	ules and atotan	manta and to the best of	
true,	correc	t, and complete. Declaration of preparer (other than officer) is based on all information of	iuics aliu Slatell Ewhich proporo	nents, and to the best of My	y knowledge and belief, it is
		North State of the	TWINOIT PTOPATO	LO NOV	2016
Sigr	1	Signature of officer		Date	
Here	e	MARK BUTLER, DIRECTOR OF FINANCE Type or print name and title		<u></u>	
		7.15		Doto	
Paid		DAVID A. JONES Preparer's signature		Date Check	PTIN
Prep		Firm's name JONES, MARESCA & MCQUADE, P.A.	<u></u>	self-employa	
Use (Firm's address 10500 LITTLE PATUXENT PARKWAY,	वर्णगाउ	Firm's EIN	52-1853933
		COLUMBIA, MD 21044	POTIE	ľ	0-884-0220
Vlay	the IF	S discuss this return with the preparer shown above? (see instructions)		11 4016 10.4 11	7
	1 11-0		tions.		Form 990 (2014)
		•			· (CU(4)

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		x	
2	is the organization required to complete Schoolule B. Schoolule at Octable 4.0	1 2	$\frac{1}{X}$	+-
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for	 	 	+
	public office? If "Yes," complete Schedule C, Part I	3		x
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect	١-	 	+
	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		x
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to	<u> </u>		
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6	l	x
7	Did the organization receive or hold a conservation easement, including easements to preserve open space.	\vdash	-	
	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		Х
9	bid 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?	l		
	If "Yes," complete Schedule D, Part IV	9]	Х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	_10_		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, IX, or X			
	as applicable.			
8	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes, complete Schedule D,			
	Part VI	11a	X	
D	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total	ĺ		
_	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
C	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
۸	assets reported in Part X, line 16? /f "Yes," complete Schedule D, Part VIII	11c		X
u	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			
e	Part X, line 16? If "Yes," complete Schedule D, Part IX Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11d	77	X
f		11e	X	
-	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X		┰┃	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	11f	Х	
	Calcadula D. Danta VI and VIII			v
b	Was the organization included in consolidated, independent audited financial statements for the tax year?	12a		X
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	40.	x	
13	le the organization a school deposit and in another 4704-1444-150 (FIVE III and 144.0.4.4.5.	12b		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	13		$\frac{x}{x}$
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,	14a		
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	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	***		
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	x	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	 †		
	or for foreign individuals? 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.	+	\dashv	
	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	_ †	$\neg \dagger$	
	1c and 8a? If "Yes," complete Schedule G, Part II	18	x	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Voo" to line 20e did the annual attack and a second of the second of	20b		
			200	

Pá	Irt 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	1		۱
~~	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	. 21	↓	X
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		x
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current	· 	 	┿
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete 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			\vdash
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete	- 1		
	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		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		\vdash
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	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 "Yes," 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			
	of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV		1.	
	instructions for applicable filing thresholds, conditions, and exceptions):			<u> </u>
	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	20-		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	28c 29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation	29	-	
	contributions? If "Yes," complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations?	30		
	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	1		
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations		\Box	
	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		х	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	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		X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36	_	X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 192			

Note. All Form 990 filers are required to complete Schedule O

Form	990 (2014) RESULTS EDUCATIONAL FUND, INC.		95-3747	<u> 267</u>	Р	age 5
Pa	rt V Statements Regarding Other IRS Filings and Tax Compliance		- <u></u> -			
	Check if Schedule O contains a response or note to any line in this Part V		+			
					Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	37			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and	reportabl	e gaming			
	(gambling) winnings to prize winners?			10	X	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			- 8		
	filed for the calendar year ending with or within the year covered by this return	2a	58			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax retu	urns?		2b	Х	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instruction	ns)				
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?			3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule	eO		3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or othe	r authority	over, a			ļ
	financial account in a foreign country (such as a bank account, securities account, or other financial	l account)	?	4a	X	<u> </u>
b	If "Yes," enter the name of the foreign country: ► SPAIN					
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial	Accounts	(FBAR).	٠. ا	٠,	
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter trans			5b		X
C	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 organ	ization 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 contribu	itions or g	jifts			ł
	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	ervices pro	vided to the payor?	7a		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b		
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it \mathbf{v}	was requir	ed			
	to file Form 8282?			7c		X
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	contract?	·	7e		Х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit con	tract?		7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file F	Form 8899	as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization	zation file	a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintaine	d by the				
	sponsoring organization have excess business holdings at any time during the year?			8		
9	Sponsoring organizations maintaining donor advised funds.					
а	Did the sponsoring organization make any taxable distributions under section 4966?			9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? $\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \$			9b		
10	Section 501(c)(7) organizations. Enter:		i			
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		a .		
11	Section 501(c)(12) organizations. Enter:	1 1		1		
а	Gross income from members or shareholders	11a		E		
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	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	n 1041?		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.					
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					
	organization is licensed to issue qualified health plans	13b				
	Enter the amount of reserves on hand	13c		*		
				14a		X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedu	le 0	,,	14b		

432005 11-07-14

Form **990** (2014)

RESULTS EDUCATIONAL FUND, INC. Form 990 (2014) RESULTS EDUCATIONAL FUND, INC. 95-3747267 Page
Part VI Governance, Management, and Disclosure For each "Yes' response to lines 2 through 7b below, and for a "No' response

	to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.		·								
	Check if Schedule O contains a response or note to any line in this Part VI			X							
Sec	ction A. Governing Body and Management										
			Yes	No							
1a	Enter the number of voting members of the governing body at the end of the tax year1a 1	6									
	If there are material differences in voting rights among members of the governing body, or if the governing			1							
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.	ĺ									
b	Enter the number of voting members included in line 1a, above, who are independent	5	,								
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			1							
	officer, director, trustee, or key employee?	2		X							
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision										
	of officers, directors, or trustees, or key employees to a management company or other person?	3		X							
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X							
5	5 Did the organization become aware during the year of a significant diversion of the organization's assets?										
6	Did the organization have members or stockholders?	6		X							
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or										
	more members of the governing body?	7a		X							
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or										
	persons other than the governing body?	7b		X							
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:										
a		8a	X								
b		8b	Х								
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the										
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		Х							
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)										
			Yes	No							
10a	Did the organization have local chapters, branches, or affiliates?	10a	Х								
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,										
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	X								
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X								
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.										
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	X								
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Х								
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe										
	in Schedule O how this was done	12c	X								
13	Did the organization have a written whistleblower policy?	13	Х								
14	Did the organization have a written document retention and destruction policy?	14	X								
15	Did the process for determining compensation of the following persons include a review and approval by independent										
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		,								
а	The organization's CEO, Executive Director, or top management official	15a		X							
	Other officers or key employees of the organization	15b		X							
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			_							
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a										
	taxable entity during the year?	16a		X							
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation										
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's										
	exempt status with respect to such arrangements?	16b									
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, CO, CT, DC, FL, G	A,HI	,IL	,KS							
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only)										
	for public inspection. Indicate how you made these available. Check all that apply.										
	X Own website Another's website X Upon request Other (explain in Schedule O)										
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, ar	d finar	ncial								
	statements available to the public during the tax year.										
20	State the name, address, and telephone number of the person who possesses the organization's books and records:										
	THE ORGANIZATION - 202-783-4800										
	1101 15TH STREET NW, WASHINGTON, DC 20005										
132000	SEE SCHEDULE O FOR FULL LIST OF STATES	Forn	n 990	(2014							

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated **Employees, and Independent Contractors**

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation.
 Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

(A) Name and Title	(B) Average hours per	box	not ci	Pos heck es pe	more rson	than is bot	h an	(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of
	week (list any hours for related organizations below line)	stee or director	Institutional trustee	Officer		Highest compensated employee	Ĺ	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
(1) SCOTT LECKMAN CHAIRMAN	5.00 2.00	x		X				0.	0.	0
(2) BETH WILSON	5.00	Ĥ	Н	Δ	\vdash	\vdash	-	0.	0.	0
SECRETARY	2.00	x		x				. 0.	0.	0.
(3) JAN TWOMBLY	5.00		П							
TREASURER	2.00	х		X				0.	0.	0
(4) SAM DALEY-HARRIS	40.00	Г	П							
FOUNDER/DIRECTOR	1.00	X	Ш					120,477.	0.	23,659
(5) ROGER HUDSON	5.00							_	_	_
DIRECTOR	2.00	X	Щ			$oxed{oxed}$		0.	0.	0
(6) VANESSA GARCIA	5.00		lÌ							_
DIRECTOR	2.00	X	\vdash					0.	0.	0
(7) CINDY CHANGYIT-LEVIN DIRECTOR	5.00 2.00	x						o .l	0.	0
(8) MARIAN WRIGHT EDELMAN	5.00	_	Н		_			0.	U .	0
DIRECTOR	2.00	x						o.	0.	0
(9) PANKAJ AGARWAL	5.00	-	\vdash			-		, ,		
DIRECTOR	2.00	x						0.	0.	0
(10) VALERIE HARPER	5.00					П		-		
DIRECTOR	2.00	х	ĺ					0.	0.	0
(11) MARIANNE WILLIAMSON	5.00		\Box							_
DIRECTOR	2.00	X		_				0.	0.	0 .
(12) PROF, MUHAMMAD YUNUS	5.00									
DIRECTOR	2.00	X						0.	0.	0.
(13) LYDIA PENDLEY	5.00									_
DIRECTOR	2.00	X		_	_			0.	0.	0 .
(14) KUL GAUTAM	5.00								•	
DIRECTOR	2.00	X	\square	_	\dashv	Щ	_	0.	0.	0
(15) PATRICK HUGHES	5.00 2.00	x						0.	0.	^
DIRECTOR (16) ERNEST LEOVINSOHN	5.00	Λ	\dashv	\dashv	-	$\vdash\vdash$		0.	<u> </u>	0.
DIRECTOR		x						0.	0.	0 .
(17) JOANNE CARTER	34.00		\dashv	\dashv	\dashv	\vdash		0.		0 .
EXECUTIVE DIRECTOR	6.00			\mathbf{x}				133,583.	о.	15,444

432007 11-07-14

Form 990 (2014) RESULTS I	EDUCATIO	ON2	AL	FU	INU	D ,	I	NC.	95-374	1726	57	Page 8
Part VII Section A. Officers, Directors, Trus	tees, Key Em	ploy	ees	, and	d Hi	ighe	st C	compensated Employe	es (continued)			
(A) Name and title	(B) Average hours per week	verage Position (do not check more than or box, unless person is both.)					h an	(D) Reportable compensation from	(E) Reportable compensation from related		(F) Estima amount oth	ated nt of
	(list any hours for related organizations below line)	Individual trustee or director	institutional trustee	Officer	Key employee	Highest compensated employee	Боттег	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)) (ompen from organiz and re organiz	zation elated
(18) LARRY REED	38.00							105 556	,	, [10	107
DIRECTOR, MCS	2.00	L	L	\vdash	_	X	<u> </u>	127,576.).	то,	127.
(19) MARK BUTLER	38.00	-				x		119,179.	,).	15	250.
DIRECTOR OF FINANCE (20) VICTORIA TRELAND	38.00			\vdash		<u> </u>		117,170		' +	<u> </u>	<u> </u>
DIRECTOR OF PROGRAM DEV.	2.00	L				х		120,485.).	10,	571.
		\vdash	L		_	_	_		-	+		
<u> </u>		-	H			_				+		
		\vdash	H	H		_				+		
		H								+		
										+		
1h Sub-total								621,300.	(81.	051.
1b Sub-total c Total from continuation sheets to Part VI								0.		7.		0.
d Total (add lines 1b and 1c)								621,300.	().	81,	051.
Total number of individuals (including but n compensation from the organization	ot limited to th	ose	liste	ed al	bove	e) wl	no re	eceived more than \$100	0,000 of reportable			5
											Ye	s No
3 Did the organization list any former officer, line 1a? If "Yes," complete Schedule J for s	uch individual									3	3	х
4 For any individual listed on line 1a, is the su and related organizations greater than \$15									trie organization		4	X
5 Did any person listed on line 1a receive or a									idual for services			
rendered to the organization? If "Yes," com- Section B. Independent Contractors	plete Schedul	e J f	or s	uch	pers	son		······································		5	5	X
Complete this table for your five highest co the organization. Report compensation for										ensatio	on from	ו
(A) Name and business			INC					(B) Description of s		Com	(C) ipensa	tion
								_				

Form **990** (2014)

Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization \$\infty\$ 0

			Check if Schedule O cor			(A) Total revenue	(B) Related or	(C) Unrelated	Revenue excluder from tax under
						i otal revenue	exempt function revenue	business revenue	from tax under sections 512 - 514
ats ts		1 a	Federated campaigns	1a		-		Teveride	512-514
ē j		b	Membership dues	1b	_				
S.E			Fundraising events		116,183.				
ar.			Related organizations						
SE			Government grants (contribu						
Ē	1		All other contributions, gifts, grai						
章			similar amounts not included abo		28,660,725.				
F 0		q	Noncash contributions Included in line						
Contributions, Gifts, Grants and Other Similar Amounts			Total. Add lines 1a-1f			28,776,908.			
					Business Code				
æ	1 2	2 a	EDUCATIONAL EVENTS		900099	860,014.	860,014.		
ž,		b	CONTRACTS	_	900099	45,801.	45,801.		
8 1	l	c	MERCHANDISE & BOOK SAL	900099	2,261.	2,261.		<u> </u>	
e a		d				2,201.	2,201.	<u>_</u>	
Par.		e			-	-			 -
Program Service Revenue		f	All other program service reve	enue	- 		-		
						908,076.		_	
	3		Investment income (including			300,070.			
	-		other similar amounts)			7,831.			7 021
	4		Income from investment of ta	x-exempt bone	proceeds			· ·	7,831
	5		Royalties			574.			F74
J	-			(i) Real	(ii) Personal	3,12,			574
	6	а	Gross rents	(i) recal	(ii) i eisonai				
	_		Less: rental expenses		 				
- 1			Rental income or (loss)		 				
			Net rental income or (loss)						
J	7		Gross amount from sales of	(i) Securities					
	-		assets other than inventory	(i) Gocultues	(ii) Otiliei				
			Less: cost or other basis		+				
- 1			and sales expenses		1,055.				
			Gain or (loss)		-1,055.				
- 1			Net gain or (loss)			-1,055.			
.			Gross income from fundraising		-1,035.			-1,055	
evenue	•		including \$116		1 1				
§ [contributions reported on line		1 1				
Other Re			Part IV, line 18		a 34,034.				
홟ㅣ			Less: direct expenses		34,034.				
<u> ۱</u>		c	Net income or (loss) from fund	raising evente	51,004.	0.			
- 1			Gross income from garning act						
- [_		Part IV, line 19					1 2	
			Language allowed accounts		a	-9. +		0	
- 1			Net income or (loss) from gami		·——	٠.			*
			Gross sales of inventory, less r						
			and allowances		,				
		b i	Less: cost of goods sold		3				
			Net income or (loss) from sales		'			· · · · · · · · · · · · · · · · · · ·	
ı		_	Miscellaneous Revenue		Business Code				
ļ.	11 :	a (GAIN ON CURRENCY CONVER		900099	5,846.			F 045
		-	HONORARIUM		900099	2,237.			5,846.
		C I			1 200033	4,431.			2,237.
		-	All other revenue		-				
			Takal Adalia a dala dala			9 093			
- [.	12		Total revenue. See instructions.			8,083. 29,700,417.	000 000		2 2 2 2 2 2
32009	- 444			<u></u>		42,100,417.	908,076	0.	15,433.

	ion 501(c)(3) and 501(c)(4) organizations must com Check if Schedule O contains a respon				X
	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 domestic organizations				
	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				,
	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16	3,648,559.	3,648,559.		
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	292,264.	247,161.	32,977.	12,126
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	2,709,125.	2,319,107.	279,185.	110,833
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	31,805.	24,609.	5,749.	1,447
9	Other employee benefits	255,701.	197,848.	46,219.	1,447 11,634
10	Payroll taxes	225,916.	195,659.	20,104.	10,153
.o I1	Fees for services (non-employees):				
	Management				
	Legal	8,014.	6,052.	1,929.	33
	Accounting	34,783.	343.	34,440.	
		3277000	0101	01/1100	
	Lobbying Professional fundraising services. See Part IV, line 17				
_	-				
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25,	1,353,861.	1,268,017.	80,925.	4,919
	column (A) amount, list line 11g expenses on Sch O.)	59,945.	34,775.	25,010.	160
12	Advertising and promotion	219,825.	109,527.	103,707.	6,591
13	Office expenses	35,056.	23,562.	10,244.	1,250
4	Information technology	33,030.	43,304.	10,244.	1,450
15	Royalties	255,689.	215 750	26 505	12 245
6	Occupancy		215,759.	26,585.	13,345
17	Travel	1,415,492.	1,368,735.	31,616.	15,141
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	E00 200	664 400	04.054	25.056
9	Conferences, conventions, and meetings	783,303.	664,193.	84,054.	35,056
20	Interest	2.	2.		
21	Payments to affiliates	50.604	14 683		0 (54
2	Depreciation, depletion, and amortization	52,604.	44,673.	5,280.	2,651
3	Insurance	25,586.	22,942.	1,286.	1,358
4	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
9	DUES AND SUBSCRIPTIONS	16,767.	11,060.	237.	5,470
ь	LICENSES AND FEES	16,411.	831.	5,119.	10,461
c	TRAINING AND DEVELOPMEN	12,847.	175.	12,672.	
	TIGHTING THE DEVELOTION	14,011		12,0721	
d	All ether evpenses				
	All other expenses	11,453,555.	10,403,589.	807,338.	242,628
5	Total functional expenses. Add lines 1 through 24e	TT, 400, 000.	T0/ T03, 303.	007,330.	242,020
:6	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined		l		
	educational campaign and fundraising solicitation.		l	ļ	
	Check here if following SOP 98-2 (ASC 958-720)				Form 990 (2014

Pa	πx	Balance Sneet					
		Check if Schedule O contains a response or no	te to any	line in this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			579,140.	1	2,167,595
	2	Savings and temporary cash investments			3,943,148.	2	2,907,493
	3	Pledges and grants receivable, net				3	17,189,274
	4	Accounts receivable, net			328,904.	4	268,788
	5	Loans and other receivables from current and fe					5 4 5 F-1 1 5 W
		trustees, key employees, and highest compens	ated emp	loyees. Complete			· · · · · · · · · · · · · · · · · · ·
		Part II of Schedule L				5	
	6	Loans and other receivables from other disqual	ified pers	ons (as defined under			
		section 4958(f)(1)), persons described in section	n 4958(c)	(3)(B), and contributing			
		employers and sponsoring organizations of sec	tion 501(c)(9) voluntary			
ħ		employees' beneficiary organizations (see instr)	. Comple	te Part II of Sch L		6	
Assets	7	Notes and loans receivable, net				7	175,000
<	8	Inventories for sale or use	[8		
	9	Prepaid expenses and deferred charges	159,094.	9	60,019		
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D	10a				
	b	Less: accumulated depreciation		124,520.	404,531.	10c	366,167.
	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	65,689.	15	65,689.		
	16	Total assets. Add lines 1 through 15 (must equ	5,480,506.	16	23,200,025.		
	17	Accounts payable and accrued expenses			788,288.	17	270,259.
	18	Grants payable		18			
	19	Deferred revenue				19	
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complete				21	
ທຸ	22	Loans and other payables to current and former					
<u>i</u>		key employees, highest compensated employee					
Liabilities					, , , , , , , , , , , , , , , , , , ,	22	•
۔ ت	23	Secured mortgages and notes payable to unrela				23	
	24	Unsecured notes and loans payable to unrelate				24	
	25	Other liabilities (including federal income tax, pa		_			•
		parties, and other liabilities not included on lines	-	I			
		Schedule D	•		450,157.	25	440,997.
	26	Total liabilities. Add lines 17 through 25			1,238,445.	26	711,256.
		Organizations that follow SFAS 117 (ASC 958), check	here X and			
စ္က		complete lines 27 through 29, and lines 33 an					
ဦ ၂	27	Unrestricted net assets			254,561.	27	354,541.
<u>a</u>	28	Temporarily restricted net assets			3,987,500.	28	22,134,228.
80	29				.,,	29	
Š		Organizations that do not follow SFAS 117 (A					1, -
Net Assets or Fund Balances		and complete lines 30 through 34.	,				
ğ	30	Capital stock or trust principal, or current funds				30	•
88	31	Paid-in or capital surplus, or land, building, or eq				31	
₹	32	Retained earnings, endowment, accumulated in			· <u></u>	32	
9	33				4,242,061.	33	22,488,769.
	34	Total liabilities and net assets/fund balances			5,480,506.	34	23,200,025.
	34	rotar nationities and her assets/fund balances			3,400,300.	34	43,400,043.

Form **990** (2014)

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit

Act and OMB Circular A-133?

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit

or audits, explain why in Schedule O and describe any steps taken to undergo such audits

Form 990 (2014)

За

X

SCHEDULE A

Department of the Treasury

Internal Revenue Service

(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-EZ.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

RESULTS EDUCATIONAL FUND, INC.

Employer identification number 95-3747267

rt I	Reason for Public (Charity Status (/	All organizations must c	omplete th	is part.) Se	ee instructions.								
orgar	nization is not a private found	lation because it is: (For lines 1 through 11, o	check only	one box.)									
	· ·		· · · · · · · · · · · · · · · · · · ·											
	·													
一				ection 170	уьу туауы	ii).								
一							the hospital's name.							
ш		ation operated in co	njanoson wara noopia	1 400011000	3 111 000010	TO COM THE TANKS	are respirate training							
		or the benefit of a co	llogo or university owne	d or opera	tod by a d	overnmental unit describ	ped in							
ш	•		mege or university owne	u or opera	ted by a g	Overminental drift describ	Jed III							
A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).														
v	A receral, state, or local government or governmental unit described in section 170(b) 1/A)v. An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in													
section 170(b)(1)(A)(vi). (Complete Part II.)														
H	•													
	-													
			•				_							
			(less section 511 tax) fr	om busine	sses acqu	ired by the organization	after June 30, 1975.							
		•				200 1/41								
\vdash							,							
	-		•	-		·	·							
							Sheck the box in							
	_													
ä L														
	=			a majority	of the dire	ctors or trustees of the s	supporting							
		•												
				ame perso	ons that co	ontrol or manage the sup	ported							
	organization(s). You mus	t complete Part IV,	Sections A and C.											
5	• • • • • • • • • • • • • • • • • • • •						ed with,							
_	_ its supported organization	n(s) (see instructions	s). You must complete I	Part IV, Se	ections A,	D, and E.								
	-													
	that is not functionally int	egrated. The organiz	zation generally must sa	tisfy a dist	ribution re	quirement and an attent	iveness							
	_ `	•												
à	$oldsymbol{ol}}}}}}}}}}}}} $	ınization received a	written determination fro	m the IRS	that it is a	a Type I, Type II, Type III								
	functionally integrated, or	Type III non-functio	nally integrated support	ing organi:	zation.									
Ente	er the number of supported o	organizations		,										
				les 3 1 - 11			(34)							
-		(ii) EIN	()				(vi) Amount of other support (see							
	organization		,				Instructions)							
			(see instructions))	Yes	No	ii isti dottoriaj	in lot dot lot lot							
	orgar	organization is not a private found A church, convention of ch A school described in section A hospital or a cooperative A medical research organizative, and state: An organization operated for section 170(b)(1)(A)(iv). (Cooperative) A federal, state, or local gooperative An organization that normat section 170(b)(1)(A)(vi). (Cooperative) An organization that normat activities related to its exemplated and unrelated busing See section 509(a)(2). (Cooperative) An organization organized and an organization organized and unrelated busing See section 509(a)(2). (Cooperative) An organization organized and an organization organized organization organization. You must cooperate organization. You must cooperate organization. You must cooperate organization organization organization. You must cooperate organization organization. You must cooperate organization organization. You must cooperate organization. You must cooperate organization organization. You must the supported organization. Type III functionally interequirement (see instructionally interequirement (see instructionally integrated, organizationally	organization is not a private foundation because it is: A church, convention of churches, or associatic A school described in section 170(b)(1)(A)(ii). A hospital or a cooperative hospital service org. A medical research organization operated in cocity, and state: An organization operated for the benefit of a cosection 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or govern An organization that normally receives a substasection 170(b)(1)(A)(vi). (Complete Part III.) A community trust described in section 170(b) An organization that normally receives: (1) more activities related to its exempt functions - subject income and unrelated business taxable income See section 509(a)(2). (Complete Part III.) An organization organized and operated excluse more publicly supported organizations described lines 11a through 11d that describes the type of Type II. A supporting organization operated, such that supported organization, You must complete Part IV, See Type III. A supporting organization supervised control or management of the supporting organization organization(s). You must complete Part IV, Type III. A supporting organization supervised control or management of the supporting organization(s). You must complete Part IV, Type III functionally integrated. A supporting that is not functionally integrated. A supporting that is not functionally integrated. The organization is supported organization received a functionally integrated, or Type III non-functionally integrated. (ii) EIN organization	organization is not a private foundation because it is: (For lines 1 through 11, to A church, convention of churches, or association of churches described A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) A hospital or a cooperative hospital service organization described in set A medical research organization operated in conjunction with a hospita city, and state: An organization operated for the benefit of a college or university owner section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in Section 170(b)(1)(A)(vi). (Complete Part III.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part III.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part III.) An organization that normally receives: (1) more than 33 1/3% of its supactivities related to its exempt functions - subject to certain exceptions, income and unrelated business taxable income (less section 511 tax) for See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public set an organization organized and operated exclusively for the benefit of the more publicly supported organizations described in section 509(a)(1) of lines 11a through 11d that describes the type of supporting organization Type I. A supporting organization operated, supervised, or controlled the supported organization on supervised or controlled in connec control or management of the supporting organization vested in the sorganization must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connec control or management of the supporting organization operated its supported organization (s) (see instructions). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated its supported organization aloue integrated. A supporting organization operated its supported organization for functionally integrated, or Type	organization is not a private foundation because it is: (For lines 1 through 11, check only A church, convention of churches, or association of churches described in section 170(b)(1)(A)(ii), (Attach Schedule E.) A school described in section 170(b)(1)(A)(ii), (Attach Schedule E.) A hospital or a cooperative hospital service organization described in section 170 A medical research organization operated in conjunction with a hospital described city, and state: An organization operated for the benefit of a college or university owned or opera section 170(b)(1)(A)(ii). (Complete Part II.) A federal, state, or local government or governmental unit described in section 1: An organization that normally receives a substantial part of its support from a government or 170(b)(1)(A)(ii). (Complete Part III.) An organization that normally receives: (1) more than 33 1/3% of its support from activities related to its exempt functions - subject to certain exceptions, and (2) no income and unrelated business taxable income (less section 511 tax) from busine See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See An organization organized and operated exclusively for the benefit of, to perform more publicly supported organizations described in section 509(a)(1) or section lines 11a through 11d that describes the type of supporting organization and con Type I. A supporting organization operated, supervised, or controlled by its sup the supported organization(s) the power to regularly appoint or elect a majority organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with it control or management of the supporting organization vested in the same persorganization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with its control organization (see instructions). You must complete Part IV, Sections	organization is not a private foundation because it is: (For lines 1 through 11, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(ii). (Attach Schedule E.) A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(ii). A modical research organization operated in conjunction with a hospital described in section city, and state: An organization operated for the benefit of a college or university owned or operated by a get section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A) An organization that normally receives a substantial part of its support from a governmental section 170(b)(1)(A)(vi). (Complete Part III.) An organization that normally receives: (1) more than 33 1/3% of its support from contributive activities related to its exempt functions - subject to certain exceptions, and (2) no more than income and unrelated business taxable income (less section 511 tax) from businesses acq. See section 50(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 50(a)(2). (Complete Part III.) An organization organized and operated exclusively for the benefit of, to perform the function more publicly supported organizations described in section 506(a)(1) or section 506(a)(2). [Interest 11 through 11d that describes the type of supporting organization domplete line 17 type I. A supporting organization operated, supervised, or controlled by its supported organization organization supervised or controlled in connection with its supported organization organization supervised or controlled in connection with its supported organization organization operated in connection with its supported organization organization operated in connection with its supported organization integrated. A supporting organizatio	organization is not a private foundation because it is: (For lines 1 through 11, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A church, convention of churches, or association of churches described in section 170(b)(1)(A)(ii). A nedical read cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit describ section 170(b)(1)(A)(iv). (Complete Part II.) A cederal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general section 170(b)(1)(A)(v). (Complete Part III.) An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, a activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). (Ince 1 is through 11d that describes the type of supporting organization and complete lens 11e, 11e, and 11g. Type 1. A supporting organization operated, supervised, or controlled by this supported organization(b) (see instructions). You must comp							

LHA For Paperwork Reduction Act Notice, see the Instructions for

Form 990 or 990-EZ. 432021 09-17-14

Schedule A (Form 990 or 990-EZ) 2014 RESULTS EDUCATIONAL FUND, INC. 95-37472 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										
Cal	endar year (or fiscal year beginning in) 🕨	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total				
1	Gifts, grants, contributions, and			1		,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
	membership fees received. (Do not			1							
	include any "unusual grants.")	2582737.	1566785.	7345515.	4372082.	28691946.	44559065				
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										
4	Total. Add lines 1 through 3	2582737.	1566785.	7345515.	4372082.	28691946.	44559065.				
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					ľ					
	amount shown on line 11,										
_	column (f)						28831781.				
	Public support. Subtract line 5 from line 4.						15727284.				
		T 110010 7									
	ndar year (or fiscal year beginning in)	(a) 2010 2582737.	(b) 2011 1566785.	(c) 2012 7345515.	(d) 2013	(e) 2014	(f) Total				
	Amounts from line 4 Gross income from interest.	2302/3/.	1300/03.	/343313.	43/2082.	28691946.	44559065.				
0	• •										
	dividends, payments received on										
	securities loans, rents, royalties and income from similar sources	6,361.	6,003.	13,818.	10,201.	E 02E	42 200				
9	Net income from unrelated business	0,301.	0,003.	13,010.	10,201.	5,825.	42,208.				
9	activities, whether or not the		·								
	business is regularly carried on] [
10	Other income. Do not include gain										
	or loss from the sale of capital										
	assets (Explain in Part VI.)	13,691.	73,510.	5,501.	2,154.	7 371	102,227.				
11	Total support. Add lines 7 through 10	20,002	,5,510.	3,301.	2,131.		44703500.				
12	Gross receipts from related activities,	etc. (see instruction	nne)				,220,548.				
	First five years. If the Form 990 is for	•	f ++1	i fourth or fifth to			,220,340.				
	organization, check this boy and ston	horo			-		ightharpoonup				
Sec	tion C. Computation of Publi	ic Support Per	rcentage	***************************************							
14	Public support percentage for 2014 (I	ine 6, column (f) di	vided by line 11. c	olumn (f))		14	35.18 %				
15	Public support percentage from 2013	Schedule A, Part I	II, line 14		***************************************	15	72.20 %				
16a	33 1/3% support test - 2014. If the o	organization did not	t check the box on	line 13, and line 1	4 is 33 1/3% or π						
	stop here. The organization qualifies	as a publicly suppo	orted organization				► X				
b	33 1/3% support test - 2013. If the o	organization did not	t check a box on li	ne 13 or 16a, and	line 15 is 33 1/3%	or more, check th	is box				
	and stop here. T he organization quali	ifies as a publicly s	upported organiza	tion			>				
17a	10% -facts-and-circumstances test	t - 2014. If the orga	anization did not cl	heck a box on line	13, 16a, or 16b, a	and line 14 is 10%	or more,				
	and if the organization meets the "fac	ts-and-circumstand	ces" test, check th	is box and stop h e	ere. Explain in Par	t VI how the organi	ization				
	meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization										
b	10% -facts-and-circumstances test	t - 2013. If the orga	anization did not cl	heck a box on line	13, 16a, 16b, or 1	7a, and line 15 is 1	10% or				
	more, and if the organization meets th	ne "facts-and-circun	nstances" test, ch	eck this box and s	top here. Explain	in Part VI how the					
	organization meets the "facts-and-circ	umstances" test. 7	The organization q	ualifies as a public	ly supported orga	nization					
18	Private foundation. If the organization	<u>n did not check a b</u>	oox on line 13, 16a	<u>, 16b, 17a, or 17b,</u>	check this box a	nd see instructions	<u> </u>				
					Sche	dule A (Form 990	or 990-EZ) 2014				

Schedule A (Form 990 or 990-EZ) 2014 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.)

Se	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Totai
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						<u> </u>
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that					7	
	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			Ì			
	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						
	Public support (Subtractline 7c from line 6.)						
Sec	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
9	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						
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain						
	or loss from the sale of capital assets (Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First five years. If the Form 990 is for	the organization's	first, second, thi	rd, fourth, or fifth t	ax year as a section	on 501(c)(3) organiz	ration,
	check this box and stop here						>
Sec	tion C. Computation of Publi	c Support Per	rcentage				
15	Public support percentage for 2014 (lin	ne 8, column (f) di	vided by line 13,	column (f))		15	<u>%</u>
	Public support percentage from 2013					16	<u>%</u>
Sec	ction D. Computation of Inves	tment income	e Percentag <u>e</u>				
	Investment income percentage for 201	•				17	<u>%</u>
	Investment income percentage from 2					18	<u>%</u>
19a	33 1/3% support tests - 2014. If the						
	more than 33 1/3%, check this box an	d stop here. The	organization qua	lifies as a publicly	supported organiz	ation	▶□
b	33 1/3% support tests - 2013. If the	organization did n	ot check a box or	line 14 or line 19a	a, and line 16 is m	ore than 33 1/3%,	and
	line 18 is not more than 33 1/3%, chec						
20	Private foundation. If the organization	did not check a	box on line 14, 19	a, or 19b, check t			
3202	23 09-17-14				Sci	nedule A (Form 99	0 or 990-EZ) 2014

Part IV | Supporting Organizations

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

Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No" describe in part vi how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in part vi how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.
- b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in part VI when and how the organization made the determination.
- Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)
 (B) purposes? If "Yes," explain in part vi what controls the organization put in place to ensure such use.
- 4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked 11a or 11b in Part I, answer (b) and (c) below.
- b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in part y₁ what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in part vi, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document).
- b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations; (b) individuals that are part of the charitable class benefited by one or more of its supported organizations; or (c) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- b Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in part Vi.
- c Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in part VI.
- Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer (b) below.
- b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

			Ye	5	No
	1				
	2				_
	3a				
	_ 3b	1		1	
	_3c	1		+	
	_4a	+		+	
				l	
	4b	t		t	1 .
				ĺ	
	4c	+	_	4	
	5a			L	
	5b	ĺ		l	
	5c	İ		İ	
	6_	L			
	7_	L		L	
	8	L		L	
			•		
	9a			L	
	9b				
	9c				
	10a				
99	10b 00 or 99	0-	EZ)	20	<u> </u>

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of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.

ra	rt V Type III Non-Functionally Integrated 509(a)(3) Supporti			<u> </u>
1	Check here if the organization satisfied the Integral Part Test as a qualifying	ing trust or	Nov. 20, 1970. See instru	ctions. All
	other Type III non-functionally integrated supporting organizations must o	complete S	ections A through E.	
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or		· · ·	
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7	- "	
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8	-	
Secti	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
а	Average monthly value of securities	1a		
þ	Average monthly cash balances	1b		
С	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
e	Discount claimed for blockage or other			
	factors (explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount,			
	see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	· ·	
6	Multiply line 5 by .035	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
ecti	on C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3	4		
5	Income tax imposed in prior year	5		
	Distributable Amount. Subtract line 5 from line 4, unless subject to			· · · · · · · · · · · · · · · · · · ·
	emergency temporary reduction (see instructions)	6		

Schedule A (Form 990 or 990-EZ) 2014

Pai	Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)						
Sect	ion D - Distributions			Current Year			
1	Amounts paid to supported organizations to accomplish ex						
2	Amounts paid to perform activity that directly furthers exem						
	organizations, in excess of income from activity						
3	Administrative expenses paid to accomplish exempt purpose	ns					
4	Amounts paid to acquire exempt-use assets						
_5	Qualified set-aside amounts (prior IRS approval required)						
6	Other distributions (describe in Part VI). See instructions.						
7	Total annual distributions. Add lines 1 through 6.						
8	Distributions to attentive supported organizations to which	the organization is responsiv	e				
	(provide details in Part VI). See instructions.						
9	Distributable amount for 2014 from Section C, line 6						
10	Line 8 amount divided by Line 9 amount	1					
		(i)	(ii)	(iii)			
Secti	on E - Distribution Allocations (see instructions)	Excess Distributions	Underdistributions	Distributable			
_	Distributed to an example of the control of the con		Pre-2014	Amount for 2014			
1	Distributable amount for 2014 from Section C, line 6						
2	Underdistributions, if any, for years prior to 2014						
3	(reasonable cause required-see instructions)						
a	Excess distributions carryover, if any, to 2014:						
<u>a</u>		· · · · · · · · · · · · · · · · · · ·					
		·					
d							
	From 2013	,					
	Total of lines 3a through e						
	Applied to underdistributions of prior years						
	Applied to 2014 distributable amount						
ī	Carryover from 2009 not applied (see instructions)						
三	Remainder. Subtract lines 3g, 3h, and 3i from 3f.						
4	Distributions for 2014 from Section D,						
	line 7: \$						
a	Applied to underdistributions of prior years						
b	Applied to 2014 distributable amount						
c	Remainder. Subtract lines 4a and 4b from 4.						
5	Remaining underdistributions for years prior to 2014, if						
	any. Subtract lines 3g and 4a from line 2 (if amount						
	greater than zero, see instructions).						
6	Remaining underdistributions for 2014. Subtract lines 3h						
	and 4b from line 1 (if amount greater than zero, see						
	instructions).						
7	Excess distributions carryover to 2015. Add lines 3j						
	and 4c.						
	8 Breakdown of line 7:						
a_							
b							
	Excess from 2013						
	Excess from 2014						
	EXCESS ITOTAL ECT 14	1					

Schedule A (Form 990 or 990-EZ) 2014

							
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		_					
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		<u> </u>					
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Schedule B (Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Schedule of Contributors

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

2014 2014

Name of the organization

Employer identification number

	RESULTS EDUCATIONAL FUND, INC.	95-3747267					
Organization type (chec	ok one):						
Filers of:	Section:						
Form 990 or 990-EZ	X 501(c)(3) (enter number) organization	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						
	on is covered by the General Rule or a Special Rule. 1(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Ru	ule. See instructions.					
General Rule							
-	ation filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling any one contributor. Complete Parts I and II. See instructions for determining a contributor	• •					
Special Rules							
sections 509(a) any one contrib	ation described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support (1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a butor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amou -EZ, line 1. Complete Parts I and II.	, or 16b, and that received from					
year, total conti	ation described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from ributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educ of cruelty to children or animals. Complete Parts I, II, and III.						
year, contribution is checked, ent purpose. Do no	ation described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from ons exclusively for religious, charitable, etc., purposes, but no such contributions totaled moter here the total contributions that were received during the year for an exclusively religious of the parts unless the General Rule applies to this organization because it able, etc., contributions totaling \$5,000 or more during the year	nore than \$1,000. If this box s, charitable, etc., t received <i>nonexclusively</i>					
but it mus t answer "No"	on that is not covered by the General Rule and/or the Special Rules does not file Schedule I on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its F	•					

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

KESOT.	TS EDUCATIONAL FUND, INC.	9.	5-3747267
Part I	Contributors (see instructions). Use duplicate copies of Part I if	additional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$ 24,555,971.	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2		\$\$\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Complete Part II for noncash contributions.)
23452 11-05-	14	Schedule B (Form	990, 990-EZ, or 990-PF) (2014)

423452 11-05-14

Employer identification number

RESULTS EDUCATIONAL FUND, INC.

95-3747267

Part II	Noncash Property (see instructions). Use duplicate copies of F	Part II if additional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
==		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. rom Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. om art I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_		\$	
(a) No. rom art i	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
-		\$	
(a) lo. om art I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
: :		 	

ame of organ	S EDUCATIONAL FUND. TI		Employer identification number				
ESULTS Part III	EDUCATIONAL FUND, II						
art III	FYCH ISIDAID ICIIMIUUS, CHAIHADIG, CLU., CU	NC.	95-3747267				
	the year from any one contributor. Complete	columns (a) through (e) and the following	section 501(c)(7), (8), or (10) that total more than \$1,000 fing line entry. For organizations				
	completing Part III, enter the total of exclusively religion. Use duplicate copies of Part III if addition	ous, charitable, etc., contributions of \$1,000 or les nal space is needed.	ss for the year. (Enter this info. once.)				
a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
Part I		(5) 555 51 811	(c) Description of now girt is field				
-			200				
_							
-		6-3 Thursday of 180					
	(e) Transfer of gift						
	Transferee's name, address, a	and ZIP + 4	Relationship of transferor to transferee				
-	· · · · · · · · · · · · · · · · · · ·						
-							
-\ N a							
) No. rom Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
airi							
-			_				
	(e) Transfer of gift						
	(०) गंबावदा ज श्राह						
\vdash	Transferee's name, address, a	Relationship of transferor to transferee					
-							
) No.		<u> </u>					
rom art I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
_							
— J —			_				
Ĺ							
	(e) Transfer of gift						
ĺ	Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee						
	Transferee S flame, address, al	IIU AII' T T	Relationship of transferor to transferee				
_							
_	<u> </u>						
No.	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				

- 1		(a) Transfer of sift	<u> </u>
—— I	 		
	 <u>-</u>		
I WILL	 		

(e) Transfer of gift

	Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee
ĺ		
I		
l		

SCHEDULE D

Department of the Treasury Internal Revenue Service

(Form 990)

Supplemental Financial Statements

Complete if the organization answered "Yes" to Form 990,
Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

Attach to Form 990.

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

Open to Public Inspection

Name of the organization

Employer identification number

OMB No. 1545-0047

_	RESULTS EDUCATIONAL FUND, INC.	95-3747267
Pa	ort I Organizations Maintaining Donor Advised Funds or Other Similar Funds	or Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, line 6.	
	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	
2	Aggregate value of contributions to (during year)	
3	Aggregate value of grants from (during year)	
4	Aggregate value at end of year	 -
5	Did the organization inform all donors and donor advisors in writing that the assets held in donor advised	funds
-	are the organization's property, subject to the organization's exclusive legal control?	
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be us	
•	for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose of	
	impermissible private benefit?	
Pa	rt II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Par	+ IV line 7
1		t iv, mie 7.
•		
		cally important land area
		ed historic structure
	Preservation of open space	
2	Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of	a conservation easement on the last
	day of the tax year.	
		Held at the End of the Tax Year
a	1144	
D	Total acreage restricted by conservation easements	
C	(4)	
ď	Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure	
	listed in the National Register	
3	Number of conservation easements modified, transferred, released, extinguished, or terminated by the o	rganization during the tax
	year -	
4	Number of states where property subject to conservation easement is located	
5	Does the organization have a written policy regarding the periodic monitoring, inspection, handling of	
_	violations, and enforcement of the conservation easements it holds?	
6	Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements duri	
7	Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the	
8	Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)	
_	and section 170(h)(4)(B)(ii)?	Yes L No
9	In Part XIII, describe how the organization reports conservation easements in its revenue and expense st	
	include, if applicable, the text of the footnote to the organization's financial statements that describes the	organization's accounting for
Б	conservation easements.	
Pal	rt III Organizations Maintaining Collections of Art, Historical Treasures, or Oth	er Similar Assets.
	Complete if the organization answered "Yes" to Form 990, Part IV, line 8.	
1a	If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement	
	historical treasures, or other similar assets held for public exhibition, education, or research in furtherance	e of public service, provide, in Part XIII,
	the text of the footnote to its financial statements that describes these items.	
b	If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement ar	
	treasures, or other similar assets held for public exhibition, education, or research in furtherance of public	service, provide the following amounts
	relating to these items:	
	(i) Revenue included in Form 990, Part VIII, line 1	> \$
	(ii) Assets included in Form 990, Part X	
2	If the organization received or held works of art, historical treasures, or other similar assets for financial ga	ain, provide
	the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:	
а	Revenue included in Form 990, Part VIII, line 1	> \$
b	Assets included in Form 990, Part X	> \$

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. 432051 10-01-14

Schedule D (Form 990) 2014

	nedule D (Form 990) 2014 RESULTS	EDUCATION	IAL FUND,	INC.		9!	5-37 <u>4</u> 72	67	Page 2
Pa	art III Organizations Maintaining (Collections of A	rt, Historical	Treasures,	or Other	Similar	Assets/cor	ntinueo	d)
3	Using the organization's acquisition, access	ion, and other recor	ds, check any of ti	he following th	nat are a sig	nificant us	e of its collect	tion ite	ms
	(check all that apply):								
- 8		•		xchange prog					
b		•	e └── Other						
	go.o.a.o.								
4	Provide a description of the organization's of	collections and expla	in how they furthe	r the organiza	tion's exem	pt purpose	in Part XIII.		
5	During the year, did the organization solicit	or receive donations	of art, historical tr	easures, or ot	her similar a	ssets		_	_
Do	to be sold to raise funds rather than to be mart IV Escrow and Custodial Arran	aintained as part of	the organization's	collection?			L Yes	<u> </u>	No
1 0	reported an amount on Form 990, Pa	i gements. Compl at Yulino 21	ete if the organizat	tion answered	I "Yes" to Fo	orm 990, P	art IV, line 9,	or	
12			-11:- 5 . 11 . 12						
ıa	Is the organization an agent, trustee, custod	lian or other interme	diary for contributi	ons or other a	issets not in	cluded		_	_
ь	on Form 990, Part X? If "Yes," explain the arrangement in Part XIII						Yes	L	No
	Tres, explain the arrangement in Part XIII	and complete the fo	nowing table:						
С	Beginning balance					-	<u>A</u> mou	nt	
	Additions during the year					1c			
е	Distributions during the year					1d			
f	Ending balance					1e			
2a	Did the organization include an amount on F	orm 990. Part X. line	21. for escrow or	custodial acc	ount liability		Yes	$\overline{}$	TNA.
b	If "Yes," explain the arrangement in Part XIII.	Check here if the ex	kolanation has bee	n provided in	Part XIII		L 162	F	⊣ No
Pa	rt V Endowment Funds. Complete	f the organization ar	swered "Yes" to F	orm 990, Par	t IV. line 10.				
		(a) Current year	(b) Prior year			Three years	s back (e) Fo	ur vear:	s back
1a	Beginning of year balance					, , , , , , , , , , , , , , , , , , , ,	(0)	J. J. L.	
b	Contributions								
C	Net investment earnings, gains, and losses					_			
d	Grants or scholarships								—
е	Other expenditures for facilities								
	and programs		<u></u>	1					
f	Administrative expenses								
g	End of year balance								
2	Provide the estimated percentage of the curr	ent year end balanc	e (line 1g, column	(a)) held as:					
а	Board designated or quasi-endowment		_%						
	Permanent endowment	%							
C	Temporarily restricted endowment								
	The percentages in lines 2a, 2b, and 2c shou								
3a	Are there endowment funds not in the posses	ssion of the organiza	tion that are held	and administe	ered for the	organizatio	on		
	by:							Yes	No
	(i) unrelated organizations					•••••	3a(i)		
h	(ii) related organizations						3a(ii)		
۵,	If "Yes" to 3a(ii), are the related organizations	listed as required of	n Schedule R?				3b_		
Par	Describe in Part XIII the intended uses of the tVI Land, Buildings, and Equipm	organization's endo	wment funds.						
	Complete if the organization answered		Part IV line 11a 6	Sac Earm 000	Dowt V fire	10			
	Description of property	(a) Cost or ot		t or other		_	1.0.0	1	
	_ open,plan of property	basis (investm		(other)	(c) Accu depred		(d) Boo	k valu	е
1a	Land		50013	(Julion)	uebier	nauon	+		
	Buildings		32	26,260.	4	3,501	28	2,7	50
c	Leasehold improvements	··		,		-,501	- 40	4, /	55.
	Equipment		16	4,427.	8	1,019	. 8	3,4	08
	Other			,,		-, -, -	1	J , I	.
otal.	Add lines 1a through 1e (Column (d) must ed		(column (R) line	100)		$\overline{}$	36	6 1	57

Schedule D (Form 990) 2014

Schedule D (Form 990) 2014 RESULTS ED	UCATIONAL	FUND, INC.	95-3747267 _{Pag}
Part VII Investments - Other Securities.			
Complete if the organization answered "Yes			
(a) Description of security or category (Including name of security)		ue (c) Method of va	luation: Cost or end-of-year market value
1) Financial derivatives			
2) Closely-held equity interests			
3) Other			-
(A)			
(B)			· -
(C)			
(D)		-	
(E)			
(F)			
(G)			
(H)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)			
Part VIII Investments - Program Related.	<u>, </u>		
Complete if the organization answered "Yes	" to Form 990. Part	IV. line 11c. See Form 990 Pa	art X line 13
(a) Description of investment	(b) Book vali	ue (c) Method of val	uation: Cost or end-of-year market value
(1)			
(2)			 -
(3)			
(4)			
(5)			-
(6)			
(7)	 	· · · · · · · · · · · · · · · · · · ·	
(8)	1		
(9)	+		
otal. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)	+		
Part IX Other Assets.			
Complete if the organization answered "Yes"	to Form 000 Dest	N/ line 111 Con Form 000 Po	nuk M. 15
	Description	TV, Inte 11d. See Form 990, Pa	
	Description		(b) Book value
(1)			
(2)		·	
(3)	<u></u>	 -	
(4)			
(5)	_	-	
(6)			
(7)			
(8)			
(9)	451		
otal. (Column (b) must equal Form 990, Part X, col. (B) lir	19 15.)		
Complete if the organization answered "Yes"	to Form 990, Part		90, Part X, line 25.
(a) Description of liability		(b) Book value	
(1) Federal income taxes		105 464	
(2) DEFERRED RENT	E13370E	105,461.	
(3) DEFERRED IMPROVEMENT ALLO	WANCE	335,536.	

1.	(a) Description of liability	(b) Book value	
(1)	Federal income taxes		
(2)	DEFERRED RENT	105,461.	
(3)	DEFERRED IMPROVEMENT ALLOWANCE	335,536.	
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total.	(Column (b) must equal Form 990, Part X, col. (B) line 25.)	440,997.	

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) 2014

SCHEDULE F (Form 990)

Department of the Treasury Internal Revenue Service

Statement of Activities Outside the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16.

Attach to Form 990.

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

2014
Open to Public Inspection

Name of the organization

Employer identification number

RESULTS EDUCATI	ONAL FUN	D, INC.			95-374726	57
Part I General Info	rmation on A	Activities Ou	tside the United States. Comp	lete if the organ	ization answered "	Yes" on
Form 990, Part I	V, line 14b.					
1 For grantmakers. Does	s the organization	n maintain reco	ds to substantiate the amount of its g	rants and other	assistance,	
the grantees' eligibility	for the grants or	assistance, and	the selection criteria used to award th	ne grants or ass	istance? X	Yes No
O For months to the Desir	andle a landon social					
	cribe in Part V the	e organization's	procedures for monitoring the use of i	its grants and o	ther assistance out	side the
United States. 3 Activities per Region. (T	The fellowine Dow					
(a) Region	(b) Number of	(c) Number of	an be duplicated if additional space is			
(a) negion	offices	employees	(d) Activities conducted in region (by type) (e.g., fundraising, program		vity listed in (d)	(f) Total expenditures
	in the region	agents, and	services, investments, grants to		gram service, specific type	for and
		independent contractors	recipients located in the region)		ce(s) in region	investments
	-	in region		0.00111		in region
	1		J			
				ADVOCACY AN	D	
SUB-SAHARAN AFRICA		٥	DROCRAM CERUTORS	ADVOCACY AN		1
DOD DIMERCH MINICA			PROGRAM SERVICES	ON TB & HIV	/AIDS	470,753.
]
	,			ADVOCACY AN	D EDWARTON	
EUROPE	l ol	0	PROGRAM SERVICES	ON THE HIV		1 501 034
				DM 1B & 111V	/AIDS	1,521,234.
	i l					
EAST ASIA & THE				ADVOCACY AN	D EDUCATION	
PACIFIC		0	PROGRAM SERVICES	ON TB & HIV		892,283.
-						032,203.
	l					
				ADVOCACY AN	D EDUCATION	
SOUTH ASIA	0	0	PROGRAM SERVICES	ON TB & HIV	/AIDS	102,181.
					-	
]			ADVOCACY AND	D EDUCATION	
NORTH AMERICA	0	0_	PROGRAM SERVICES	ON TB & HIV.	/AIDS	662,108.
			-		_	
	J.	İ				
ļ						
0 - 0 - 1 - 1 - 1						
3 a Sub-total	- 0	0				3,648,559.
b Total from continuation						
sheets to Part I	- 0	0				0.
c Totals (add lines 3a						
and 3b)		0				3,648,559.

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

Schedule F (Form 990) 2014

Schedule F (Form 990) 2014

95-3747267

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	(h) Description of non-cash	(i) Method of valuation (book, FMV,
)		assistance	assistance	appraisal, other)
			TB ACTION					,
			PROJECT-ADVOCACY AND					
			EDUCATION ON TB &					
		SOUTH ASIA	HIV/AIDS	102,181.	102,181.INT'L WIRE	0		
			TB ACTION					
			PROJECT-ADVOCACY AND					
			EDUCATION ON TB &					
		EUROPE	HIV/AIDS	847,734	INT'L WIRE	0		
			TB ACTION					
			PROJECT-ADVOCACY AND					
		EAST ASIA AND THE	EDUCATION ON TB &			 ,		
		PACIFIC	HIV/AIDS	444,084.	INT'L WIRE	0		
			TB ACTION					
			PROJECT-ADVOCACY AND					
			EDUCATION ON TB &					
	Σ.	SUROPE	HIV/AIDS	101,423.	,423 INT'L WIRE	0.		
			TB ACTION					
			PROJECT-ADVOCACY AND			-		
			EDUCATION ON TB &					
		NORTH AMERICA	HIV/AIDS	662,108.	662,108, INT'L WIRE	0		
			TB ACTION					
			PROJECT-ADVOCACY AND					
	<i>S</i>	3UB-SAHARAN	EDUCATION ON TB &					
		AFRICA	HIV/AIDS	241,283.	241,283,INT'L WIRE	ö		
			TB ACTION					!
			PROJECT-ADVOCACY AND					
			EDUCATION ON TB &					
		SUROPE	HIV/AIDS	572,077.	572,077, INT'L WIRE	.0		
			TB ACTION					
			PROJECT-ADVOCACY AND					
	<u> </u>	EAST ASIA AND THE	EDUCATION ON TB &					
	P.	PACIFIC	HIV/AIDS	448,199.	448,199, INT'L WIRE	0		
2 Enter total number of r	recipient organization	is listed above that are i	Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax exempt by	foreign country,	recognized as tax-ex	empt by		
	he grantee or counse	has provided a section	the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter			A		6
3 Enter total number of other organizations or entities	other organizations or	r entities				•		

30

432072 09-24-14

Schedule F (Form 990) 2014

Page 2		of , FMV, ner)					
ď		(i) Method of valuation (book, FMV, appraisal, other)					
	((h) Description of non-cash assistance					
47267	90), Part II, line 1	(g) Amount of non-cash assistance	0.				
95-3747267	Schedule F (Form 9	(f) Manner of cash disbursement	74,604,INT'L WIRE				
	United States.	(e) Amount of cash grant	74,604.				
RESULTS EDUCATIONAL FUND, INC.	Continuation of Grants and Other Assistance to Organizations or Entitles Outside the United States. (Schedule F (Form 990), Part II, line 1)	(d) Purpose of grant	TB ACTION PROJECT-ADVOCACY AND EDUCATION ON TB & HIV/AIDS				
rs EDUCATION	ssistance to Organiza	(c) Region	SUB-SAHARAN AFRICA				
RESUL	Grants and Other	(b) IRS code section and EIN (if applicable)	91 14				V
<u>ٿ</u>	Part II Continuation of	1 (a) Name of organization					

RESULTS EDUCATIONAL FUND, INC.

Schedule F (Form 990) 2014

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. 95-3747267

Page 3

Part III can be duplicated if additional space is needed.

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

432073 09-24-14

Schedule F (Form 990) 2014

Foreign Partnerships (see Instructions for Form 8865)

for Form 5713; do not file with Form 990)

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

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

Schedule F (Form 990) 2014

6

SCHEDULE G

(Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

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

OMB No. 1545-0047

Department of the Treasury Open to Public ➤ Attach to Form 990 or Form 990-EZ. Internal Revenue Service Information about Schedule G (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form 990 Inspection Name of the organization Employer identification number RESULTS EDUCATIONAL FUND, INC. 95-3747267 Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17. Form 990 EZ filers are not Part I required to complete this part. Indicate whether the organization raised funds through any of the following activities. Check all that apply. □ Solicitation of non-government grants Internet and email solicitations Solicitation of government grants C Phone solicitations In-person solicitations 2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? □No J Yes b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. (iii) Did fundraiser have custody or control of (v) Amount paid (i) Name and address of individual (vi) Amount paid (iv) Gross receipts to (or retained by) (ii) Activity to (or retained by) or entity (fundraiser) fundraiser from activity organization listed in col. (i) Yes No 3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

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

Schedule G (Form 990 or 990-EZ) 2014

432081 08-28-14

9 Enter the state(s) in which the organization conducts gaming activities:			
a Is the organization licensed to conduct gaming activities in each of these states?		Yes	No No
b If "No," explain:			
10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year'	?	Yes	□ No
b If "Yes," explain:			
432082 08-28-14	Schedule G (Form	990 or 990)-EZ) 2014

36

Schedule G (Form 990 or 990 EZ) 2014 RESULTS EDUCATIONAL FUND, INC.	95-3747267 Page 3
11 Does the organization conduct gaming activities with nonmembers?	
12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed	
to administer charitable gaming?	Yes No
13 Indicate the percentage of gaming activity conducted in:	
a The organization's facility	13a %
b An outside facility	13b %
14 Enter the name and address of the person who prepares the organization's gaming/special events books and record	s:
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 amou	nt
of gaming revenue retained by the third party > \$	
c If "Yes," enter name and address of the third party:	
Name ▶	
Address >	
16 Gaming manager information:	
Name ▶	
Name y	
Gaming manager compensation > \$	
Description of services provided	
Director/officer Employee Independent contractor	
17 Mandatory distributions:	
a is the organization required under state law to make charitable distributions from the gaming proceeds to	
retain the state gaming license?	Yes No
b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in	
organization's own exempt activities during the tax year ▶ \$	
Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v), and Pa	rt III, lines 9, 9b, 10b, 15b,
15c, 16, and 17b, as applicable. Also provide any additional information (see instructions).	
	-
432083 08-28-14 Schedule G	(Form 990 or 990-EZ) 2014

Schedule C	i (Form 990 or 990	EZ) RES	ULTS EDUC	ATIONAL	FUND,	INC.		<u>95-374726</u>	7 Page 4
Part IV	Supplement	al Informatio	N (continued)				-		
				_					
									
							-		
-									
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SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

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

Name of the organization

Employer identification number

OMB No. 1545-0047

RESULTS EDUCATIONAL FUND, INC. 95-3747267 FORM 990, PART III, LINE 4C, PROGRAM SERVICE ACCOMPLISHMENTS: CAMPAIGNS. FORM 990, PART VI, SECTION A, LINE 1: THE EXECUTIVE COMMITTEE SHALL CONSIST OF THE EXECUTIVE COMMITTEE OF RESULTS, INC. THE EXECUTIVE COMMITTEE SHALL HAVE THE SAME POWERS AS THE FULL BOARD AS PROVIDED IN ARTICLE V, EXCEPT FOR AMENDING THE ARTICLES OF INCORPORATION OR BYLAWS, SELECTING AND REMOVING ALL OTHER OFFICERS, AGENTS AND THE EXECUTIVE DIRECTOR OF THE CORPORATION. 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 15: 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

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. 432211 08-27-14

Schedule O (Form 990 or 990-EZ) (2014)

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,

INC.

RESULTS EDUCATIONAL FUND,

Name of the organization

Department of the Treasury Internal Revenue Service

2014

OMB No. 1545-0047

Open to Public Inspection

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

Employer identification number 95-3747267

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 organizations during the tax year. End-of-year assets 9 Total income Ð Legal domicile (state or Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV, line 33. foreign country) Primary activity Name, address, and EIN (if applicable) of disregarded entity Part Part II

Section 512(b)(13) controlled ş entify? Kes × SDUCATIONAL FUND Direct controlling entity RESULTS status (if section Public charity 501(c)(3)) Exempt Code section DISTRICT OF COLUMBIA 501(C)(4) Legal domicile (state or foreign country) SRASSROOTS LOBBY TO END Primary activity TUNGER AND POVERTY Name, address, and EIN of related organization RESULTS, INC. - 52-1411039 WASHINGTON, DC 20005 1101 15TH STREET NW

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

432161 08-14-14 LHA

Schedule R (Form 990) 2014

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Page 2

95-3747267

Schedule R (Form 990) 2014 RESULTS EDUCATIONAL FUND, INC.

General or Percentage managing ownership partner? Yes No (i) Section 512(b)(13) controlled entty? Identification of Related Organizations Taxable as a Corporation or Trust Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year. 3 Percentage ownership 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. Ξ Code V-UBI amount in box 120 of Schedule 20 K-1 (Form 1065) Share of end-of-year assets € Disproportionate Yes allocations? Ξ Share of total income (g)
Share of end-of-year assets Type of entity (C corp, S corp, or trust) ◉ Share of total income (d)
Direct controlling entity Predominant income (related, unrelated, excluded from tax under sections 512-514) **@** Legal domicite (state or foreign country) <u>ত</u> (d)
Direct controlling entity Primary activity (c)
Legal
domicile
(state or
foreign Primary activity Name, address, and EIN of related organization Name, address, and EIN of related organization Ē Part III Part IV

Schedule R (Form 990) 2014

432162 08-14-14

95-3747267

Part V Transactions With Related Organizations Complete if the organization answered "Yes" on Form 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	
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?	s with one or more re	lated organizations listed	In Parts II-1V?	_	2
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	>			-Ta	×
 Gift, grant, or capital contribution to related organization(s) 					×
c Gift, grant, or capital contribution from related organization(s)					: ×
d Loans or loan guarantees to or for related organization(s)				#	: >
A Constant of the second					ا ۵
e Loans of loan guarantees by related organization(s)				<u>1</u>	×
f Dividends from related arranization(s)					
					×
				1g	×
h Purchase of assets from related organization(s)					×
i Exchange of assets with related organization(s)					×
j Lease of facilities, equipment, or other assets to related organization(s)					×
k Lease of facilities, equipment, or other assets from related organization(s)				¥	×
l Performance of services or membership or fundraising solicitations for related organization(s)	anization(s)				×
m Performance of services or membership or fundraising solicitations by related organization(s)	inization(s)				
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	ion(s)			>	
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n Baimhurcamant naid to related even night for any for any					
p neimbu seillen palu to teateu organization(s) for expenses				1p X	
q Kelmbursement paid by related organization(s) for expenses				1 _q	
r Omer transfer of cash or property to related organization(s)				11	×
Other transfer of cash or property from related organization(s)				15 1	×
2 If the answer to any of the above is "Yes," see the instructions for information on w	who must complete th	is line, including covered	information on who must complete this line, including covered relationships and transaction thresholds.		
(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved	panlon	
A RESIII. TO TAIL		100 100		ŀ	1
1	>	.166,602	HOURS WORKED		1
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432163 08-14-14	43	5 5 5 5 5	Schedule F	Schedule R (Form 990) 2014	5

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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.

Schedule F	Suppleme	014	RESULTS	EDUCATIONAL	FUND,	INC.	95-3747267	Page !
Part VII	Suppleme	ental Infor	mation					
	Provide addit	tional inform	ation for respon	ses to questions on Sch	edule R (see	instructions).		
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