Form	990
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EXTENSION ATTACHED

For	m 99	0								OMB No. 1545-0047
- UI		Ū			Drganization 7, or 4947(a)(1) of the					2020
Dep: Inter	artment o rnal Rever	f the Treasury nue Service		 Do not enter social security numbers on this form as it may be made public. Go to www.irs.gov/Form990 for instructions and the latest information. 						Open to Public Inspection
Α	For the	e 2020 calend	lar year, or tax	k year beginn	i ng 9/01	, 2020,	and endin	ig 8/	31	, 20 2021
В		applicable: dress change	c Readworks	s.Inc.					D Employer ide 13-359	ntification number 3812
	Nan		68 Jay St		6				E Telephone nu	
			Brooklyn,						(718)	596-4292
		I return/terminated							(110)	550 4252
	Ame	ended return	F						G Gross receipts a group return for s	
	App	plication pending	Name and add	iress of principal o	fficer: Terry Boy	wman		• •		103 110
			Same As C	C Above				If "No,	subordinates includ attach a list. See i	led? Yes No
	Tax-e	xempt status:	X 501(c)(3)	501(c) () < (insert no.)	4947(a)(1) or	527			
J	Web	site: 🕨 🗤	w.readwor	ks.org				H(c) Group	exemption number	►
κ	Form	of organization:	X Corporation	Trust	Association Other►	L	Year of format	ion: 199	0 M State o	f legal domicile: NY
Pa	art I	Summary	/			ľ				
	1 6	Briefly describ	e the organiza	ation's missio	n or most significan	t activities:Rea	dWorks	is an	educatio	n-technology
		non-prof	it focuse	d on imp	roving reading	ng compreh	ension	that.	through	its digital
ğ	-	platform.	. provide	s researd	ch-based cont	ent, curr	icular	suppo:	rts, and o	other features
'na	-				English Langu					
<u>Vel</u>	2				discontinued its op					ussets.
ട്	3				ing body (Part VI, li					8
°ð	4				of the governing bo					8
ies	5				calendar year 2020					17
<u>iš</u> t	6				ecessary)					0
Activities & Governance	7a 🛛	Total unrelate	d business rev	venue from Pa	art VIII, column (C),	line 12			7 a	
					om Form 990-T, Pa					
					, .	- , -		1	Prior Year	Current Year
	8 (Contributions	and grants (P	art VIII line 1	h)				2,537,597.	2,691,225.
ue					2g)				63,450.	327,166.
Revenue		-			, lines 3, 4, and 7d)				6,269.	5,152.
Be			•		s 5, 6d, 8c, 9c, 10c				1,000.	306.
					nust equal Part VIII	•			2,608,316.	3,023,849.
				÷ .	, column (A), lines		-		1,000,010.	3,023,045.
					column (A), line 4)	-				
		•		-						1 010 200
ses					benefits (Part IX, co				L,621,882.	1,810,308.
nse	16a F	Professional f	undraising fee	s (Part IX, co	lumn (A), line 11e)					
Expens	b 🗌	Total fundraisi	ing expenses	(Part IX, colur	mn (D), line 25) 🕨	24	2,372.			
ш	17 (Other expense	es (Part IX. co	olumn (A), line	es 11a-11d, 11f-24e				627,011.	605,753.
			-		ual Part IX, columr				2,248,893.	2,416,061.
				•	from line 12				359,423.	607,788.
۲ğ			epoi/15051-04							
Net Assets or Fund Balances	20	Total accete /I	Part X line 16	5)					ng of Current Year L, 371, 746.	
ase Bala	20							-	218,591.	<u>1,803,741.</u> 42,867.
et A	21		-						•	•
				. Subtract line	e 21 from line 20			.]	L,153,155.	1,760,874.
Pa	art II	Signature	e Block							
Und	er penalti	es of perjury, I dec	clare that I have ex	amined this return	, including accompanying	schedules and stater	ments, and to	the best of n	ny knowledge and b	elief, it is true, correct, and
com	ipiete. Dec	ciaration of prepar	er (other than offic	er) is based on all	information of which prep	parer has any knowle	uge.			
		►								
Sid	gn	Signature	e of officer					Da	ate	
He	gn ere	Terr	y Bowman					Exec	utive Dire	ector
			print name and title	e						-
		Print/Type pr	eparer's name		Preparer's signature	. 1	Date		Check if	PTIN
D-		Michao	l Schall		Michael Scha	6 2001	7/7/20)22	self-employed	P02024184
Pa					NFARB CPAS LI		.,.,_(son omproyeu	1102024104
r f(He	epare se Onl									2 4026702
-3		Y Firm's address	⊳⊳ 3U/F	IFTH AVE	тэти гг				luurs Fin ⊾ T'	3-4036703

NEW YORK, NY 10016 May the IRS discuss this return with the preparer shown above? See instructions X Yes No

BAA For Paperwork Reduction Act Notice, see the separate instructions.

Phone no. (212) 268-2800

(Rev. January 2020) Department of the Treasury Internal Revenue Service

Application for Automatic Extension of Time To File an Exempt Organization Return

OMB No. 1545-0047

01

► File a separate application for each return.

Go to www.irs.gov/Form8868 for the latest information.

Electronic filing (e-file). You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit *www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits.*

Automatic 6-Month Extension of Time. Only submit original (no copies needed).

All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Type or print		13-3593812
File by the	Number, street, and room or suite number. If a P.O. box, see instructions.	
due date for filing your	68 Jay Street #426	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions.	
instructions.	Brooklyn, NY 11201	

Enter the Return Code for the return that this application is for (file a separate application for each return)

Application Is For		Application Is For	Return Code
Form 990 or Form 990-EZ	01	Form 990-T (corporation)	07
Form 990-BL	02	Form 1041-A	08
Form 4720 (individual)	03	Form 4720 (other than individual)	09
Form 990-PF	04	Form 5227	10
Form 990-T (section 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

٠	The books are in the care of ►	Kathy	Bloomfield

	Telephone No. ► (718)	596-4292	Fax No. ► <u>(718)</u> 5	96-4769
•	If the organization does r	not have an office or place of busi	ness in the United States.	check this box

•	If the organization does not have an office or place of business in the United States, check this box
•	If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) . If this is for the whole group,
	check this box ► . If it is for part of the group, check this box ► and attach a list with the names and TINs of all members
	the extension is for.

1	I request an automatic 6-month extension of time until	7/15	, 20 <u>22</u>	, to file the exempt organization return
	for the organization named above. The extension is	for the organiz	zation's return	for:

calendar year 20
 or

Change in accounting period

	► X	tax year beginning	<u>9/01</u>	, 20 <u>20</u>	_, and ending	<u> 8/3</u>	<u>1</u> , 20	<u>21</u> .			
2	If the	ax year entered in line	e 1 is for less	than 12 mor	nths, check reas	on:	Initial return		Final retu	rn	

3a If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions	3a	\$ 0.
b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit	3b	\$ 0.
c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions	3c	\$ 0.

Caution: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

BAA For Privacy Act and Paperwork Reduction Act Notice, see instructions.

Form 8868 (Rev. 1-2020)

Forn	n 990 (ä	2020)	Readworks,I	nc.				-	13-3	59381	L2	Pa	age 2
Pa	tIII		ement of Progra										
						to any line in this	Part III						. Х
1	-	-	ibe the organization	n's miss	sion:								
	<u>See</u>	<u>Sche</u>	dule_0										
	Did th	0.01000	ization undertake on	v cianifi	ant program convi	and during the year	which word n	at listed on the prior					
2			ization undertake an 990-EZ?								Vac	v	Na
			ribe these new servi							·· 🛛	Yes	X	No
3						ant changes in how	it conducts	, any program servic	۵ς?		Yes	v	No
3			ribe these changes of			ant changes in now	in conducts,		031	·· 🗋	163	Λ	NO
4			-			ments for each of i	ts three larg	est program services	s as r	neasur	ed by ex	nens	205
	Sectio	on 501((c)(3) and 501(c)(4)	organi	zations are requir	ed to report the an	nount of gran	nts and allocations to	o othe	rs, the	total exp	pense	es,
	and re	evenue	, if any, for each pr	ogram	service reported.								
	(0		、 <i>(</i>	<u>.</u>			<i>.</i> .			<u>^</u>			
4 8	(Code) (Expenses	Ş	2,035,416.	including grants of	f Ş) (Reve	enue	Ş	327	,16	6.)
	<u>See</u>	<u>Sche</u>	<u>dule 0</u>	· ·								·	
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4 0	d Other	r progra	am services (Descri	be on S	chedule O.)								
	(Expe		\$		including grant	sof \$) (Revenue \$)		
4 e	e Total	progra	m service expenses	5 🕨	2,035,	416.							
											Earm	000 /	0000

Form 990 (2020)Readworks, Inc.Part IVChecklist of Required Schedules

Page 3

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

-	990 (2020) Readworks, Inc. 13-359381	2	F	Page 4
Par	t IV Checklist of Required Schedules (continued)			
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	Yes	No 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? <i>If 'Yes,' complete Schedule J</i> .	23	Х	
24 a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No, 'go to line 25a	24a		х
Ł	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
C	Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		
25 a	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		х
t	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		х
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? <i>If 'Yes,' complete Schedule L, Part II</i>	26		x
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? <i>If 'Yes,' complete Schedule L, Part III.</i>	27		х
	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions, for applicable filing thresholds, conditions, and exceptions):			
	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If</i> 'Yes,' complete Schedule L, Part IV	28a		х
Ł	A family member of any individual described in line 28a? If 'Yes,' complete Schedule L, Part IV.	28b		Х
c	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If Yes,' complete Schedule L, Part IV.	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If 'Yes,' complete Schedule M</i>	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If 'Yes,' complete Schedule M</i>	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If 'Yes,' complete Schedule N, Part Il</i> .	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If 'Yes,' complete Schedule R, Part L</i>	33		х
	Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Part II, III, or IV, and Part V, line 1	34		Х
35 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
t	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If 'Yes,' complete Schedule R, Part V, line 2</i>	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If 'Yes,' complete Schedule R, Part V, line 2</i>	36		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If 'Yes,' complete Schedule R, Part VI</i>	37		х
	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O	38	Х	
Par	t V Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V			
			Yes	
1 a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1 c	Х	

Form 990 (2020) Readworks, Inc. 13-359381	2	F	Page 5
Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)		-	
		Yes	No
2.2 Enter the number of employees reported on Form W-3. Transmittal of Wage and Tax State.			
2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 2a 17			
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2 b	Х	
Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3a Did the organization have unrelated business gross income of \$1,000 or more during the year?	3 a		Х
b If 'Yes,' has it filed a Form 990-T for this year? If 'No' to line 3b, provide an explanation on Schedule O	3 b		
4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			v
financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		Х
b If 'Yes,' enter the name of the foreign country►			
See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).	-		X
5 a 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 transaction?	5 b		Λ
c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?	5 c		
6 a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6 a		Х
b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6 b		
7 Organizations that may receive deductible contributions under section 170(c).			
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and			
services provided to the payor?	7 a		Х
b If 'Yes,' did the organization notify the donor of the value of the goods or services provided?	7 b		
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file	_		v
Form 8282?	7 c		Х
d If 'Yes,' indicate the number of Forms 8282 filed during the year	_		V
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7 f		Х
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7 g		
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a	<i>'</i> 9		
Form 1098-C?	7 h		
8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring			
organization have excess business holdings at any time during the year?	8		
9 Sponsoring organizations maintaining donor advised funds.			
a Did the sponsoring organization make any taxable distributions under section 4966?	9 a		
b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9 b		
10 Section 501(c)(7) organizations. Enter:			
a Initiation fees and capital contributions included on Part VIII, line 12 10a			
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11 Section 501(c)(12) organizations. Enter:			
a Gross income from members or shareholders 11 a			
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)			
12 a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year 12b			
13 Section 501(c)(29) qualified nonprofit health insurance issuers.			
a Is the organization licensed to issue qualified health plans in more than one state?	13a		
Note: See the instructions for additional information the organization must report on Schedule O.			
b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
c Enter the amount of reserves on hand			
14a Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х
b If 'Yes,' has it filed a Form 720 to report these payments? <i>If 'No,' provide an explanation on Schedule O</i>	14b	1	1
15 Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			
excess parachute payment(s) during the year?	15		Х
	16		X
16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		
If 'Yes,' complete Form 4720, Schedule O.			

Part VI Governance, Management, and Disclosure For each 'Yes' response to lines 2 through	1 7b below,	and	for						
a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, c Schedule O. See instructions.	or changes of	on							
Check if Schedule O contains a response or note to any line in this Part VI.			. Х						
Section A. Governing Body and Management									
		Yes	No						
1 a Enter the number of voting members of the governing body at the end of the tax year 1 a If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O. 1 a	8								
b Enter the number of voting members included on line 1a, above, who are independent 1 b	8								
2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		X						
3 Did the organization delegate control over management duties customarily performed by or under the direct supervision									
of officers, directors, trustees, or key employees to a management company or other person?	3		X						
since the prior Form 990 was filed?									
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?									
7 a 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		Х						
b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?			х						
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:									
a The governing body?	8a	Х							
b Each committee with authority to act on behalf of the governing body?		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? <i>If 'Yes,' provide the names and addresses on Schedule Q</i>	e 		Х						
Section B. Policies (This Section B requests information about policies not required by the Inte	rnal Reveni	1	ode.)						
10 - Did the experimentation have level charters branches as efficience?	10 -	Yes	No X						
10 a Did the organization have local chapters, branches, or affiliates?b If 'Yes,' did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure the	10a								
operations are consistent with the organization's exempt purposes?	10b								
11 a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?		Х							
b Describe in Schedule O the process, if any, used by the organization to review this Form 990. See Schedu. 12a Did the organization have a written conflict of interest policy? <i>If 'No,' go to line 13</i>		Х							
b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise	12a	7							
to conflicts?	12b	Х							
c Did the organization regularly and consistently monitor and enforce compliance with the policy? <i>If 'Yes,' describe in Schedule O how this was done</i> SeeSchedule.Q	12c	Х							
13 Did the organization have a written whistleblower policy?		Х							
14 Did the organization have a written document retention and destruction policy?	14	Х							
15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?									
a The organization's CEO, Executive Director, or top management official. See Schedule. 0.		X							
b Other officers or key employees of the organizationSee . Schedule. 0.	15b	Х							
If 'Yes' to line 15a or 15b, describe the process in Schedule O (see instructions). 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a									
taxable entity during the year?			Х						
b If 'Yes,' did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b								
Section C. Disclosure									
17 List the states with which a copy of this Form 990 is required to be filed ►CA_NY									
18 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (S available for public inspection. Indicate how you made these available. Check all that apply.		3)s or	nly)						
X Own website Another's website Image: Construction of the state o									
 19 Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statem the public during the tax year. See Schedule O 	ents available to								
20 State the name, address, and telephone number of the person who possesses the organization's books and records ► Kathy Pleomfield 68 Tay Streat Procklym NV 11201 (718) 596-4292									
Kathy Bloomfield 68 Jay Street Brooklyn NY 11201 (718) 596-4292 BAA TEEA0106L 10/07/20	Form	000	(2020)						

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Form 990 (2020) Readworks, Inc.	13-3593812	Page 7
Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Independent Contractors	Compensated Employe	es, and
Check if Schedule O contains a response or note to any line in this Part VII		L
Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensat	ed Employees	
a Complete this table for all persons required to be listed. Report compensation for the calendar year ending v organization's tax year.		
 List all of the organization's current officers directors trustees (whether individuals or organization) 	ons) regardless of amount of	

 List all of the organization's current officers, directors, trustees (whether individual compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid. uals or organizations), rega dless of amount of

• 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.

See instructions for the order in which to list the persons above.

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

		(C)							
(A) Name and title	(B) Average hours	Pos thar is	ition (do n one bo s both a direct	n offic		а	(D) Reportable compensation from	(E) Reportable compensation from	(F) Estimated amount of other
	per week (list any hours for related organiza- tions below dotted line)	Individual trustee or director	Institutional trustee	Ney employee	employee	Former	the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) Terry Bowman	40								
Executive Dir.	0		Σ	ζ			226,000.	0.	11,106.
(2) Kathy Bloomfield	40								
Dir of Operations	0			_	Х		169,802.	0.	11,031.
(3) Justin Pagano	$-\frac{40}{2}$				v		150 000	0	
Sr. Dir of Engr.	0			_	X		150,086.	0.	6,985.
_(4) Cameron_Swaim UI/UX Software Eng	$-\frac{40}{0}$				Х		143,475.	0.	10,958.
(5) Susanne Nobles	40				A		145,475.	0.	10,950.
Software Engineer	0				Х		142,973.	0.	10,981.
(6) Daria L. Wallach	1								
Chair	0	Х	Σ	Χ			0.	0.	0.
(7) Wilson Neely	1								
Treasurer	0	Х	Σ	Χ			0.	0.	0.
(8) Jamie Beard	1								
Treasurer	0	Х					0.	0.	0.
(9) Drummond C. Bell	1								
Director	0	Х					0.	0.	0.
(10) Cathy James	1								
Director	0	Х					0.	0.	0.
(11) Christopher Linen	1								
Director	0	Х		_			0.	0.	0.
(12) Willard J. Overlock	1						0	0	0
Director	0	Х		_			0.	0.	0.
(13) Howard Schiller Director		х					0.	0.	0
(14) Dr. Joanna Williams	1	Λ					0.	0.	0.
Director	<u>_</u>	х					0.	0.	0.
BAA	TEEA0		10/07/2	0		1	0.	0.	Form 990 (2020)
- <i>,</i> ,,	1 22/10								

Form 990 (2020) Readworks, Inc.

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Pa	t VII Section A. Officers, Directors, Tru	stees, I	Key	En	ıplo	bye	es, a	and	d Highest Com	pensated Empl	loyees	6 (conti	inued)
		(B)			(0	•							
	(A) Name and title	Average hours per week	box	, unle	ess pe	erson directe	than is both pr/trus	h an tee)	(D) Reportable compensation from the organization	(E) Reportable compensation from		(F) ated am	ount
			Individual or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)	related organizations (W-2/1099-MISC)	the o	nsation rganizat d related	ion
		related organiza - tions	ndividual trustee or director	tional	4	mploy	st con yee	er				anizatior	
		below dotted	ruste	l trusi		vee	npens						
		line)	œ	ee			ated						
(15)													
(16)													
(17)													
(18)			-										
(19)			•										
(20)													
(21)													
(22)			•										
(23)			-										
(24)													
(25)													
	Subtotal								832,336.	0.		51,(
	Total from continuation sheets to Part VII, Section Total (add lines 1b and 1c).							•	0. 832,336.	0.		51,0	<u>0.</u> 161
	Total number of individuals (including but not limited							ved					
	from the organization b 5												1
2												Yes	No
3	Did the organization list any former officer, direct on line 1a? If 'Yes,' complete Schedule J for such	or, truste h <i>individu</i>	е, ке al	ey ei	mpio	oyee	e, or	nıgr	nest compensated	employee	. 3		Х
4	For any individual listed on line 1a, is the sum of	reportab	le co	mpe	ensa	tion	and	oth	er compensation	from			
	the organization and related organizations greate such individual										. 4	Х	
5	Did any person listed on line 1a receive or accrue for services rendered to the organization? If 'Yes	e compen ,' <i>comple</i>	satio te Sc	n fr chea	om i lule	any <i>J fo</i>	unre r suc	late	ed organization or erson	individual	. 5		X
Sec	ion B. Independent Contractors												
1	Complete this table for your five highest compensation from the organization. Report compensation	sated inde sation for	epen the c	dent alen	t cor dar <u>y</u>	ntrao year	ctors endii	tha ng v	It received more the vith or within the or	1an \$100,000 of ganization's tax year			
(A) Name and business address					(B) Description of	of services	(Compe	C) Insatic	n				
Mar	go Doolittle 50 Wildwood Lane W	eston,	C	Γ Ο	68	83			Development	: Support			
2	Total number of independent contractors (including b		ted to	o the	ose l	istec	l abo	ve)	who received more	than			
	\$100,000 of compensation from the organization	- 0											

Form 990 (2020) Readworks, Inc.

Part VIII Statement of Revenue

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Par		nent of Revenue	s a response or note to an	v line in this Part VI	П		П
	Check			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
nts nts	1 a Federated	campaigns	1a				
Contributions, Gifts, Grants and Other Similar Amounts		nip dues					
Am Am		ng events					
Giff İlar		rganizations		-			
ns, Simi		grants (contributions) tributions, gifts, grants, and		-			
er		ints not included above					
đ đ		tributions included in	, , , , , , , , , , , , , , , , , , , ,				
nd D		lines 12-1f	1g	2 601 225			
	II TOTAL AU		Business Code	2,691,225.			
Program Service Revenue	2a Contra	<u>ct_Services</u>		217,048.	217,048.		
Rev		ing_Income		110,118.	110,118.		
ice	c	<u></u>		110/1101	110/1101		
Serv	d						
Ĕ	е						
b		program service reven					
Ę	g Total. Add	I lines 2a-2f	····· •	327,166.			
	3 Investmen	t income (including divid	dends, interest, and	5 150			E 150
		•	exempt bond proceeds ►	5,152.			5,152.
	J Royanies		Real (ii) Personal				
	6 a Gross rents			-			
	b Less: rental	expenses 6b					
	c Rental incom	ie or (loss) 6c					
	d Net rental	income or (loss)	· · · · · · · · · · · · · · · · · · ·				
	7 a Gross amour	(i) Sec	curities (ii) Other				
	sales of asse other than ir						
	b Less: cost or	other basis					
	and sales ex						
	c Gain or (loss		►				
	u u	. ,	······································				
Other Revenue	8 a Gross Incom (not includin	e from fundraising events					
ver		ons reported on line 1c).	—				
Be		line 18	8a				
ler	b Less: dire	ct expenses	8b				
ਤੋ	c Net incom	e or (loss) from fundr	aising events 🕨				
	9 a Gross incom	e from gaming activities.					
		line 19	9a	-			
		ct expenses	9b				
			ng activities ►				
	10a Gross sales	of inventory, less allowances	10a				
		t of goods sold	10b				
			of inventory				
s			Business Code				
ng a	11a Miscel	laneous_income	e 900099	306.			306.
scellaneo Revenue	b						
elle eve	c						
Miscellaneous Revenue		evenue					
Σ			· · · · · · · · · · · · · · · · · · ·	500.			
BAA	12 Total reve	nue. See instructions	••••••	3,023,849 .	327,166.	0.	5,458. Form 990 (2020)

Pai	1 990 (2020) Readworks, Inc. tIX Statement of Functional Expense	ses		13-3593	-
Sec	tion 501(c)(3) and 501(c)(4) organizations must com	plete all columns. All oth	ner organizations must co	mplete column (A).	
	Check if Schedule O contains a re	esponse or note to any	line in this Part IX		Х
Do I 6b,	not include amounts reported on lines 7b, 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 for- eign individuals. See Part IV, lines 15 and 16				
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees	245,306.	191,339.	17,171.	36,796
6	Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0.	0.	0.	00,750
7	Other salaries and wages	1,346,892.	1,303,355.	44,356.	-819
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	1,340,052.	1,303,333.	11,000.	015
9	Other employee benefits	109,227.	104,435.	3,847.	945
10	Payroll taxes	108,883.	102,336.	4,184.	2,363
11	Fees for services (nonemployees):	100,000.	102/000.	1/1011	2,000
	Management				
	Legal				
	Accounting				
	Lobbying				
	Professional fundraising services. See Part IV, line 17				
	Investment management fees				
	Other. (If line 11g amount exceeds 10% of line 25, column				
	(A) amount, list line 11g expenses on Schedule 0.5 ch . 0 Advertising and promotion.	504,938.	254,772.	48,917.	201,249
13	Office expenses	3,771.	2,041.	1,134.	596
14	Information technology	1,717.	1,614.	34.	69
15	Royalties				
16	Occupancy				
17	Travel	683.	349.	334.	
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 20	Conferences, conventions, and meetings	7,335.	7,253.		82
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	3,652.	3,433.	140.	79
23		6,605.	6,209.	132.	264
	Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.).	0,000.	0,205.	102.	20
á	Miscellaneous	49,184.	42,652.	5,831.	701
	Curriculum Materials	14,460.	14,460.		
	Bank_Charges	10,975.		10,975.	
	Postage and Shipping	1,253.	59.	1,194.	
	All other expenses	1,180.	1,109.	24.	47
	Total functional expenses. Add lines 1 through 24e	2,416,061.	2,035,416.	138,273.	242,372
	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ► if following SOP 98-2 (ASC 958-720).	, , • • - •	, ,		
• •					Earra 000 (202

Form 990 (2020) Readworks, Inc.

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Form 990 (2020)

Part X Balance Sheet Check if Schedule O contains a response or note to any line in this Part X (A) Beginning of year (B) End of year Cash – non-interest-bearing. 1 1 188,654 151,300. Savings and temporary cash investments..... 628,279. 2 2 862,930. Pledges and grants receivable, net..... 3 3 312,626 544,866. Accounts receivable, net 4 4 5 Loans and other receivables from any current or former officer, director, controlled entity or family member of any of these persons 5 Loans and other receivables from other disqualified persons (as defined under 6 section 4958(f)(1)), and persons described in section 4958(c)(3)(B) 6 7 Notes and loans receivable, net..... 7 Inventories for sale or use..... 8 Assets Prepaid expenses and deferred charges..... 9 9 60 **10a** Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D..... 10 a 679,294 **b** Less: accumulated depreciation..... 10b 9,969. 10 c 670,422. 8,872 Investments – publicly traded securities. 232,158. 11 235.773 11 Investments – other securities. See Part IV, line 11..... 12 12 13 Investments – program-related. See Part IV, line 11..... 13 14 14 Intangible assets..... 15 Other assets. See Part IV, line 11..... 15 1,371,746. 16 1,803,741. 16 Total assets. Add lines 1 through 15 (must equal line 33)..... 17 Accounts payable and accrued expenses 31,981 17 42,867 18 18 Grants payable 19 Deferred revenue 25,000. 19 20 Tax-exempt bond liabilities 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D..... 21 Liabilitie 22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 22 Secured mortgages and notes payable to unrelated third parties 23 23 Unsecured notes and loans payable to unrelated third parties..... 24 161,610 24 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D. 25 25 26 Total liabilities. Add lines 17 through 25..... 218,591 26 42,867. Organizations that follow FASB ASC 958, check here ► Х Fund Balances and complete lines 27, 28, 32, and 33. Net assets without donor restrictions 27 908,155 27 295,874. 1. Net assets with donor restrictions 28 245,000 28 465,000. Organizations that do not follow FASB ASC 958, check here > and complete lines 29 through 33. 5 Capital stock or trust principal, or current funds..... 29 29 Net Assets Paid-in or capital surplus, or land, building, or equipment fund..... 30 30 Retained earnings, endowment, accumulated income, or other funds..... 31 31 32 Total net assets or fund balances..... 32 1,760,874. 1,153,155 Total liabilities and net assets/fund balances. 33 1,371,746. 33 1,803,741.

TEEA0111L 10/07/20

Form	n 990 ((2020)	Readworks, Inc. 13-	359381	2	Pa	ige 12
Par	t XI	Reco	nciliation of Net Assets				
			if Schedule O contains a response or note to any line in this Part XI.				
1	Total	revenue	e (must equal Part VIII, column (A), line 12)	1	3,0	23,8	349.
2	Total	expense	es (must equal Part IX, column (A), line 25)	2	2,4	16,0	061.
3	Reve	nue less	expenses. Subtract line 2 from line 1	3	6	07,7	/88.
4	Net a	assets or	fund balances at beginning of year (must equal Part X, line 32, column (A))	4	1,1	53,1	.55.
5	Net ι	Inrealize	d gains (losses) on investments	5		-	-69.
6			ices and use of facilities	6			
7			xpenses	7			
8			adjustments	8			
9	Othe	r change	es in net assets or fund balances (explain on Schedule O)	9			0.
10	colur	nn (B)).	fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,	10	1,7	60,8	374.
Par	t XII	Finar	icial Statements and Reporting				
		Check	if Schedule O contains a response or note to any line in this Part XII				. П
						Yes	No
1	Acco	unting m	nethod used to prepare the Form 990: Cash X Accrual Other				
		organiz	ation changed its method of accounting from a prior year or checked 'Other,' explain).				
2 a	Were	the org	anization's financial statements compiled or reviewed by an independent accountant?		. 2a		Х
		rate bas	k a box below to indicate whether the financial statements for the year were compiled or review is, consolidated basis, or both: te basis Consolidated basis Both consolidated and separate basis	ed on a			
Ł	Were	the org	anization's financial statements audited by an independent accountant?		. 2b	Х	
	lf 'Ye basis X	, consol	k a box below to indicate whether the financial statements for the year were audited on a separa idated basis, or both: te basis Consolidated basis Both consolidated and separate basis	ate			
C	: If 'Ye revie	s' to line w, or co	2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit mpilation of its financial statements and selection of an independent accountant?	,	. 2c	Х	
_	on S	chedule					
	Audit	Act and	a federal award, was the organization required to undergo an audit or audits as set forth in the Single I OMB Circular A-133?		. 3a		Х
Ł			e organization undergo the required audit or audits? If the organization did not undergo the required auc plain why on Schedule O and describe any steps taken to undergo such audits		. 3b		
BAA			TEEA0112L 10/19/20		Form	990 ((2020)

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust. Attach to Form 990 or Form 990-EZ

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

OMB	No. 1545-0047
2	020

Open	to	Public
İns	peo	ction

Department of the Treasury Internal Revenue Service
Name of the organization

(E)

Total

	of the organization					Employer identifica					
	dworks,Inc.		·			13-359381					
	I Reason for Public Cha	<u>, , , , , , , , , , , , , , , , , , , </u>	5			1 /	ctions.				
		anization is not a private foundation because it is: (For lines 1 through 12, check only one box.)									
1		A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i) .									
2	A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).)										
3	A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).										
4	A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state:										
5	An organization operated for section 170(b)(1)(A)(iv). (Co	An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.)									
6	A federal, state, or local gov	ernment or governme	ntal unit described in s	ection 1	70(b)(1)	(A)(v).					
7	X An organization that normally r in section 170(b)(1)(A)(vi).	receives a substantial p Complete Part II.)	part of its support from a	governm	ental un	t or from the general pul	blic described				
8	A community trust described	in section 170(b)(1)(A)(vi). (Complete Part I	l.)							
9	An agricultural research organi				oniunctio	on with a land-grant colle	ede				
Ū	or university or a non-land-gra	nt college of agriculture		the nan							
10	An organization that normall from activities related to its e investment income and unre June 30, 1975. See section	exempt functions, sub lated business taxable	ject to certain exception	ns: and	(2) no r	nore than 33-1/3% of i	ts support from gross				
11	An organization organized and operated exclusively to test for public safety. See section 509(a)(4).										
12 a	An organization organized an or more publicly supported on lines 12a through 12d that de Type I. A supporting organization organization(s) the power to re	rganizations describe escribes the type of so on operated, supervise gularly appoint or elect	d in section 509(a)(1) c upporting organization a d. or controlled by its suc	or sectio and com ported c	n 509(a plete lii roanizat)(2). See section 509(a nes 12e, 12f, and 12g. ion(s). typically by giving	(3). Check the box in				
b	complete Part IV, Sections A Type II. A supporting organiz management of the supporting must complete Part IV, Sect	ation supervised or c organization vested in	ontrolled in connection the same persons that c	with its ontrol or	support manage	ed organization(s), by the supported organizat	having control or ion(s). You				
С	Type III functionally integrated organization(s) (see instruction	. A supporting organizat ons). You must comp	ion operated in connection olete Part IV, Sections A	n with, ai A, D, an	nd functio d E.	onally integrated with, its	supported				
d	Type III non-functionally integ functionally integrated. The c instructions). You must com	prognization generally	must satisfy a distribu	nnection tion req	with its s uiremen	supported organization(s) t and an attentiveness) that is not requirement (see				
e		 ation received a writte 	en determination from I	the IRS	that it is	а Туре I, Туре II, Тур	e III functionally				
	Enter the number of supported										
	Provide the following informatio	n about the supported	3 ()	1			i				
((i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	organizat in your g	s the ion listed overning nent?	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)				
				Yes	No						
(A)											
(B)											
(C)											
(D)											

Sec	Section A. Public Support								
begi	ndar year (or fiscal year nning in) ►	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total		
1	Gifts, grants, contributions, and membership fees received. (Do not include any 'unusual grants.)	2,150,379.	1,816,753.	1,951,302.	2,537,597.	2,691,225.	11,147,256.		
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0.		
3	The value of services or facilities furnished by a governmental unit to the organization without charge						0.		
4	Total. Add lines 1 through 3	2,150,379.	1,816,753.	1,951,302.	2,537,597.	2,691,225.			
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						3,315,705.		
6	Public support. Subtract line 5 from line 4						7,831,551.		
Sec	tion B. Total Support	1	1	1		1			
Cale begi	ndar year (or fiscal year nning in) ►	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total		
7	Amounts from line 4	2,150,379.	1,816,753.	1,951,302.	2,537,597.	2,691,225.	11,147,256.		
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	4,235.	5,093.	6,114.	6,269.	5,152.	26,863.		
9	Net income from unrelated business activities, whether or not the business is regularly carried on						0.		
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) See Part VI	4,453.	818.	1,846.	1,000.	306.	8,423.		
	Total support. Add lines 7 through 10						11,182,542.		
12	Gross receipts from related activ	vities, etc. (see ins	structions)			12	1,059,112.		
	First 5 years. If the Form 990 is organization, check this box and			third, fourth, or f	ifth tax year as a	section 501(c)(3)	····· •		
Sec	tion C. Computation of Pu Public support percentage for 20	blic Support P	ercentage						
14 15	Public support percentage for 20 Public support percentage from						70.03%		
	33-1/3% support test–2020. If t	he organization di	id not check the b	oox on line 13, an	d line 14 is 33-1/3	3% or more, checl	70.02 %		
h	and stop here. The organization 33-1/3% support test-2019. If the		5 11	5					
D	and stop here. The organization								
17a	10%-facts-and-circumstances te or more, and if the organization the organization meets the facts	meets the facts-a	nd-circumstances	s test, check this	box and stop here	e. Explain in Part	VI how		
	10%-facts-and-circumstances te or more, and if the organization organization meets the 'facts-an	meets the facts-a d-circumstances'	nd-circumstances test. The organiza	s test, check this ation qualifies as	box and stop here a publicly support	Explain in Part ed organization.	VI how the		
	Private foundation. If the organi	zation did not che	eck a box on line	13, 16a, 16b, 17a					
BAA					Sc	hedule A (Form 9	90 or 990-EZ) 2020		

Schedule A (Form 990 or 990-EZ) 2020	Readworks, Inc
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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.)

Page 2

13-3593812

D. I.I.

Readworks, Inc.

Part III Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Sec	tion A. Public Support						
-	dar year (or fiscal year beginning in) ►	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
1	Gifts, grants, contributions, and membership fees						
	received. (Do not include any 'unusual grants.')						
2	Gross receipts from admissions, merchandise sold or services						
	performed, or facilities						
	furnished in any activity that is related to the organization's						
2	tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513.						
4	Tax revenues levied for the						
	organization's benefit and either paid to or expended on						
5	its behalf The value of services or						
•	facilities furnished by a governmental unit to the						
	organization without charge						
	Total. Add lines 1 through 5						
/a	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						
8	Public support. (Subtract line						
	7c from line 6.)						
	tion B. Total Support	1	1		1		
	dar year (or fiscal year beginning in) ►	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
	Amounts from line 6						
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources.						
b	Unrelated business taxable						
	income (less section 511 taxes) from businesses						
	acquired after June 30, 1975						
	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						
10	Part VI.)						
15	Total support. (Add lines 9, 10c, 11, and 12.)						
	First 5 years. If the Form 990 is organization, check this box and	stop here		third, fourth, or f	ifth tax year as a	section 501(c)(3)	►
-	tion C. Computation of Pul						
	Public support percentage for 20						00 0
16 500	Public support percentage from : tion D. Computation of Inv					16	0,0
			J		ump (f)		010
17 18	Investment income percentage f Investment income percentage f			-			0 00
	33-1/3% support tests—2020. If t						
a	is not more than 33-1/3%, check	this box and sto	p here. The organ	ization qualifies a	as a publicly supp	orted organization	▶
b	33-1/3% support tests – 2019. If t						
	line 18 is not more than 33-1/3%		•				
20	Private foundation. If the organiz	zation did not che	eck a box on line '	14.19a.or19b c	check this box and	see instructions	▶

Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

Yes No Are all of the organization's supported organizations listed by name in the organization's governing documents? 1 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. 1 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 2 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 lines 3b and 3c below. 3a **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. 3b c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If 'Yes,' explain in **Part VI** what controls the organization put in place to ensure such use. 3c 4a Was any supported organization not organized in the United States ('foreign supported organization')? If 'Yes' and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below. 4a **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. Δh **c** Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If 'Yes,' explain in **Part VI** what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes. 4c 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If 'Yes,' answer lines 5b and 5c 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). 5a 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? 5b c Substitutions only. Was the substitution the result of an event beyond the organization's control? 5c Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one 6 or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of 6 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 (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If 'Yes,' complete Part I of Schedule L (Form 990 or 990-EZ). 7 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If 'Yes,' 8 complete Part I of Schedule L (Form 990 or 990-EZ). 8 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. 9a **b** Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? *If 'Yes,' provide detail in Part VI.* 9b c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? *If 'Yes,' provide detail in Part VI.* 9c 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If 'Yes,' answer line 10b below. 10a **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.). 10b

Part IV Supporting Organizations (continued)

		Yes	No
11 Has the organization accepted a gift or contribution from any of the following persons?			
a A person who directly or indirectly controls, either alone or together with persons described in lines 11b and 11c below,			
the governing body of a supported organization?	11a		
b A family member of a person described in line 11a above?	11b		
C A 35% controlled entity of a person described in line 11a or 11b above? If 'Yes' to line 11a, 11b, or 11c, provide detail in Part VI.	11c		
Section B. Type I Supporting Organizations			

Section B. Type I Supporting Organizations

- 1 Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? If 'No,' describe in **Part VI** how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.
- 2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If 'Yes,' explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.

Section C. Type II Supporting Organizations

Yes No Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If 'No,' describe in **Part VI** how control or management of the 1 1 supporting organization was vested in the same persons that controlled or managed the supported organization(s).

Section D. All Type III Supporting Organizations

		Yes	no
d the organization provide to each of its supported organizations, by the last day of the fifth month of the ganization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax ear, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
ganization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
ere any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported ganization(s) or (ii) serving on the governing body of a supported organization? If <i>No</i> , ' explain in Part VI how			
e organization maintained a close and continuous working relationship with the supported organization(s).	2		
reason of the relationship described in line 2, above, did the organization's supported organizations have a significant pice in the organization's investment policies and in directing the use of the organization's income or assets at			
this regard.	3		
	ganization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax ar, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the ganization's governing documents in effect on the date of notification, to the extent not previously provided? ere any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported ganization(s) or (ii) serving on the governing body of a supported organization? <i>If 'No,' explain in Part VI how e organization maintained a close and continuous working relationship with the supported organization(s).</i> reason of the relationship described in line 2, above, did the organization's supported organization's income or assets at times during the tax year? <i>If 'Yes,' describe in Part VI the role the organization's supported organization's played</i>	 ganization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax ar, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the ganization's governing documents in effect on the date of notification, to the extent not previously provided? 1 ere any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported ganization(s) or (ii) serving on the governing body of a supported organization? <i>If 'No,' explain in Part VI how e organization maintained a close and continuous working relationship with the supported organization(s).</i> reason of the relationship described in line 2, above, did the organization's supported organization's income or assets at times during the tax year? <i>If 'Yes,' describe in Part VI the role the organization's supported organizations played</i> 	 ganization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax ar, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the ganization's governing documents in effect on the date of notification, to the extent not previously provided? are any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported ganization(s) or (ii) serving on the governing body of a supported organization? <i>If 'No,' explain in Part VI how</i> e organization maintained a close and continuous working relationship with the supported organization(s). reason of the relationship described in line 2, above, did the organization's supported organization's income or assets at times during the tax year? <i>If 'Yes,' describe in Part VI the role the organization's supported organization's played</i>

Section E. Type III Functionally Integrated Supporting Organizations

- 1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).
 - The organization satisfied the Activities Test. Complete line 2 below. а
 - The organization is the parent of each of its supported organizations. Complete line 3 below. h
 - The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instructions). С

2 Activities Test. Answer lines 2a and 2b below.

- a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If 'Yes,' then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.
- b Did the activities described in line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If 'Yes,' explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.
- 3 Parent of Supported Organizations. Answer lines 3a and 3b below.
- a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? If 'Yes' or 'No,' provide details in Part VI.
- **b** Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If 'Yes,' describe in Part VI the role played by the organization in this regard.

Yes

1

2

No

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Schedule A (Form 990 or 990-EZ) 2020 Readworks, Inc.

 Part V
 Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

ection A – Adjusted Net Income	(B) Current Yea (optional)		
1 Net short-term capital gain	1		(op nonen)
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		
Section B – Minimum Asset Amount		(A) Prior Year	(B) Current Yea (optional)
1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c 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 0.015 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 0.035.	6		
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8		
Section C – Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, column A)	1		
2 Enter 0.85 of line 1.	2		
3 Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4 Enter greater of line 2 or line 3.	4		
5 Income tax imposed in prior year	5		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6		

7 Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).

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Schedule A (Form 990 or 990-EZ) 2020

Par		upporting Organiza	ations (continue	d)	
Sec	tion D – Distributions				Current Year
1	Amounts paid to supported organizations to accomplish exempt pu	irposes		1	
2	Amounts paid to perform activity that directly furthers exempt purposes in excess of income from activity	IS,	2		
3	Administrative expenses paid to accomplish exempt purposes of su		3		
4	Amounts paid to acquire exempt-use assets	4			
5	Qualified set-aside amounts (prior IRS approval required – provide	e details in Part VI)		5	
6	Other distributions (describe in Part VI). See instructions.	•		6	
7	Total annual distributions. Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to which the organizati in Part VI). See instructions.	ion is responsive (provide	e details	8	
9	Distributable amount for 2020 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount			10	
Sec	tion E – Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributic Pre-2020	ons	(iii) Distributable Amount for 2020
1	Distributable amount for 2020 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2020 (reasonable cause required – <i>explain in Part VI</i>). See instructions.				
3	Excess distributions carryover, if any, to 2020				
а	From 2015				
b	From 2016				
С	From 2017				
d	From 2018				
е	PFrom 2019				
1	Total of lines 3a through 3e				
g	Applied to underdistributions of prior years				
h	Applied to 2020 distributable amount				
i	Carryover from 2015 not applied (see instructions)				
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2020 from Section D, line 7: \$				
а	Applied to underdistributions of prior years				
	Applied to 2020 distributable amount				
С	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2020, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, <i>explain in Part VI</i> . See instructions.				
6	Remaining underdistributions for 2020. Subtract lines 3h and 4b from line 1. For result greater than zero, <i>explain in Part VI</i> . See instructions.				
7	Excess distributions carryover to 2021. Add lines 3j and 4c.				
8	Breakdown of line 7:				
a	Excess from 2016				
b	Excess from 2017				
С	Excess from 2018				
d	Excess from 2019				
е	Excess from 2020				

BAA

Schedule A (Form 990 or 990-EZ) 2020

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Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

Part II, Line 10 - Other Income

Part VI

Nature and Source	2020		2019		2018	2017		2016
Total	<u> </u>) <u>6.</u>)6. <u>\$</u>	<u>1,000.</u> 1,000.	<u>\$</u> \$	<u>1,846.</u> 1,846.	<u>\$ 818.</u> \$ 818.	\$ \$	4,453. 4,453.

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service ...

Supplemental Financial Statements ► Complete if the organization answered 'Yes' on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ► Attach to Form 990. ► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047 2020

Open to Public Inspection

Name				Employer identification number
D				12 2502012
Rea Par	adworks, Inc. t Organizations Maintaining Dono	r Advised Funds or Other Sim	ilar Funds or Acc	13-3593812
Par	Complete if the organization answ	vered 'Yes' on Form 990. Part	IV. line 6.	ounts.
		(a) Donor advised funds		unds and other accounts
1	Total number at end of year		(5)	
2	Aggregate value of contributions to (during year).			
3	Aggregate value of grants from (during year).			
4	Aggregate value at end of year			
_				<u> </u>
5	Did the organization inform all donors and dor are the organization's property, subject to the	organization's exclusive legal control?	•	····· Yes No
6	Did the organization inform all grantees, dono for charitable purposes and not for the benefit impermissible private benefit?	rs, and donor advisors in writing that of of the donor or donor advisor, or for a	grant funds can be use any other purpose con	ed only ferring Yes No
Par				
	Complete if the organization answ			
1	Purpose(s) of conservation easements held by	<u> </u>	•	
	Preservation of land for public use (for examp			rically important land area
	Protection of natural habitat		Preservation of a certif	ied historic structure
~	Preservation of open space			
2	Complete lines 2a through 2d if the organization h last day of the tax year.	ield a qualified conservation contribution	in the form of a conserv	vation easement on the
			H	eld at the End of the Tax Year
i	a Total number of conservation easements			
	b Total acreage restricted by conservation easer			
	Number of conservation easements on a certi			
	d Number of conservation easements included in	a (c) acquired after 7/25/06, and not o	n a historic	
	structure listed in the National Register		2 d	
3	Number of conservation easements modified, trantax year ►	sferred, released, extinguished, or termir	nated by the organizatio	n during the
4	Number of states where property subject to conse	rvation easement is located ►		
5	Does the organization have a written policy re			
	and enforcement of the conservation easemer			
6	Staff and volunteer hours devoted to monitoring, i	nspecting, handling of violations, and ent	forcing conservation eas	sements during the year
7		cting, handling of violations, and enforcir	ng conservation easeme	ents during the year
	►\$			
8	Does each conservation easement reported or and section 170(h)(4)(B)(ii)?	n line 2(d) above satisfy the requireme	ents of section 170(h)(4)(B)(i) Yes No
9	In Part XIII, describe how the organization rep include, if applicable, the text of the footnote t conservation easements.	o the organization's financial statement	nts that describes the	organization's accounting for
Par	t III Organizations Maintaining Colle Complete if the organization answ	ctions of Art, Historical Treası wered 'Yes' on Form 990, Part	ires, or Other Sim IV, line 8.	ilar Assets.
1;	a If the organization elected, as permitted under historical treasures, or other similar assets he Part XIII the text of the footnote to its financia	ld for public exhibition, education, or r	esearch in furtherance	balance sheet works of art, e of public service, provide in
I	b If the organization elected, as permitted under historical treasures, or other similar assets held for following amounts relating to these items:	or public exhibition, education, or researc	h in furtherance of publ	ic service, provide the
	(i) Revenue included on Form 990, Part VIII,			
-	(ii) Assets included in Form 990, Part X			
	amounts required to be reported under FASB	ASC 958 relating to these items:		
	a Revenue included on Form 990, Part VIII, line			
	Assets included in Form 990, Part X			
RAA	For Paperwork Reduction Act Notice, see the	Instructions for Form 990.	TEEA3301L 08/18/20	Schedule D (Form 990) 2020

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued) 3 Using the organization accession, and other records, check any of the following that make significant use of its collection in the collection in the collection in the collection in the collection in the collection in the collection in the collection in the collection in the collection in the collection in the collections and explain how they further the organization's exempt purpose in Part XII. 5 During the year, dd the organization solicit or receive donalors of art, historical treasures, or other same are collection. Image: Collection in the collection is collection in the cognization collection. Image: Collection in the cognization collection in the cognization collection. Image: Collection in the cognization collection in the cognization collection. Image: Collection in the cognization collection in the cognization collection. Image: Collection in the cognization collection in the cognization collection. 6 Image: Collection in the cognization collection in the cognization collection. Image: Collection in the cognization collection in the cognization collection. Image: Collection in the cognization collection. 7 Image: Collection in the cognization collection in the cognization collection. Image: Collection in the cognization collection. Image: Collection in the cognization collection. 8 Image: Collection in the cognization collection in the cognization collection. Image: Collection in the cognization collection. Image: Collection in the cognizat	Schedule D (Form 990) 2020 Readw		is of Art. Histo	orical 1	Freasures, or (Other	13-3593 Similar Asse	-	ontini	Page 2
	3 Using the organization's acquisition	•						•		
b			d 🗌 Loan (or exch:	ange program					
c □ □ □ □ 4 Provide a description of the organizations collections and explain how they further the organization's collection? □ ■										
Proving the secondation of the organization's collections and explain how they further the organization's exempt purpose in Part NII. Surving the year, did the organization solicit or receive donations of art. historical treasures, or other similar assets is ves. No Part IN Escrow and Custodial Arrangements. Complete if the organization answered 'Yes' on Form '990, Part IV, line 9, or reported an amount on Form '990, Part X, line 21. a is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form '990, Part X, line 21. a is the organization angenet in Part XIII and complete the following table: c. Beginning balance. d. d. d.		ations								
5 During the year, did the organization solicit or receive donations of act, historical treasures, or other similar asset: Image: The second custorial and the organization answered 'Yes' on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21. 1 a is the organization an agent, trustee, custorian or other intermediary for contributions or other assets not included or form 990, Part X ? Image: The second custorial intermediary for contributions or other assets not included or form 990, Part X ? 0 bit 'Yes', explain the arrangement in Part XIII and complete the following table: Image: The second custorial include an amount on Form 990, Part X, line 21, for escrew or custorial account liability? Image: The second custorial include an amount on Form 990, Part X, line 21, for escrew or custorial include? Image: The second custorial include an amount on Form 990, Part X, line 21, for escrew or custorial include? Image: The second custorial include an amount on Form 990, Part X, line 21, for escrew or custorial account liability? Image: The second custorial include an amount on Form 990, Part X, line 21, for escrew or custorial include? 1 Endowment Funds, Complete if the organization answered 'Yes' on Form 990, Part IV, line 10. Image: The second custorial include an amount on Form 990, Part X, line 21, 424. 209, 151. 205, 520. 1 Beginning of year balance. 232, 158. 221, 424. 209, 151. 206, 815. 205, 520. 1 Beginning of year balance. 235, 773. 232, 158.	4 Provide a description of the organiz		nd explain how they	/ further	the organization's	exempt	purpose in			
Part IV Escrow and Custodial Arrangements. Complete if the organization answered 'Yes' on Form '990, Part IV, line 9, or reported an amount on Form '990, Part X, line 21. 1 a Is the organization an agent, trustee, custolain or other intermediary for contributions or other assets not included on Form '990, Part X 2. Ives No b If 'Ves', explain the arrangement in Part XIII and complete the following table: Amount Amount c Beginning balance. 1 I Intermediation's and the set of the organization's answered 'Yes' on Form '990, Part X, line 21, for escrow or custodial account liability? Ives No b If 'Yes', explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII. Ives' No b If 'Yes', explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII. Ives' Ives' Part V Endowment Funds. Complete fifthe organization answered 'Yes' on Form '990, Part IV, line 10. Ives' explain the arrangement in Part XIII. Ives' 1 a Beginning of year balance. 2.32, 1.58. 2.21, 4.24. 2.09, 1.51. 2.08, 815. 2.05, 520. 1 C Charter year (b) Prior year (c) Two years back (d) Three years back (e) Four years back 1 a Beginning of year balance. 2.35, 773. 2.32, 1.58. 2.21, 4.24. 2.09, 1.51.	5 During the year, did the organiza	tion solicit or receiv	ve donations of art	t, histor Inganiza	ical treasures, or tion's collection?.	other s	imilar assets	Yes	Г	No
Inte 9, or reported an amount on Form 990, Part X, line 21. 1a is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X, line 21. 1a is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X, line 21. 1a is the organization include an amount on Form 990. Part X, line 21. for escrew or custodial account liability?									J, Par	-
on Form 990, Part X?.	line 9, or reported an a	amount on Forr	n 990, Part X,	line 2	1.				,	
b If Yes, ' explain the arrangement in Part XIII and complete the following table: A addutions during the year. c Beginning balance. 1d d Addutions during the year. 1d 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?	1 a Is the organization an agent, trus on Form 990. Part X?	stee, custodian or c	ther intermediary	for cont	tributions or other	assets	not included	Yes	Г	No
c Beginning balance							Г		L	
d Additions during the year. 1d e Distributions during the year. 1e 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes Part V Endowment Funds. Complete if the organization answered 'Yes' on Form 990, Part IV, line 10. Part V Endowment Funds. Complete if the organization answered 'Yes' on Form 990, Part IV, line 10. (a) Gurrent year (b) Prior year (b) A prior year back (c) Two years back (c) Two years back (d) Three years back (e) Four years back (e) Four years back (f) Grants or scholarships. 232, 158. (f) A daministrative expenditures for facilities and programs. 3, 615. (f) A daministrative expenditures for facilities and programs. 0. (g) Hor year balance. 235, 773. (g) Hor year balance 3				-			A	Amount	t	
e Distributions during the year	c Beginning balance					. 1c				
Image: Section of the explanation include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?	d Additions during the year					. 1 d				
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1 a Beginning of year balance	b If 'Yes,' explain the arrangement	in Part XIII. Check	here if the explan	nation h	as been provided	on Par	t XIII		· · · · L	
1 a Beginning of year balance						000		10		
1 a Beginning of year balance	Part V Endowment Funds. C							1		
b Contributions	1 - Reginning of year balance						-	(e) i		
c Net investment earnings, gains, and losses 3, 615. 10, 734. 12, 273. 336. 3, 295. d Grants or scholarships 0. 0. 0. 0. 0. 0. e Other expenditures or facilities and programs 0. 0. 0. 0. 0. g End of year balance 235, 773. 232, 158. 221, 424. 209, 151. 208, 815. 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment ▶ § g End of year balance § The percentage on lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment ▶ § § g Currenated organizations § § No 3a(0) X (i) Unrelated organizations § 3a(0) X 3a(0) X (ii) Related organizations § Sa(0) X 3b 3b 3b 4 Describe in Part XIII the intended uses of the organization's endowment funds. See Part XIII Part MI Land, Buildings, and Equipment. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (other) (b) Cost		232,138	. 221,4	24.	209,151	•	208,815.		205,	520.
and losses 3, 615. 10, 734. 12, 273. 336. 3, 295. d Grants or scholarships										
d Grants or scholarships		3 615	10 7	34	12 273		336		З	295
e Other expenditures for facilities and programs 0. f Administrative expenses 0. gEnd of year balance 235,773. 232,158. 221,424. 209,151. 208,815. 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment ▶ % b Permanent endowment ▶ % c Term endowment ▶ % mathematication by: % (i) Unrelated organizations % y are there endowment funds not in the possession of the organization that are held and administered for the organization by: % (i) Unrelated organizations % y b If Yes' on line 3a(ii), are the related organizations listed as required on Schedule R? y b Describe in Part XIII the intended uses of the organization's endowment funds. See Part XIII		5,015	. 10,7	54.	12,215	•	550.		,	295.
and programs 0. f Administrative expenses 0. gEnd of year balance 235,773. 232,158. 221,424. 209,151. 208,815. 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment 3 b Permanent endowment 3 3 5 7	'									
g End of year balance 235,773. 232,158. 221,424. 209,151. 208,815. 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment ▶ a Board designated or quasi-endowment ▶ b Permanent endowment ▶ c Term endowment ▶ (i) Unrelated organizations (i) Unrelated organizations							0.			
2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment ▶ % b Permanent endowment ▶ % c Term endowment ▶ % d Sa Are there endowment Images on lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) Unrelated organizations. (ii) Unrelated organizations 3a(i) X b If 'Yes' on line 3a(ii), are the related organization's endowment funds. See Part XIIII Part VI Land, Buildings, and Equipment. See Part XIIII Complete if the organization answered 'Yes' on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (other) (c) Accumulated depreciation depre	f Administrative expenses									
a Board designated or quasi-endowment ▶	2 -						209,151.		208,	815.
b Permanent endowment ►	, ,	-		ne 1g, co	olumn (a)) held as	s:				
c Term endowment ► 8 The percentages on lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) Unrelated organizations (ii) Related organizations (iii) Related organizations (iii) Related organizations (iii) Related organizations (iv) Are the related organizations listed as required on Schedule R? (iv) Land, Buildings, and Equipment. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. (iv) Cost or other basis (b) Cost or other basis (other) (c) Accumulated depreciation (d) Book value (investment) (b) Cost or other basis (other) (c) Accumulated depreciation (d) Book value (d) Book value (d) Equipment (d) Equipment (d) Equipment (d) Equipment (d) Equipment	a Board designated or quasi-endowm		010							
The percentages on lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) Unrelated organizations (ii) Related organizations (iii) Related organization answered 'Yes' on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. (c) Accumulated depreciation (d) Book value depreciation (d) Book value (investment) (b) Cost or other basis (other) (c) Accumulated depreciation (d) Book value (d) Equipment. (e) Cost or cost or cost or cost or cost ore tost ore tost or cost or cost or cost or cost or cos	b Permanent endowment	%								
3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: Yes No (i) Unrelated organizations 3a(i) X (ii) Related organizations 3a(ii) X b If 'Yes' on line 3a(ii), are the related organizations listed as required on Schedule R? 3b 3b 4 Describe in Part XIII the intended uses of the organization's endowment funds. See Part XIII Part VI Land, Buildings, and Equipment. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. (d) Book value Description of property (a) Cost or other basis (b) Cost or other basis (other) (c) Accumulated depreciation b Buildings. 0 0 0 0 c Leasehold improvements. 0 0 0 0 c Leasehold improvements. 0 0 0 0 0 c Leasehold improvements. 0 0 0 0 0 0 0 c Leasehold improvements. 0 0 0 0 0 0 0 other 0 0 0 0 0 0 0 0 0		00								
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(i) Unrelated organizations 3a(i) X (ii) Related organizations 3a(ii) X b If 'Yes' on line 3a(ii), are the related organizations listed as required on Schedule R? 3b 3b 4 Describe in Part XIII the intended uses of the organization's endowment funds. See Part XIII 3b 3b Part VI Land, Buildings, and Equipment. See Part XIII 3b 3b Complete if the organization answered 'Yes' on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. (d) Book value Description of property (a) Cost or other basis (other) (c) Accumulated depreciation (d) Book value 1 a Land. b b b b b c b Buildings. c c c c c c c c Leasehold improvements. 679,294. 670,422. 8,872. e 0 c s,872. Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.) 8,872. 8,872.	3a Are there endowment funds not in t	he possession of the	organization that a	are held	and administered f	or the		Г		
(ii) Related organizations 3a(ii) X b If 'Yes' on line 3a(ii), are the related organizations listed as required on Schedule R? 3b 3b 4 Describe in Part XIII the intended uses of the organization's endowment funds. See Part XIII See Part XIII 3b 3b Part VI Land, Buildings, and Equipment. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. (d) Book value Description of property (a) Cost or other basis (b) Cost or other basis (other) (c) Accumulated depreciation (d) Book value 1 a Land. b Buildings. c Leasehold improvements.								2-(1)	Yes	
b If 'Yes' on line 3a(ii), are the related organizations listed as required on Schedule R?										
4 Describe in Part XIII the intended uses of the organization's endowment funds. See Part XIII Part VI Land, Buildings, and Equipment. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (b) Cost or other basis (other) (c) Accumulated depreciation (d) Book value 1 a Land.	.,									X
Part VI Land, Buildings, and Equipment. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (investment) b Buildings. (d) Book value c Leasehold improvements. 679,294. d Equipment 679,294. e Other 670,422. Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.). 8,872.		-						30		
Complete if the organization answered 'Yes' on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (investment) (b) Cost or other basis (other) (c) Accumulated depreciation (d) Book value 1 a Land.					3. Dee fait	VIII	L			
Description of property (a) Cost or other basis (investment) (b) Cost or other basis (other) (c) Accumulated depreciation (d) Book value 1 a Land			d 'Yes' on Forr	n 990	Part IV line	11a S	See Form 990) Par	t X li [,]	ne 10
1 a Land. b Buildings. b Buildings. c Leasehold improvements. c Leasehold improvements. c Equipment		(a) Co	st or other basis	(b)	Cost or other			-		
b Buildings	1 a Lond		investment)	ba	sis (other)	dep	preciation			
c Leasehold improvements										
d Equipment 679,294. 670,422. 8,872. e Other 70 tal. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.). 8,872.	0									
e Other					670.004		(70 400			070
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)					679,294.		0/0,422.		8	,812.
			orm 990 Part X /	column	(B) line 10c)		•		0	070
		an (a) must equal l	ын 550, ган А, С	corarrint	(le D (F		

Schedule D (Form 990) 2020

Schedule D	(Form 990) 2020	Readworks, Inc.			13-3593812	Page 3
	Investments -	- Other Securities.		N/A		
		e organization answered				
	•	egory (including name of security)	(b) Book value	(c) Method of valuat	ion: Cost or end-of-year marke	t value
• •		sts				
(2) Closely (3) Other	neia equity interes	ol5				
(A)						
(B)						
(C)						
(D)						
(E)						
(F)						
(G)						
<u>(H)</u>						
(l)						
		90, Part X, column (B) line 12.) 🕨		•-		
Part VIII	Investments –	 Program Related. e organization answered 	'Yes' on Form 990	N/A Part IV_line 11c_9	See Form 990 Part	X line 13
	(a) Description of		(b) Book value		n: Cost or end-of-year m	
(1)	(.,		(4)	()		
(2)						
(3)						
(4)						
(5)						
(6)						
(7)						
(8)						
(9)						
(10)	n (h) much a nual Farma (100 Dart V. column (D) line 12)				
Part IX	Other Assets.	190, Part X, column (B) line 13.) 🕨	N/A			
	Complete if the	e organization answered	I 'Yes' on Form 990), Part IV, line 11d. S	See Form 990, Part	X, line 15.
		(a) De	scription		(b) Bo	ook value
(1)						
(2) (3)						
(4)						
(5)						
(6)						
(7)						
(8)						
(9) (10)						
	umn (h) must equa	al Form 990, Part X, column (i	B) line 15)		•	
Part X	Other Liabilitie		<i>b)</i> inte 10.)			
TurtA	Complete if the or	ganization answered 'Yes' on F		le or 11f. See Form 990, F	Part X, line 25.	
1.		(a) Descr	iption of liability		(b) Bo	ok value
	al income taxes					
(2) (3)						
(4)						
(5)						
(6)						
(7)						
(8)						
(9)						
(10) (11)						
	n (h) must squal Form (100 Part Y column (D) line 25)				
		<i>190, Part X, column (B) line 25.</i>) In Part XIII, provide the text of the fo				Incertain
		eck here if the text of the footnote has				

Schedule D (Form 990) 2020 Readworks, Inc.	13-3593812	Page 4
Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue p	er Return.	
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.		
1 Total revenue, gains, and other support per audited financial statements	1 3	,023,780.
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a Net unrealized gains (losses) on investments	-69.	
b Donated services and use of facilities 2b		
c Recoveries of prior year grants		
d Other (Describe in Part XIII.)		
e Add lines 2a through 2d.	2e	-69.
3 Subtract line 2e from line 1.	3 3	,023,849.
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:		·
a Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b Other (Describe in Part XIII.)		
c Add lines 4a and 4b	4c	
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5 3	,023,849.
Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses		<u> </u>
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.	•	
1 Total expenses and losses per audited financial statements	1 2	,416,061.
2 Amounts included on line 1 but not on Form 990, Part IX, line 25:		,
a Donated services and use of facilities		
b Prior year adjustments		
c Other losses.		
d Other (Describe in Part XIII.)		
e Add lines 2a through 2d .	2e	
3 Subtract line 2e from line 1.		,416,061.
4 Amounts included on Form 990. Part IX, line 25, but not on line 1:		,410,001.
a Investment expenses not included on Form 990, Part VIII, line 7b		
b Other (Describe in Part XIII.)		
c Add lines 4a and 4b.	4c	
5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5 2	,416,061.
Part XIII Supplemental Information.		· · · ·

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

Part V. Line 4 - Intended Uses Of Endowment Fund

The Organization maintains a board designated endowment which can be used for general operating purposes upon approval by the board of directors. Any expenditures must be

include a formally adopted plan to replenish the amount in a realistic timeframe.

Part X - FASB ASC 740 Footnote

The Organization does not believe its financial statements include any material,

uncertain tax positions. Tax filings for periods ending August 31, 2018 and later

are subject to examination by applicable taxing authorities.

BAA

Schedule D (Form 990) 2020

SCH	IEDULE J
<u> </u>	000

Compensation Information

OMB No. 1545-0047

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(Form 990) Complete if the organization answered 'Yes' on Form 990, Part IV, line 23. Attach to Form 990. Open to Public Department of the Treasury Internal Revenue Service Inspection Go to www.irs.gov/Form990 for instructions and the latest information. Employer identification number Name of the organization 13-3593812 Readworks, Inc **Questions Regarding Compensation** Part I Yes No 1 a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items. First-class or charter travel Housing allowance or residence for personal use Travel for companions Payments for business use of personal residence Tax indemnification and gross-up payments Health or social club dues or initiation fees Discretionary spending account Personal services (such as maid, chauffeur, chef) **b** If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If 'No,' complete Part III to explain... 1 b Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, 2 trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?..... 2 3 Indicate which, if any, of the following the organization used to establish the compensation of the organization's CEO/ Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III. Compensation committee Written employment contract Х Independent compensation consultant Compensation survey or study Х Form 990 of other organizations Х Approval by the board or compensation committee During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing 4 organization or a related organization: a Receive a severance payment or change-of-control payment? 4a Х **b** Participate in or receive payment from a supplemental nonqualified retirement plan?..... 4b Х c Participate in or receive payment from an equity-based compensation arrangement?..... 4 c Х If 'Yes' to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III. Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9. 5 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of: a The organization?.... 5 a Х **b** Any related organization? 5h Х If 'Yes' on line 5a or 5b, describe in Part III. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of: 6 a a The organization?..... Х **b** Any related organization? 6 b Х If 'Yes' on line 6a or 6b, describe in Part III. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If 'Yes,' describe in Part III..... 7 7 Х Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject 8

to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If 'Yes,' describe in Part III..... 8 If 'Yes' on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)? 9

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

Schedule J (Form 990) 2020

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Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that aren't listed on Form 990, Part VII.

Note: The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

(A) Name and Title		(B) Breakdown	of W-2 and/or 1099-MIS	C compensation			columns(B)(i)-(D)	
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	(C) Retirement and other deferred compensation	(D) Nontaxable benefits		(F) Compensation in column (B) reported as deferred on prior Form 990
Terry Bowman	(i)	200,000.	26,000.	0.	0.	11,106.	<u>237,106</u> .	0.
1 Executive Dir.	(ii)	0.	0.	0.	0.	0.	0.	0.
Justin Pagano	(i)	<u>150,086.</u>	0.	0.	<u> </u>	<u>6,985</u> .	<u> 157,071.</u>	0.
2 Sr. Dir of Engr.	(ii)	0.	0.	0.	0.	0.	0.	0.
Susanne Nobles	(i)	<u>142,973.</u>	<u> </u>	0.	<u> </u>	10,981.	<u> 153,954.</u>	<u> </u>
3 Software Engineer	(ii)	0.	0.	0.	0.	0.	0.	0.
Cameron Swaim	(i)	<u>143,475.</u>	0.	0.	<u> </u>	10,958.	<u> 154,433</u> .	0.
4 UI/UX Software Eng	(ii)	0.	0.	0.	0.	0.	0.	0.
Kathy Bloomfield	(i)	<u>169,802.</u>	<u> </u>	0.	<u>0.</u>	11,031.	<u>180,833</u> .	<u> </u>
5 Dir of Operations	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
6	(ii)							
	(i)							
7	(ii)							
	(i)							
8	(ii)							
	(i)							
9	(ii)							
	(i)							
10	(ii)							
	(i)						+	
11	(ii)							
	(i)		+				+	
12	(ii)							
	(i)		+				+	
13	(ii)							
	(i)		+				+	
14	(ii)							
	(i)		+				+	
15	(ii)							
	(i)		+				+	
16	(ii)							

13-3593812

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury

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

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

OMB No. 1545-0047

Internal Revenue Service
Name of the organization

Readworks, Inc.

Employer identification number 13-3593812

Form 990, Part III, Line 1 - Organization Mission

ReadWorks is an education-technology non-profit focused on improving reading comprehension that, through its digital platform, provides research-based content, curricular supports, and other features that integrate with core English Language Arts (ELA) curricula. In the 2020-2021 school year alone, ReadWorks was used by more than 1 million educators and their millions of students, including those in 93% of the highest-poverty K-8 schools-the population we are most focused on based on our mission.

Form 990, Part III, Line 4a - Program Service Accomplishments

ReadWorks continues to focus on growing and improving our product to impact the millions of users we serve, based on data, learning science, and a deep understanding and empathy for the practical realities faced by teachers and students in classrooms today. In 2020, we established an Educator Advisory Group of 12 diverse educators and we convene quarterly to discuss the ways we can better support their instruction.

We have expanded our content and curriculum offering significantly, adding over 135 new articles to our library, spanning a wide range of diverse topics and interests. We have also added over 300 new human-voice audio files to texts on our site.

ReadWorks launched our new interactive vocabulary activities in spring 2021 in partnership with Wordsmyth. Our Scope & Sequences tool launched in fall 2020 and lets educators plan ahead for a month up to the entire year.

We enhanced and relaunched all of our training resources in the 2020-2021 school year with our new teacher guide to make it easier for teachers to understand both how to

Form 990, Part III, Line 4a - Program Service Accomplishments

informs all of our curricular and technology development.

We have begun or continued partnerships with Amplify, Beable, Microsoft Education, the National Fish and Wildlife Foundation, the International Quilt Museum, Wordsmyth, NYU's BetaEd, Harvard's Opportunity Insights, Digital Promise, and more.

Form 990, Part VI, Line 11b - Form 990 Review Process

The Board of Directors' Finance Committee reviews the 990 along with all audit document for the initial review of the Audit and recommendation for approval by the entire Board of Directors. Each Board Director is provided all audit documents including the 990 for their review and approval recommendation.

Form 990, Part VI, Line 12c - Explanation of Monitoring and Enforcement of Conflicts

Annually, the Board Members are sent the conflict of interest policy and are asked to sign off that they have no conflicts of if they do, to disclose them. If there are conflicts, they are discussed with the ED & Board Chair for resolution

Form 990, Part VI, Line 15a - Compensation Review & Approval Process - CEO & Top Management

The Board Chair & Finance committee review thed ED performance based on specific annual goals. If the goals were achieve they determined a new compensation level (salary & bonus) based on comparables for the role and the financial position of the organization.

Form 990, Part VI, Line 15b - Compensation Review & Approval Process - Officers & Key Employees

The ED reviews the 2 key officers, COO and CAO, performance and proposed compensation with the Board Chair. The Finance Committee may be included in these conversation as is necessary and at the discretion of the Board Chair.

Form 990, Part VI, Line 19 - Other Organization Documents Publicly Available

Organizational documents are available upon request.

Readworks, Inc.

Page 2

Employer identification number

13-3593812

Form	990,	Part	IX,	Line ¹	11g
Other	Fees	s For	Se	rvices	5

	(A)	(B)	(C)	(D)
	Total	 Program <u>Services</u>	lanagement <u>& General</u>	 Fund- raising
Total <u>\$</u>	<u>504,938.</u> 504,938.	\$ <u>254,772.</u> 254,772.	\$ <u>48,917.</u> <u>48,917.</u>	\$ 201,249. 201,249.