Department of the Treasury

Return of Organization Exempt From Income Tax

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

▶ Do not enter social security numbers on this form as it may be made public.

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

Inter	nal Rev	enue Service	▶ Go to www.irs.gov/Form990 for instructions and the land	atest	inform	ation.		Inspection
Α	For th	e 2017 calend	lar year, or tax year beginning $$	g J	UN 3	30,	2018	
В	Check if applicat	sto:	forganization SION FOR LEARNING DISABILITIES OF		D Em	ployer	identific	cation number
	Addr	ess ge THE	C.E.C.					
	Name	ge Doing b	usiness as				54-1	562220
	Initial returr	Numbe	r and street (or P.O. box if mail is not delivered to street address) Room/	/suite	E Tele		numbei	
	Final	DO T	30X 7311					558-9755
	termi ated		own, state or province, country, and ZIP or foreign postal code		G Gros	s receipts		139,280.
	Amer	nded EATE	FAX STATION, VA 22039	i	H(a) Is	this a	group re	
Ē	Appli		and address of principal officer:MARGARET WEISS					? Yes X No
_	pend		X 7311, FAIRFAX, VA 22039					cluded? Yes No
1	Tax-ex		X 501(c)(3)	527				list. (see instructions)
			TEACHINGLD.ORG	_				n number 🕨
								State of legal domicile: VA
	art I			10010	77 70111101			
_	1	5.01010	be the organization's mission or most significant activities: TO PROMO	ЭТЕ	דאיד	EDI	UCAT	TON AND
၁င	Ι'		WELFARE OF STUDENTS WITH LEARNING D					
nar	2		if the organization discontinued its operations or disposed of					
Š	3		ting members of the governing body (Part VI, line 1a)					12
ගී	4		dependent voting members of the governing body (Part VI, line 1b)					12
త	5		of individuals employed in calendar year 2017 (Part V, line 2a)					0
Activities & Governance	6		of volunteers (estimate if necessary)					39
Ę	1 -		d business revenue from Part VIII, column (C), line 12					0.
A			business taxable income from Form 990-T, line 34				1	<u> </u>
_	D	Net unrelated	business taxable income from Form 990-1, line 34	T		or Year		Current Year
		Contributions	and grants (Part VIII line 1h)		EIIC	n i cai	0.	36,982.
ī	8		and grants (Part VIII, line 1h)		1	49	208.	102,034.
Revenue	9		ice revenue (Part VIII, line 2g)				264.	264.
æ	10		come (Part VIII, column (A), lines 3, 4, and 7d)				0.	0.
	11		e (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	-	1	10	472.	139,280.
_	12		- add lines 8 through 11 (must equal Part VIII, column (A), line 12)	-			264.	6,336.
	13		milar amounts paid (Part IX, column (A), lines 1-3)			4,	0.	0,330.
	14	•	to or for members (Part IX, column (A), line 4)	-		3.2	827.	33,208.
Expenses	15		r compensation, employee benefits (Part IX, column (A), lines 5-10)	-		24,	0.	0.
ë	16a		fundraising fees (Part IX, column (A), line 11e)	-			0.	<u></u>
꼾	_b		ing expenses (Part IX, column (D), line 25)		1	02	758.	106,456.
_	17		es (Part IX, column (A), lines 11a-11d, 11f-24e)	-	1	20	849.	146,000.
	1		es. Add lines 13-17 (must equal Part IX, column (A), line 25)	-				
- 0	19	Revenue less	expenses. Subtract line 18 from line 12	+=			623.	-6,720.
SOU				Red	inning (End of Year 501,112.
SSE	20		Part X, line 16)	-		18,		
Net Assets or Fund Ralances	21		g (Part X, line 26)	\vdash		1.0	0.	0. 501,112.
			fund balances. Subtract line 21 from line 20			10,	573.	501,112.
	art II					1 + 0 + 0 0 0	ant of my	Use and holief it is
			I declare that I have examined this return, including accompanying schedules and s					/ Knowledge and Dellel, It is
true	, corre	ct, and complete	Declaration of preparer (other than officer) is based on all information of which pre	eparer	nas any	Kilowiec	ige.	
		Cianatus	e of officer			Date		
Sig	n	100000000000000000000000000000000000000				Date		
He	re	MARC	GARET WEISS, TREASURER					
_		-	print name and title	Ιn	ate		Charl T	PTIN
	_	Print/Type pre		١٥	ulo		Check	
Pai			PHER L. FROST, CPA			1	self-employe	
	parer		FRITZ & COMPANY, P.C.			Firm's	FIN	54-1778447
Use	Only	Firm's addres	4084 UNIVERSITY DR., SUITE 200				E 6	2 501 0202
_			FAIRFAX, VA 22030-6803			Phone	no. 7 0	3-591-9393
Ma	v the l	IRS discuss th	is return with the preparer shown above? (see instructions)					X Yes No

Par	t III Statement of Program Service Accomplishments
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
	TO PROMOTE THE EDUCATION AND GENERAL WELFARE OF STUDENTS WITH LEARNING
	DISABILITIES BY PROVIDING A FORUM, ENCOURAGE INTERACTION AND FOSTERING
	RESEARCH WITHIN THE ACADEMIC ARENA TO PROMOTE EXEMPLARY DIAGNOSTIC AND
	TEACHING PRACTICES. FURTHERMORE, TO ADVOCATE FOR THE EXEMPLARY
2	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?
	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and
	revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$ 52,769. including grants of \$) (Revenue \$)
	THE ORGANIZATION USES JOURNALS, NEWSLETTERS, AND ALERTS TO CONTINUOUSLY
	UPDATE, EDUCATE, AND INFORM BOTH TEACHERS AND HEALTH CARE PROFESSIONALS
	THE MOST CURRENT INFORMATION IN THE EVER CHANGING WORLD OF LEARNING
	DISABILITIES. TO SUPPORT THIS COMMUNICATION, THE ORGANIZATION ALSO
	HOSTS AND MAINTAINS ITS OWN WEBSITE TO HELP COMMUNICATE THE INFORMATION
	TO ALL INTERESTED PARTIES.
4b	(Code:) (Expenses \$ 28,629 . including grants of \$ 6,336 .) (Revenue \$
	THE ORGANIZATION DESIGNS, DEVELOPS, AND HOSTS NATIONAL, STATE AND LOCAL
	CONVENTIONS, AND MEETINGS TO PROVIDE TRAINING AND EDUCATIONAL
	OPPORTUNITIES FOR INDIVIDUALS IN THE AREA OF LEARNING DISABILITIES.
	ONCE SUCH INDIVIDUALS ATTEND THESE EVENTS, WHO ARE USUALLY TEACHERS AND
	HEALTH CARE PROFESSIONALS, THEY ARE BETTER EQUIPPED TO TEACH AND
	UNDERSTAND THE NEEDS OF STUDENTS WITH LEARNING DISABILITIES. YEARLY
	AWARDS AND SCHOLARSHIPS ARE GIVEN DURING THE ANNUAL CONFERENCE TO
	RECOGNIZE INDIVIDUALS THAT SHOW ONGOING COMMITMENT AND EXCELLENCE IN
	THE FIELD OF LEARNING DISABILITIES.
4c	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
4d	Other program services (Describe in Schedule O.)
	(Expenses \$ including grants of \$) (Revenue \$
4e	Total program service expenses ► 81,398.
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Part IV | Checklist of Required Schedules Yes No Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? X If "Yes," complete Schedule A X Is the organization required to complete Schedule B, Schedule of Contributors? 2 2 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for X 3 public office? If "Yes," complete Schedule C, Part I Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect X 4 during the tax year? If "Yes," complete Schedule C, Part II Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or X 5 similar amounts as defined in Revenue Procedure 98-197 If "Yes," complete Schedule C, Part III Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to Х provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I 6 Did the organization receive or hold a conservation easement, including easements to preserve open space, X 7 the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete X 8 Schedule D, Part III 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? X 9 If "Yes," complete Schedule D, Part IV Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent X endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 10 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, X 11a Part VI b Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total X assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 11b c Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total X assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII 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 \mathbf{X}_{-} 11d Part X, line 16? If "Yes," complete Schedule D, Part IX X e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 11e Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses X the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 11f 12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete X Schedule D, Parts XI and XII b Was the organization included in consolidated, independent audited financial statements for the tax year? Х If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional X Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E X 14a 14a Did the organization maintain an office, employees, or agents outside of the United States? b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 X or more? If "Yes," complete Schedule F, Parts I and IV ______ 14b Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any X foreign organization? If "Yes," complete Schedule F, Parts II and IV Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to X or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, 17

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17

X

Х

column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I 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

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

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Part IV Checklist of Required Schedules (continued)

Yes No X 20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H 20a b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? 20b Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or 21 X domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II 21 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 X Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete X Schedule J 23 24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete X 24a Schedule K. If "No", go to line 25a b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease 24c any tax-exempt bonds? d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 24d 25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit X 25a transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete X 25b Schedule L, Part I Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," X 26 complete Schedule L, Part II Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member 27 Х of any of these persons? If "Yes," complete Schedule L, Part III Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV 28 instructions for applicable filing thresholds, conditions, and exceptions): X a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28a X b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28b c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, X 28c director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV X Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation Х 30 contributions? If "Yes," complete Schedule M Did the organization liquidate, terminate, or dissolve and cease operations? X 31 If "Yes," complete Schedule N, Part I Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete X 32 Schedule N, Part II Did the organization own 100% of an entity disregarded as separate from the organization under Regulations 33 X sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I 33 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and X 34 Part V, line 1 X 35a 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity 35b within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? Х 36 If "Yes," complete Schedule R, Part V, line 2 Did the organization conduct more than 5% of its activities through an entity that is not a related organization X and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 37 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 Form 990 (2017)

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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	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0· if not applicable			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c	X	
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 return2a			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		
	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?	3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X
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).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			
	any contributions that were not tax deductible as charitable contributions?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
•	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		X
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
-	to file Form 8282?	7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year			
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. 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.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against			
	amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
_	Note. See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which the			
-	organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		
		Forn	990	(2017)

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	to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.			
	Check if Schedule O contains a response or note to any line in this Part VI			X
Sec	tion A. Governing Body and Management			
	2 97 9		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year			
	If there are material differences in voting rights among members of the governing body, or if the governing			
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
þ	Enter the number of voting members included in line 1a, above, who are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
	officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors, or trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X_
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6	X	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			
	more members of the governing body?	7a_	_X_	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			
	persons other than the governing body?	7b	X	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	Х	
b	Each committee with authority to act on behalf of the governing body?	8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		<u> </u>
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
			Yes	No
	Did the organization have local chapters, branches, or affiliates?	10a	X	-
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			\ ₃₇
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	_	X
11a		11a		
b		40-	v	
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	X	-
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Λ	-
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe	100	Х	
	in Schedule O how this was done	12c	X	
13	Did the organization have a written whistleblower policy?	14		Х
14	Did the organization have a written document retention and destruction policy?	14		- 22
15	Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	15a		х
a	The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization	15b		X
b		100		
40-	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
10a		16a		х
L	taxable entity during the year? If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			
D	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		
Soc	etion C. Disclosure			-
	List the states with which a copy of this Form 990 is required to be filed NONE			
17	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) a	vailah	le	
18	for public inspection, Indicate how you made these available. Check all that apply.			
	Own website Another's website X Upon request Other (explain in Schedule O)			
10	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and	finan	cial	
19	statements available to the public during the tax year.			
20	State the name, address, and telephone number of the person who possesses the organization's books and records:			
20	MARGARET WEISS - 540-558-9755			
	PO BOX 244, FAIRFAX, VA 22030			

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

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

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

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

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

(A) Name and Title	(B) Average hours per week	box,	not ch unles	s per	more 'son i	than is boti	h an	(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other
	(list any hours for related organizations below line)	individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
1) DEVIN KEARNS	2.00									•
DIRECTOR		X	_	_	_	_		0.	0.	0
(2) WILLIAM THERRIEN	2.00									_
DIRECTOR		Х		_		_	_	0	0.	0
(3) DAVID BATEMAN	2.00								0	,
DIRECTOR		Х	-	_				0.	0.	0
(4) BRYAN COOK	2.00								•	١ ,
DIRECTOR		Х	_	_	_	H		0.	0.	0
(5) JESSICA WERY	2.00								•	_
DIRECTOR	0.00	Х		_	_	_	_	0.	0.	0
(6) DIANE RODRIGUEZ	2.00								•	_
DIRECTOR	0.00	X	-	_		_		0.	0.	0
(7) KRISTI BAKER	2.00	,,						0.	0.	0
DIRECTOR	2.00	Х		-				0.	0.	U
(8) SARAH WATT	2.00	, l						0.	0.	0
DIRECTOR	2.00	X		-	-			0.		
(9) SHAQWANA FREEMAN-GREEN	2.00	x						0.	0.	0
DIRECTOR	2.00	Δ	-				_	0.		
(10) LINDA MASON	2.00			х				0.	0.	0
PAST PRESIDENT	3.00									
(11) STEPHANIE AL OTAIBA	3.00			х				0.	0.	0
PRESIDENT	2.00					П				
(12) JEANNE WANZEK PRESIDENT-ELECT	2.00			X				0.	0.	0
(13) KRISTEN SAYESKI	2.00	П					Г			
VICE PRESIDENT				x				0.	0.	0
(14) MICHAEL FAGGELLA-LUBY	2.00			- T-						
SECRETARY				х				0.	0.	0
(15) MARGARET WEISS	4.00									
TREASURER				X				15,500.	0.	0
(16) NANCY MAMLIN	2.50									
EXECUTIVE DIRECTOR				Х				17,708.	0.	0

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Par	t VII Section A. Officers, Directors, Trus	tees, Key Em	ploy	ees	, an	d Hi	ghe	st C	ompensated Employe	es (continued)				
	(A) Name and title	(B) Average hours per week (list any hours for related organizations below	(do	Pos (do not check pox, unless pe officer and a d			sition k more than one erson is both ar director/trustee)		(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensatio from related organizations (W-2/1099-MIS	s	(F) Estimate amount other compensa from the organizati and relations and relations are compensations.		of ition e ion ed
		line)	Indivi	Institu	Officer	Key er	Highe	Former						
											_			
					_									_
					_		_							
1b	Sub-total								33,208.		0.			0.
	Total from continuation sheets to Part V						- 9	•	33,208.		0.			0.
a	Total (add lines 1b and 1c) Total number of individuals (including but r							no re		,000 of reportabl				<u> </u>
	compensation from the organization					_		_				_	Yes	0 No
3	Did the organization list any former officer	. director, or tru	ıste	e. ke	v er	nplo	ovee.	or	highest compensated e	mployee on	ſ		ies	INO
	line 1a? If "Yes," complete Schedule J for s	such individual	(Acces			*****						3		_X_
4	For any individual listed on line 1a, is the stand related organizations greater than \$15											4		х
5	Did any person listed on line 1a receive or	accrue compei	nsat	ion f	rom	any	unr/	elat	ed organization or indivi	dual for services				
	rendered to the organization? If "Yes," contion B. Independent Contractors	nplete Schedul	e J f	for st	uch	pers	son .					5		_X_
<u> </u>	Complete this table for your five highest co	mpensated inc	depe	ende	nt c	onti	racto	rs t	hat received more than	\$100,000 of com	pens	ation f	rom	
	the organization. Report compensation for	the calendar y	ear	endi	ng v	vith	or w	ithir		/ear.		10	.,	
	(A) Name and business	address	N	INC	3				(B) Description of s	ervices	С	(C ompe		n
				_		-		-						
								_			_			
_								-						
2	Total number of independent contractors (ot li	mite	d to		se lis O	sted	d above) who received m	ore than				
	\$100,000 of compensation from the organ	ization	_	_		- 0		_				Form	990 (2017)

according to the contract of t	
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	rt VII	Check if Schedule O contain		or note to any line	in this Part VIII	~~~		
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512 - 514
Program Service Contributions, Gifts, Grants Revenue and Other Similar Amounts	b c d e f	+	tb tc td td ta ns) te n, and tf substituting the state of	36,982. Business Code 541900	36,982. 101,450.	101,450.		
rog	e	All the common provides and the		541900	584.	584.		
_	1	All other program service reven Total. Add lines 2a-2f			102,034.	504.		
	3 4 5	Investment income (including d other similar amounts) Income from investment of tax-Royalties	ividends, inter	est, and oroceeds	264.			264.
	6 a b	Gross rents Less: rental expenses Rental income or (loss)	(i) Real	(ii) Personal				
	7 a	Net rental income or (loss) Gross amount from sales of assets other than inventory Less: cost or other basis	(i) Securities	(ii) Other				
	С	and sales expenses Gain or (loss) Net gain or (loss))				
Other Revenue		Gross income from fundraising including \$ contributions reported on line 1 Part IV, line 18 Less: direct expenses	of c). See a					
ŏ		Net income or (loss) from fundra				= = =		
		Gross income from gaming acti						
		Part IV, line 19	b					
		Gross sales of inventory, less reand allowances	a					
	С	Net income or (loss) from sales						
	11 a	Miscellaneous Revenue		Business Code				
	b							
	С							
	d	All other revenue						
		Total. Add lines 11a-11d			139,280.	102,034.	0	264.
-	12	Total revenue. See instructions			133,400.	102,034		204.

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Part IX Statement of Functional Expenses

	ion 501(c)(3) and 501(c)(4) organizations must comp Check if Schedule O contains a respon	se or note to any line in	this Part IX		
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
2	individuals. See Part IV, line 22	6,336.	6,336.		
3	Grants and other assistance to foreign	0,330.	0,3301		
3	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
•	trustees, and key employees	33,208.	8,854.	24,354.	
6	Compensation not included above, to disqualified	55/255	0/0021	,	
•	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages				
8	Pension plan accruals and contributions (include				
_	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees):				
а	Management				
b	Legal				
С	Accounting	1,400.		1,400.	
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25,				
-	column (A) amount, list line 11g expenses on Sch O.)	10,116.		10,116.	
12	Advertising and promotion				
13	Office expenses	872.		872.	
14	Information technology	8,630.	8,271.	359.	
15	Royalties				
16	Occupancy				
17	Travel				
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	46,912.	20,000.	26,912.	
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance	450.		450.	
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A)				
_	amount, list line 24e expenses on Schedule 0.) JOURNAL EXPENSES	26,950.	26,950.		
a	DUES AND SUBSCRIPTIONS	5,466.	5,466.		
b	PUBLICATION COSTS	2,575.	2,575.		
d	CORPORATION COSTS	2,139.	2,000.	139.	
-	All other expenses	946.	946.		
				64,602.	0
			,		
.0					
25 26	Total functional expenses. Add lines 1 through 24e 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 Ir following SOP 98-2 (ASC 958-720)	146,000.	81,398.	64,602.	F

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art 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
1	Cash · non-interest-bearing	180,608.	1	
2	Savings and temporary cash investments	337,965.	2	495,245
3	Pledges and grants receivable, net		3	
4	Accounts receivable, net		4	
5	Loans and other receivables from current and former officers, directors,			
	trustees, key employees, and highest compensated employees. Complete			
	Part II of Schedule L		5	
6	Loans and other receivables from other disqualified persons (as defined under			
	section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing			
	employers and sponsoring organizations of section 501(c)(9) voluntary			
	employees' beneficiary organizations (see instr). Complete Part II of Sch L		6	
7	Notes and loans receivable, net		7	
7 8	Inventories for sale or use		8	
9	Prepaid expenses and deferred charges		9	
10a	Land, buildings, and equipment: cost or other			
	basis. Complete Part VI of Schedule D 10a 19,386.			
l b	Less: accumulated depreciation 10b 19,386.	0.	10c	
11	Investments - publicly traded securities		11	
12	Investments - other securities. See Part IV, line 11		12	
13	Investments - program-related. See Part IV, line 11		13	
14	Intangible assets		14	
15	Other assets. See Part IV, line 11	0.	15	5,86
16	Total assets. Add lines 1 through 15 (must equal line 34)	518,573.	16	501,112
17	Accounts payable and accrued expenses		17	
18	Grants payable		18	
19	Deferred revenue		19	
20	Tax-exempt bond liabilities		20	
21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	Loans and other payables to current and former officers, directors, trustees,			
	key employees, highest compensated employees, and disqualified persons.			
	Complete Part II of Schedule L		22	
22	Secured mortgages and notes payable to unrelated third parties		23	
24	Unsecured notes and loans payable to unrelated third parties		24	
25	Other liabilities (including federal income tax, payables to related third			
25	parties, and other liabilities not included on lines 17-24). Complete Part X of			
	Schedule D		25	
26	Total liabilities. Add lines 17 through 25	0.	26	
20	Organizations that follow SFAS 117 (ASC 958), check here ▶ X and			
.	complete lines 27 through 29, and lines 33 and 34.	4		
27	Unrestricted net assets	518,573.	27	501,11
28	Temporarily restricted net assets		28	
29	Permanently restricted net assets		29	
20	Organizations that do not follow SFAS 117 (ASC 958), check here ▶□			
27 28 29 30 31 32	and complete lines 30 through 34.			
30	Capital stock or trust principal, or current funds		30	
31	Paid-in or capital surplus, or land, building, or equipment fund		31	
32	Retained earnings, endowment, accumulated income, or other funds		32	
33	Total net assets or fund balances	518,573.	33	501,11
33	Total liabilities and net assets/fund balances	518,573.	34	501,11
34	Total liabilities and flet assets/fully balaness			Form 990 (20

Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1			80.
2	Total expenses (must equal Part IX, column (A), line 25)	2			00.
3	Revenue less expenses. Subtract line 2 from line 1	3			20.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	51	8,5	73.
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8	-1	0,7	41.
9	Othor changes in net assets or fund balances (explain in Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,				
	column (B))	10	50	1,1	12.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				Ш
				Yes	No
1	Accounting method used to prepare the Form 990: X Cash Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	Ο.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	l on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b		X
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	e basis,			
	consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audit,			
	review, or compilation of its financial statements and selection of an independent accountant?		2c		
	If the organization changed either its oversight process or selection process during the tax year, explain in Scho	edule O.			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sir				
	Act and OMB Circular A-133?		3a		_X_
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requi	red audit			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		
			Form	990	(2017)