



2615 Centennial Blvd., Suite 200
Tallahassee, FL 32308

The Barbara Bush Foundation
For Family Literacy Inc
Instructions for Filing
Form 8879-EO
IRS e-file Signature Authorization for Form 990
For the year ended June 30, 2019

The original IRS E-file Signature Authorization form should be signed (use full name) and dated by an authorized officer of the organization.

Return your signed IRS e-file Signature Authorization Form 8879-EO to:

Thomas Howell Ferguson P.A.
2615 Centennial Blvd., Suite 200
Tallahassee FL 32308

There is no tax due with the filing of this return.

Do NOT separately file Form 990 with the Internal Revenue Service. Doing so will delay the processing of your return. We must receive your signed form before we can electronically transmit your return, which is due on or before November 15, 2019. We would appreciate you returning this form as soon as possible as this will expedite the processing of your return. The Internal Revenue Service will notify us when your return is accepted. Your return is not considered filed until the Internal Revenue Service confirms their acceptance, which may occur after the due date of your return.

IRS e-file Signature Authorization for an Exempt Organization

For calendar year 2018, or fiscal year beginning 07/01, 2018, and ending 06/30, 20 19

Department of the Treasury
Internal Revenue Service

▶ **Do not send to the IRS. Keep for your records.**
▶ **Go to www.irs.gov/Form8879EO for the latest information.**

2018

Name of exempt organization THE BARBARA BUSH FOUNDATION Employer identification number 26-0587238

Name and title of officer EVANGELINE FIELDS, CFO

Part I Type of Return and Return Information (Whole Dollars Only)

Check the box for the return for which you are using this Form 8879-EO and enter the applicable amount, if any, from the return. If you check the box on line 1a, 2a, 3a, 4a, or 5a, below, and the amount on that line for the return being filed with this form was blank, then leave line 1b, 2b, 3b, 4b, or 5b, whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. **Do not** complete more than one line in Part I.

1a	Form 990 check here ▶	<input checked="" type="checkbox"/>	b	Total revenue, if any (Form 990, Part VIII, column (A), line 12) . . .	1b	<u>3,756,638.</u>
2a	Form 990-EZ check here ▶	<input type="checkbox"/>	b	Total revenue, if any (Form 990-EZ, line 9)	2b	_____
3a	Form 1120-POL check here ▶	<input type="checkbox"/>	b	Total tax (Form 1120-POL, line 22)	3b	_____
4a	Form 990-PF check here ▶	<input type="checkbox"/>	b	Tax based on investment income (Form 990-PF, Part VI, line 5).	4b	_____
5a	Form 8868 check here ▶	<input type="checkbox"/>	b	Balance Due (Form 8868, line 3c)	5b	_____

Part II Declaration and Signature Authorization of Officer

Under penalties of perjury, I declare that I am an officer of the above organization and that I have examined a copy of the organization's 2018 electronic return and accompanying schedules and statements and to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the organization's electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the organization's return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the organization's federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the organization's electronic return and, if applicable, the organization's consent to electronic funds withdrawal.

Officer's PIN: check one box only
 I authorize THOMAS HOWELL FERGUSON P.A. to enter my PIN 4 3 2 1 7 as my signature
ERO firm name Enter five numbers, but do not enter all zeros

on the organization's tax year 2018 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen.

As an officer of the organization, I will enter my PIN as my signature on the organization's tax year 2018 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen.

Officer's signature ▶ _____ Date ▶ _____

Part III Certification and Authentication

ERO's EFIN/PIN. Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN. 5 9 1 6 3 3 5 9 3 1 8
Do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2018 electronically filed return for the organization indicated above. I confirm that I am submitting this return in accordance with the requirements of **Pub. 4163, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns.**

ERO's signature ▶ _____ Date ▶ _____

ERO Must Retain This Form - See Instructions
Do Not Submit This Form To the IRS Unless Requested To Do So

Form **990**

Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

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

- ▶ Do not enter Social Security numbers on this form as it may be made public.
- ▶ Information about Form 990 and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2018

Open to Public Inspection

A For the 2018 calendar year, or tax year beginning 07/01, 2018, and ending 06/30, 2019

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization THE BARBARA BUSH FOUNDATION FOR FAMILY LITERACY INC			D Employer identification number 26-0587238	
	Doing Business As			E Telephone number (850) 562-5300	
	Number and street (or P.O. box if mail is not delivered to street address) Room/suite 516 NORTH ADAMS STREET		G Gross receipts \$ 26,165,624.		
	City or town, state or province, country, and ZIP or foreign postal code TALLAHASSEE, FL 32301			H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions)	
F Name and address of principal officer: BRITISH ROBINSON 516 NORTH ADAMS STREET, TALLAHASSEE, FL 32301			I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () ◀ (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		
J Website: WWW.BARBARABUSH.ORG			L Year of formation: 2007 M State of legal domicile: FL		
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶			H(c) Group exemption number ▶		

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: TO ADVOCATE FOR AND ESTABLISH LITERACY AS A VALUE IN EVERY HOME IN AMERICA.			
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.			
	3	Number of voting members of the governing body (Part VI, line 1a) 12.		
	4	Number of independent voting members of the governing body (Part VI, line 1b) 11.		
	5	Total number of individuals employed in calendar year 2018 (Part V, line 2a) 23.		
	6	Total number of volunteers (estimate if necessary) 2,723.		
	7a	Total unrelated business revenue from Part VIII, column (C), line 12 0.		
7b	Net unrelated business taxable income from Form 990-T, line 34 0.			
Revenue	8	Contributions and grants (Part VIII, line 1h) 4,410,041.	Prior Year	Current Year
	9	Program service revenue (Part VIII, line 2g) 0.	2,549,964.	28,930.
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d) 2,110,705.	985,321.	
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 450,647.	192,423.	
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 6,971,393.	3,756,638.	
	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 213,000.		133,303.	
Expenses	14	Benefits paid to or for members (Part IX, column (A), line 4) 0.	0.	0.
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 2,357,993.	2,551,631.	
	16a	Professional fundraising fees (Part IX, column (A), line 11e) 0.	0.	0.
	16b	Total fundraising expenses (Part IX, column (D), line 25) ▶ 1,041,950.		
	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 1,687,528.	1,915,973.	
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 4,258,521.	4,600,907.	
19	Revenue less expenses. Subtract line 18 from line 12 2,712,872.	-844,269.		
Net Assets or Fund Balances	20	Total assets (Part X, line 16) 32,183,123.	Beginning of Current Year	End of Year
	21	Total liabilities (Part X, line 26) 2,366,057.	31,986,013.	2,292,983.
	22	Net assets or fund balances. Subtract line 21 from line 20. 29,817,066.	29,693,030.	

Part II Signature Block

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

Sign Here	Signature of officer		Date		
	EVANGELINE FIELDS CFO				
Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN
	STACEY T KOLKA				P01371120
	Firm's name ▶ THOMAS HOWELL FERGUSON P.A.	Firm's EIN ▶ 59-3186310			
Firm's address ▶ 2615 CENTENNIAL BLVD., SUITE 200 TALLAHASSEE, FL 32308		Phone no. 850-668-8100			

May the IRS discuss this return with the preparer shown above? (see instructions) Yes No

For Paperwork Reduction Act Notice, see the separate instructions.

Form **990** (2018)

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response or note to any line in this Part III Yes No

1 Briefly describe the organization's mission:

THE BARBARA BUSH FOUNDATION IS THE NATION'S LEADING ADVOCATE FOR FAMILY LITERACY, PROVIDING ACCESS TO AND CHOICE OF EDUCATIONAL OPPORTUNITIES FOR PARENTS AND THEIR YOUNG CHILDREN.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? Yes No

If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes No

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 \$ 606,666. including grants of \$) (Revenue \$ 272,548.)

ATTACHMENT 1

4b (Code:) (Expenses \$ 767,476. including grants of \$ 133,303.) (Revenue \$ 705,020.)

ATTACHMENT 2

4c (Code:) (Expenses \$ 273,621. including grants of \$) (Revenue \$ 375,657.)

ATTACHMENT 3

4d Other program services (Describe in Schedule O.)

(Expenses \$ 1,564,389. including grants of \$) (Revenue \$)

4e Total program service expenses ▶ 3,212,152.

Part IV Checklist of Required Schedules

Table with 3 columns: Question number, Yes, No. Rows 1-21 with various questions about organizational activities and financial reporting.

Part IV Checklist of Required Schedules (continued)

Table with 3 columns: Question, Yes, No. Rows 22-38 covering various IRS schedule requirements.

Part 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. []

Table with 3 columns: Question, Yes, No. Rows 1a-1c regarding Form 1096, W-2G forms, and backup withholding rules.

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

Table with columns for question number, question text, and Yes/No response boxes. Includes questions 2a through 16 regarding employee reporting, tax returns, business income, foreign accounts, prohibited transactions, and charitable contributions.

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

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

Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include 1a (12), 1b (11), 2, 3, 4, 5, 6, 7a, 7b, 8a, 8b, 9.

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

Table with 3 columns: Question, Yes, No. Rows include 10a, 10b, 11a, 11b, 12a, 12b, 12c, 13, 14, 15a, 15b, 16a, 16b.

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed ATTACHMENT 4
18 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and 990-T (Section 501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
20 State the name, address, and telephone number of the person who possesses the organization's books and records

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

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

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

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

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

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) CHRIS FRANGIONE INTERIM CEO/DIRECTOR	14.00 0.	X		X				203,287.	0.	3,999.
(2) DAVID BERE' TREASURER	1.00 0.	X		X				0.	0.	0.
(3) DORO BUSH KOCH HONORARY CHAIR	1.00 0.	X						0.	0.	0.
(4) GOVERNOR BOB WISE DIRECTOR	1.00 0.	X						0.	0.	0.
(5) JEAN BECKER SECRETARY	1.00 0.	X		X				0.	0.	0.
(6) JEB BUSH, JR. DIRECTOR	1.00 0.	X						0.	0.	0.
(7) MARK KAPLAN CHAIR (PARTIAL TERM)	1.00 0.	X		X				0.	0.	0.
(8) PEGGY CONLON CHAIR (PARTIAL TERM)	1.00 0.	X		X				0.	0.	0.
(9) TIMOTHY E. GAGE DIRECTOR	1.00 0.	X						0.	0.	0.
(10) TRICIA REILLY KOCH DIRECTOR	1.00 0.	X						0.	0.	0.
(11) BRITISH ROBINSON PRESIDENT/CEO	60.00 0.	X		X				82,300.	0.	0.
(12) GWYNN VIROSTEK DIRECTOR	1.00 0.	X						0.	0.	0.
(13) LORI WACHS DIRECTOR	1.00 0.	X						0.	0.	0.
(14) EVANGELINE FIELDS CHIEF FINANCIAL OFFICER	40.00 0.			X				152,381.	0.	6,590.

Part VIII Statement of Revenue

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

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts	1a Federated campaigns	1a				
	b Membership dues	1b				
	c Fundraising events	1c				
	d Related organizations	1d				
	e Government grants (contributions)	1e	300,000.			
	f All other contributions, gifts, grants, and similar amounts not included above	1f	2,249,964.			
	g Noncash contributions included in lines 1a-1f: \$					
	h Total. Add lines 1a-1f ▶			2,549,964.		
Program Service Revenue	2a MAINE LITERACY CONFERENCE	Business Code	28,930.	28,930.		
	b _____					
	c _____					
	d _____					
	e _____					
	f All other program service revenue					
	g Total. Add lines 2a-2f ▶			28,930.		
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts). ▶		752,163.			752,163.
	4 Income from investment of tax-exempt bond proceeds . ▶		0.			
	5 Royalties ▶		0.			
	6a Gross rents	(i) Real (ii) Personal				
	b Less: rental expenses					
	c Rental income or (loss)					
	d Net rental income or (loss) ▶			0.		
	7a Gross amount from sales of assets other than inventory	(i) Securities (ii) Other				
	b Less: cost or other basis and sales expenses					
	c Gain or (loss)					
	d Net gain or (loss) ▶			233,158.		233,158.
	8a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18 a		843,862.			
	b Less: direct expenses b		651,439.			
	c Net income or (loss) from fundraising events ▶			192,423.		192,423.
	9a Gross income from gaming activities. See Part IV, line 19 a		0.			
b Less: direct expenses b		0.				
c Net income or (loss) from gaming activities ▶			0.			
10a Gross sales of inventory, less returns and allowances a		0.				
b Less: cost of goods sold b		0.				
c Net income or (loss) from sales of inventory ▶			0.			
Miscellaneous Revenue		Business Code				
11a _____						
b _____						
c _____						
d All other revenue						
e Total. Add lines 11a-11d ▶			0.			
12 Total revenue. See instructions. ▶			3,756,638.	28,930.		1,177,744.

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

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

Do not include amounts reported on lines 6b, 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	133,303.	133,303.		
2 Grants and other assistance to domestic individuals. See Part IV, line 22	0.			
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16	0.			
4 Benefits paid to or for members	0.			
5 Compensation of current officers, directors, trustees, and key employees	1,512,769.	904,903.	159,197.	448,669.
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.			
7 Other salaries and wages	695,140.	415,817.	73,153.	206,170.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	136,661.	81,747.	14,382.	40,532.
9 Other employee benefits	62,917.	37,635.	6,621.	18,661.
10 Payroll taxes	144,144.	86,224.	15,169.	42,751.
11 Fees for services (non-employees):				
a Management	0.			
b Legal	69,669.	25,487.	13,784.	30,398.
c Accounting	26,981.	12,244.	7,754.	6,983.
d Lobbying	0.			
e Professional fundraising services. See Part IV, line 17.	0.			
f Investment management fees	156,755.	133,409.	2,066.	21,280.
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.) ATCH 6	908,735.	773,394.	11,974.	123,367.
12 Advertising and promotion	7,989.	6,799.	105.	1,085.
13 Office expenses	48,164.	28,355.	8,093.	11,716.
14 Information technology	6,517.	5,546.	86.	885.
15 Royalties	0.			
16 Occupancy	28,073.	13,423.	7,538.	7,112.
17 Travel	163,090.	112,666.	12,771.	37,653.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials	0.			
19 Conferences, conventions, and meetings	28,344.	28,344.		
20 Interest	0.			
21 Payments to affiliates	0.			
22 Depreciation, depletion, and amortization	9,291.	4,525.	2,242.	2,524.
23 Insurance	22,496.	10,289.	6,330.	5,877.
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 O.)				
a BOOKS AND MATERIALS	310,477.	310,477.		
b DUES AND SUBS	79,396.	44,743.	3,776.	30,877.
c OTHER EXPENSES	26,108.	18,934.	1,764.	5,410.
d MAINE LITERACY CONFERENCE	23,888.	23,888.		
e All other expenses _____				
25 Total functional expenses. Add lines 1 through 24e	4,600,907.	3,212,152.	346,805.	1,041,950.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)	0.			

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
Assets	1 Cash - non-interest-bearing	400,395.	1	631,024.
	2 Savings and temporary cash investments	2,201,752.	2	1,592,757.
	3 Pledges and grants receivable, net	1,790,836.	3	356,284.
	4 Accounts receivable, net	0.	4	0.
	5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L	0.	5	0.
	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 instructions). Complete Part II of Schedule L	0.	6	0.
	7 Notes and loans receivable, net	0.	7	0.
	8 Inventories for sale or use	0.	8	0.
	9 Prepaid expenses and deferred charges	13,266.	9	19,671.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 58,806.		
	b Less: accumulated depreciation	10b 37,608.		
		18,474.	10c	21,198.
	11 Investments - publicly traded securities	27,704,117.	11	29,296,464.
	12 Investments - other securities. See Part IV, line 11	54,283.	12	68,615.
	13 Investments - program-related. See Part IV, line 11	0.	13	0.
	14 Intangible assets	0.	14	0.
15 Other assets. See Part IV, line 11	0.	15	0.	
16 Total assets. Add lines 1 through 15 (must equal line 34)	32,183,123.	16	31,986,013.	
Liabilities	17 Accounts payable and accrued expenses	649,541.	17	572,065.
	18 Grants payable	1,000,000.	18	1,000,000.
	19 Deferred revenue	716,516.	19	720,918.
	20 Tax-exempt bond liabilities	0.	20	0.
	21 Escrow or custodial account liability. Complete Part IV of Schedule D	0.	21	0.
	22 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	0.	22	0.
	23 Secured mortgages and notes payable to unrelated third parties	0.	23	0.
	24 Unsecured notes and loans payable to unrelated third parties	0.	24	0.
	25 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	0.	25	0.
	26 Total liabilities. Add lines 17 through 25	2,366,057.	26	2,292,983.
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	29,817,066.	27	29,402,419.
	28 Temporarily restricted net assets	0.	28	290,611.
	29 Permanently restricted net assets	0.	29	0.
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> 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	29,817,066.	33	29,693,030.	
34 Total liabilities and net assets/fund balances	32,183,123.	34	31,986,013.	

Part 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	3,756,638.
2	Total expenses (must equal Part IX, column (A), line 25)	2	4,600,907.
3	Revenue less expenses. Subtract line 2 from line 1	3	-844,269.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	29,817,066.
5	Net unrealized gains (losses) on investments	5	720,233.
6	Donated services and use of facilities	6	0.
7	Investment expenses	7	0.
8	Prior period adjustments	8	0.
9	Other changes in net assets or fund balances (explain in Schedule O)	9	0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	29,693,030.

Part XII Financial Statements and Reporting

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

- 1** Accounting method used to prepare the Form 990: Cash Accrual Other _____
If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.
- 2a** Were the organization's financial statements compiled or reviewed by an independent accountant?
If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed 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?
If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:
 Separate basis Consolidated basis Both consolidated and separate basis
- c** If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.
- 3a** As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?
- b** If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.

	Yes	No
2a		X
2b	X	
2c	X	
3a		X
3b		

SCHEDULE A
(Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No. 1545-0047

2018

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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.

Name of the organization **THE BARBARA BUSH FOUNDATION**
FOR FAMILY LITERACY INC

Employer identification number
26-0587238

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

The organization 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 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 government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 8 A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 9 An agricultural research organization described in **section 170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: _____
- 10 An organization that normally receives: (1) more than 33 1/3 % of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3 % of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2)**. (Complete Part III.)
- 11 An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**.
- 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2)**. See **section 509(a)(3)**.
Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
 - a **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
 - b **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
 - c **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
 - d **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
 - e Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.

f Enter the number of supported organizations

g Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
(A)						
(B)						
(C)						
(D)						
(E)						
Total						

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

Schedule A (Form 990 or 990-EZ) 2018

JSA
8E1210 1.000

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.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	19,769,600.	4,462,540.	3,086,478.	4,410,041.	2,549,964.	34,278,623.
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.	19,769,600.	4,462,540.	3,086,478.	4,410,041.	2,549,964.	34,278,623.
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).						0.
6 Public support. Subtract line 5 from line 4						34,278,623.

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
7 Amounts from line 4.	19,769,600.	4,462,540.	3,086,478.	4,410,041.	2,549,964.	34,278,623.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	800,693.	823,086.	768,803.	733,273.	752,163.	3,878,018.
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.) . ATCH. 1	3,777.					3,777.
11 Total support. Add lines 7 through 10.						38,160,418.
12 Gross receipts from related activities, etc. (see instructions)					12	
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ▶ <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

14 Public support percentage for 2018 (line 6, column (f) divided by line 11, column (f)).	14	89.83%
15 Public support percentage from 2017 Schedule A, Part II, line 14	15	90.90%
16a 33 1/3% support test - 2018. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here . The organization qualifies as a publicly supported organization. ▶ <input checked="" type="checkbox"/>		
b 33 1/3% support test - 2017. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here . The organization qualifies as a publicly supported organization ▶ <input type="checkbox"/>		
17a 10%-facts-and-circumstances test - 2018. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here . Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization. ▶ <input type="checkbox"/>		
b 10%-facts-and-circumstances test - 2017. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here . Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ▶ <input type="checkbox"/>		
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ▶ <input type="checkbox"/>		

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.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(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 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 its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5.						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b.						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
9 Amounts from line 6.						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources.						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on.						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						

14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here**

Section C. Computation of Public Support Percentage

15 Public support percentage for 2018 (line 8, column (f), divided by line 13, column (f))	15	%
16 Public support percentage from 2017 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2018 (line 10c, column (f), divided by line 13, column (f)),	17	%
18 Investment income percentage from 2017 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests - 2018. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization .

b 33 1/3% support tests - 2017. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, 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 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

	Yes	No
1 Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>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.</i>		
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer (b) and (c) below.</i>		
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)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
4a Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.</i>		
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>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.</i>		
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)? <i>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.</i>		
5a Did the organization add, substitute, or remove any supported organizations during the tax year? <i>If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).</i>		
b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
c Substitutions only. Was the substitution the result of an event beyond the organization's control?		
6 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 or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If "Yes," provide detail in Part VI.</i>		
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? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
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))? <i>If "Yes," provide detail in Part VI.</i>		
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? <i>If "Yes," provide detail in Part VI.</i>		
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? <i>If "Yes," provide detail in Part VI.</i>		
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)? <i>If "Yes," answer 10b below.</i>		
b Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>		

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 (b) and (c) below, the governing body of a supported organization?		
b	A family member of a person described in (a) above?		
c	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI .		

Section B. Type I Supporting Organizations

		Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's 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 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
1	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 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
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).		
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.		

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).		
a	<input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.		
b	<input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.		
c	<input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).		
2	Activities Test. Answer (a) and (b) 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 (a) 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 (a) and (b) 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? 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.		

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

1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). **See instructions.** All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3.	4		
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		

Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
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 1-1/2% of line 3 (for greater amount, see instructions).	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by .035.	6		
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8		

Section C - Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2 Enter 85% of line 1.	2		
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4 Enter greater of line 2 or line 3.	4		
5 Income tax imposed in prior year	5		
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).

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

Section D - Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required)	
6 Other distributions (describe in Part VI). See instructions.	
7 Total annual distributions. Add lines 1 through 6.	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.	
9 Distributable amount for 2018 from Section C, line 6	
10 Line 8 amount divided by line 9 amount	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2018	(iii) Distributable Amount for 2018
1 Distributable amount for 2018 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2018 (reasonable cause required - explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2018			
a From 2013			
b From 2014			
c From 2015			
d From 2016			
e From 2017			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2018 distributable amount			
i Carryover from 2013 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4 Distributions for 2018 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2018 distributable amount			
c Remainder. Subtract lines 4a and 4b from 4.			
5 Remaining underdistributions for years prior to 2018, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions.			
6 Remaining underdistributions for 2018. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.			
7 Excess distributions carryover to 2019. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2014			
b Excess from 2015			
c Excess from 2016			
d Excess from 2017			
e Excess from 2018			

Part VI **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.)

ATTACHMENT 1

SCHEDULE A, PART II - OTHER INCOME

DESCRIPTION	2014	2015	2016	2017	2018	TOTAL
MISC INCOME	3,777.					3,777.
TOTALS	<u>3,777.</u>					<u>3,777.</u>

Schedule of Contributors

2018

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.
 ▶ Go to www.irs.gov/Form990 for the latest information.

Name of the organization THE BARBARA BUSH FOUNDATION FOR FAMILY LITERACY INC	Employer identification number 26-0587238
--	--

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

501(c)(3) (enter number) organization

4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

4947(a)(1) nonexempt charitable trust treated as a private foundation

501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of **(1)** \$5,000; or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year ▶ \$ _____

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization THE BARBARA BUSH FOUNDATION FOR FAMILY LITERACY INC	Employer identification number 26-0587238
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Part I **Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	_____	\$ 300,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2	_____	\$ 100,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3	_____	\$ 100,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
4	_____	\$ 91,388.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
5	_____	\$ 500,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
6	_____	\$ 250,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization THE BARBARA BUSH FOUNDATION FOR FAMILY LITERACY INC	Employer identification number 26-0587238
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Part I **Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7	_____	\$ 375,657.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
8	_____	\$ 91,523.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
9	_____	\$ 75,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
_____	_____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
_____	_____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
_____	_____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization THE BARBARA BUSH FOUNDATION
FOR FAMILY LITERACY INC

Employer identification number
26-0587238

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

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

Name of organization **THE BARBARA BUSH FOUNDATION
FOR FAMILY LITERACY INC**

Employer identification number
26-0587238

Part III **Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor.** Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of *exclusively* religious, charitable, etc., contributions of **\$1,000 or less** for the year. (Enter this information once. See instructions.) ► \$ _____
Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
_____	_____ _____ _____	_____ _____ _____	_____ _____ _____

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee
_____ _____ _____	_____ _____ _____

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
_____	_____ _____ _____	_____ _____ _____	_____ _____ _____

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee
_____ _____ _____	_____ _____ _____

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
_____	_____ _____ _____	_____ _____ _____	_____ _____ _____

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee
_____ _____ _____	_____ _____ _____

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
_____	_____ _____ _____	_____ _____ _____	_____ _____ _____

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee
_____ _____ _____	_____ _____ _____

SCHEDULE C
(Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

OMB No. 1545-0047

2018

Open to Public Inspection

For Organizations Exempt From Income Tax Under section 501(c) and section 527

- ▶ **Complete if the organization is described below.**
- ▶ **Attach to Form 990 or Form 990-EZ.**
- ▶ **Go to www.irs.gov/Form990 for instructions and the latest information.**

Department of the Treasury
Internal Revenue Service

If the organization answered "Yes," on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes," on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes," on Form 990, Part IV, line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then

- Section 501(c)(4), (5), or (6) organizations: Complete Part III.

Name of organization THE BARBARA BUSH FOUNDATION FOR FAMILY LITERACY INC	Employer identification number 26-0587238
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Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

- 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV. (see instructions for definition of "political campaign activities")
- 2 Political campaign activity expenditures (see instructions) ▶ \$ _____
- 3 Volunteer hours for political campaign activities (see instructions)

Part I-B Complete if the organization is exempt under section 501(c)(3).

- 1 Enter the amount of any excise tax incurred by the organization under section 4955. ▶ \$ _____
- 2 Enter the amount of any excise tax incurred by organization managers under section 4955 ▶ \$ _____
- 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? Yes No
- 4a Was a correction made? Yes No
- b If "Yes," describe in Part IV.

Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).

- 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities. ▶ \$ _____
- 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ▶ \$ _____
- 3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b ▶ \$ _____
- 4 Did the filing organization file **Form 1120-POL** for this year? Yes No
- 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0-.	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-.
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				

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

Schedule C (Form 990 or 990-EZ) 2018

Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

A Check if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures).

B Check if the filing organization checked box A and "limited control" provisions apply.

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals												
1a Total lobbying expenditures to influence public opinion (grass roots lobbying)															
b Total lobbying expenditures to influence a legislative body (direct lobbying)															
c Total lobbying expenditures (add lines 1a and 1b)															
d Other exempt purpose expenditures		3,188,264.													
e Total exempt purpose expenditures (add lines 1c and 1d)		3,188,264.													
f Lobbying nontaxable amount. Enter the amount from the following table in both columns.		309,413.													
<table border="1"> <thead> <tr> <th>If the amount on line 1e, column (a) or (b) is:</th> <th>The lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 1e.</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000.</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000.</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000.</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000.</td> </tr> </tbody> </table>		If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount on line 1e.	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.	Over \$17,000,000	\$1,000,000.		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:														
Not over \$500,000	20% of the amount on line 1e.														
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.														
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.														
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.														
Over \$17,000,000	\$1,000,000.														
g Grassroots nontaxable amount (enter 25% of line 1f)		77,353.													
h Subtract line 1g from line 1a. If zero or less, enter -0-		0.	0.												
i Subtract line 1f from line 1c. If zero or less, enter -0-		0.	0.												
j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?			<input type="checkbox"/> Yes <input type="checkbox"/> No												

4-Year Averaging Period Under Section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the separate instructions for lines 2a through 2f.)

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) Total
2a Lobbying nontaxable amount	595,076.	795,410.	309,496.	309,413.	2,009,395.
b Lobbying ceiling amount (150% of line 2a, column (e))					3,014,093.
c Total lobbying expenditures					
d Grassroots nontaxable amount	140,024.	22,078.	77,374.	77,353.	316,829.
e Grassroots ceiling amount (150% of line 2d, column (e))					475,244.
f Grassroots lobbying expenditures	148,769.	198,853.			347,622.

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

Table with 3 main columns: Description, (a) Yes/No, and (b) Amount. Rows include questions about lobbying activities like volunteers, staff, media, mailings, etc.

Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

Table with 3 rows and 3 columns: Question, Yes, No. Questions about dues, lobbying expenditures, and carryover.

Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," OR (b) Part III-A, line 3, is answered "Yes."

Table with 5 rows and 2 columns: Question, Amount. Questions about dues, non-deductible lobbying expenditures, and taxable amounts.

Part IV Supplemental Information

Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines 1 and 2 (see instructions); and Part II-B, line 1. Also, complete this part for any additional information.

Horizontal lines for providing supplemental information.

Part IV Supplemental Information *(continued)*

SCHEDULE D (Form 990)

Supplemental Financial Statements

OMB No. 1545-0047

2018

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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.

Name of the organization THE BARBARA BUSH FOUNDATION FOR FAMILY LITERACY INC

Employer identification number 26-0587238

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.

Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

Table with 2 columns: (a) Donor advised funds, (b) Funds and other accounts. Rows include: 1 Total number at end of year, 2 Aggregate value of contributions to (during year), 3 Aggregate value of grants from (during year), 4 Aggregate value at end of year, 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?, 6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?

Part II Conservation Easements.

Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

Table with 2 columns: Description, Held at the End of the Tax Year. Rows include: 1 Purpose(s) of conservation easements held by the organization (check all that apply), 2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. (Sub-rows: a Total number of conservation easements, b Total acreage restricted by conservation easements, c Number of conservation easements on a certified historic structure included in (a), d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register), 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year, 4 Number of states where property subject to conservation easement is located, 5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?, 6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year, 7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year, 8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?, 9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

Table with 2 columns: Description, Amount. Rows include: 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenue included on Form 990, Part VIII, line 1. (ii) Assets included in Form 990, Part X. 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: a Revenue included on Form 990, Part VIII, line 1. b Assets included in Form 990, Part X.

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

Schedule D (Form 990) 2018

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets *(continued)*

- 3** Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):
- a** Public exhibition
 - b** Scholarly research
 - c** Preservation for future generations
 - d** Loan or exchange programs
 - e** Other _____
- 4** Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.
- 5** During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? **Yes** **No**

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.

- 1a** Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? **Yes** **No**
- b** If "Yes," explain the arrangement in Part XIII and complete the following table:
- | | Amount |
|--|-----------|
| c Beginning balance | 1c |
| d Additions during the year | 1d |
| e Distributions during the year | 1e |
| f Ending balance | 1f |
- 2a** Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? **Yes** **No**
- b** If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII

Part V Endowment Funds.

Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

- 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** Temporarily restricted endowment ▶ _____ %
- 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:
- | | Yes | No |
|---|---------------|----|
| (i) unrelated organizations | 3a(i) | |
| (ii) related organizations | 3a(ii) | |
| b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? | 3b | |
- 4** Describe in Part XIII the intended uses of the organization's endowment funds.

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) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements				
d Equipment		58,806.	37,608.	21,198.
e Other				
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				21,198.

Part VII Investments - Other Securities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other _____		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.) ►		

Part VIII Investments - Program Related.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.) ►		

Part IX Other Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) ►	

Part X Other Liabilities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value	
(1) Federal income taxes		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ►		

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per 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	5,400,707.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
a	Net unrealized gains (losses) on investments	2a	720,233.		
b	Donated services and use of facilities	2b	429,152.		
c	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII.)	2d	651,439.		
e	Add lines 2a through 2d			2e	1,800,824.
3	Subtract line 2e from line 1			3	3,599,883.
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	156,755.		
b	Other (Describe in Part XIII.)	4b			
c	Add lines 4a and 4b			4c	156,755.
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)			5	3,756,638.

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements			1	5,524,743.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
a	Donated services and use of facilities	2a	429,152.		
b	Prior year adjustments	2b			
c	Other losses	2c			
d	Other (Describe in Part XIII.)	2d	651,439.		
e	Add lines 2a through 2d			2e	1,080,591.
3	Subtract line 2e from line 1			3	4,444,152.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	156,755.		
b	Other (Describe in Part XIII.)	4b			
c	Add lines 4a and 4b			4c	156,755.
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)			5	4,600,907.

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.

SEE PAGE 5

Part XIII Supplemental Information (continued)

PART XI: RECONCILIATION OF REVENUE

LINE 2D

DIRECT FUNDRAISING EVENT EXPENSES: \$651,439

FOR TAX RETURN PURPOSES, FUNDRAISING EXPENSES ARE REPORTED ON THE STATEMENT OF REVENUES, PART VIII. HOWEVER, FOR AUDITED FINANCIAL STATEMENT PURPOSES, FUNDRAISING EXPENSES ARE REPORTED WITH EXPENSES.

PART XII: RECONCILIATION OF EXPENSES

LINE 2D

DIRECT FUNDRAISING EVENT EXPENSES: \$651,439

FOR TAX RETURN PURPOSES, FUNDRAISING EXPENSES ARE REPORTED ON THE STATEMENT OF REVENUES, PART VIII. HOWEVER, FOR AUDITED FINANCIAL STATEMENT PURPOSES, FUNDRAISING EXPENSES ARE REPORTED WITH EXPENSES.

Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
		FL CELEBRATION (event type)	ME CELEBRATION (event type)	1. (total number)	(add col. (a) through col. (c))
Revenue	1 Gross receipts	255,453.	245,550.	342,859.	843,862.
	2 Less: Contributions				
	3 Gross income (line 1 minus line 2)	255,453.	245,550.	342,859.	843,862.
Direct Expenses	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs	17,875.		11,606.	29,481.
	7 Food and beverages	56,651.	417.	36,067.	93,135.
	8 Entertainment				
	9 Other direct expenses	214,157.	76,726.	237,374.	528,257.
	10 Direct expense summary. Add lines 4 through 9 in column (d) ▶				650,873.
11 Net income summary. Subtract line 10 from line 3, column (d) ▶				192,989.	

Part III Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Revenue	1 Gross revenue				
Direct Expenses	2 Cash prizes				
	3 Noncash prizes				
	4 Rent/facility costs				
	5 Other direct expenses				
	6 Volunteer labor	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	
	7 Direct expense summary. Add lines 2 through 5 in column (d) ▶				
	8 Net gaming income summary. Subtract line 7 from line 1, column (d) ▶				

9 Enter the state(s) in which the organization conducts gaming activities: _____
a Is the organization licensed to conduct gaming activities in each of these states? Yes No
b If "No," explain: _____

10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year? Yes No
b If "Yes," explain: _____

- 11 Does the organization conduct gaming activities with nonmembers? Yes No
- 12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? Yes No
- 13 Indicate the percentage of gaming activity conducted in:

a The organization's facility	13a	%
b An outside facility	13b	%

14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name ▶ _____

Address ▶ _____

- 15 a Does the organization have a contract with a third party from whom the organization receives gaming revenue? Yes No
- b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ _____ and the amount of gaming revenue retained by the third party ▶ \$ _____.
- c If "Yes," enter name and address of the third party:

Name ▶ _____

Address ▶ _____

16 Gaming manager information:

Name ▶ _____

Gaming manager compensation ▶ \$ _____

Description of services provided ▶ _____

Director/officer Employee Independent contractor

- 17 Mandatory distributions:
 - a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? Yes No
 - b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ _____

Part IV **Supplemental Information.** Provide the explanation required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information (see instructions).

990, SCHEDULE G, PART I - HIGHEST PAID FUNDRAISER

NAME AND ADDRESS OF FUNDRAISER	ACTIVITY	DID FUNDRAISER HAVE CUSTODY OR CONTROL OF CONTRIBUTIONS?		GROSS RECEIPTS FROM ACTIVITY	AMOUNT PAID TO (OR RETAINED BY) FUNDRAISER	AMOUNT PAID TO (OR RETAINED BY) ORGANIZATION
		YES	NO			
MARTHA HOWE 1035 N. EDGEFIELD AVE DALLAS TX 75208			X		52,500.	
BROULILLETTE, BARRY, FARMER & KORANDO, LLC 927 THURSTON LANE GLEN BURNIE MD 21060			X		52,914.	

**SCHEDULE I
(Form 990)**

**Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States**

OMB No. 1545-0047

2018

**Open to Public
Inspection**

Department of the Treasury
Internal Revenue Service

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.
▶ Attach to Form 990.

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

Name of the organization **THE BARBARA BUSH FOUNDATION
FOR FAMILY LITERACY INC**

Employer identification number
26-0587238

Part I General Information on Grants and Assistance

- Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No
- Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) SCHOOL BOARD OF MIAMI DADE 1450 NE 2ND AVENUE, ROOM 760	59-6000572	GOV'T	19,303.				LITERACY
(2) BROWARD EDUCATION FOUNDATION PO BOX 5408 FORT LAUDERDALE, FL 33310	59-2359433	501(C)(3)	13,000.				LITERACY
(3) UNITED WAY CAPITAL AREA - JACKSON SCHOOLS 843 N. PRESIDENT STREET JACKSON, MS 39202	64-0303075	501(C)(3)	7,000.				LITERACY
(4) POLK COUNTY SCHOOLS 1915 SOUTH FLORAL AVENUE BARTOW, FL 33831	59-6000807	GOV'T	5,500.				LITERACY
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ▶ 4.

3 Enter total number of other organizations listed in the line 1 table ▶

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

Schedule I (Form 990) (2018)

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.
Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
1					
2					
3					
4					
5					
6					
7					

Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b); and any other additional information.

PART I, LINE 2

GRANTS ARE DETERMINED BY EACH PROGRAM'S NEEDS AND BY THE ORGANIZATION'S FAMILY LITERACY BUDGET. PROGRAMS REQUEST FUNDING AND PROVIDE LINE ITEM BUDGETS WITH NARRATIVES ON HOW DOLLARS WILL BE SPENT. EACH PROGRAM MUST MEET PROGRAMMATIC DELIVERABLES AND FILE FINANCIAL REPORTS FOR SPECIFIED REPORTING PERIODS AS DEFINED IN THEIR FUNDING AGREEMENT/CONTRACT. FINANCIAL REPORTS ARE ACCOMPANIED BY SOURCE DOCUMENTATION VERIFYING EXPENDITURES. EACH EXPENDITURE IS VERIFIED AGAINST THE PROGRAM'S APPROVED LINE ITEM BUDGET. NONAPPROVED EXPENSES ARE DOCUMENTED AND ARE NOT INCLUDED IN THE REIMBURSEMENT/PAYMENT PROCESS.

**SCHEDULE J
(Form 990)**

Department of the Treasury
Internal Revenue Service

Compensation Information

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

- ▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.
- ▶ Attach to Form 990.
- ▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2018

**Open to Public
Inspection**

Name of the organization **THE BARBARA BUSH FOUNDATION
FOR FAMILY LITERACY INC**

Employer identification number
26-0587238

Part I Questions Regarding Compensation

1a 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.

- | | |
|--|--|
| <input type="checkbox"/> First-class or charter travel | <input type="checkbox"/> Housing allowance or residence for personal use |
| <input type="checkbox"/> Travel for companions | <input type="checkbox"/> Payments for business use of personal residence |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees |
| <input type="checkbox"/> Discretionary spending account | <input type="checkbox"/> 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

2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?

3 Indicate which, if any, of the following the filing 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.

- | | |
|---|---|
| <input checked="" type="checkbox"/> Compensation committee | <input checked="" type="checkbox"/> Written employment contract |
| <input type="checkbox"/> Independent compensation consultant | <input type="checkbox"/> Compensation survey or study |
| <input checked="" type="checkbox"/> Form 990 of other organizations | <input checked="" type="checkbox"/> Approval by the board or compensation committee |

4 During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:

- a** Receive a severance payment or change-of-control payment?
 - b** Participate in, or receive payment from, a supplemental nonqualified retirement plan?
 - c** Participate in, or receive payment from, an equity-based compensation arrangement?
- 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?
 - b** Any related organization?
- If "Yes" on line 5a or 5b, describe in Part III.

6 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:

- a** The organization?
 - b** Any related organization?
- If "Yes" on line 6a or 6b, describe in Part III.

7 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.

8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III.

9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

	Yes	No
1a		
1b		
2		
3		
4a	X	
4b		X
4c		X
5a		X
5b		X
6a		X
6b		X
7		X
8		X
9		

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

Schedule J (Form 990) 2018

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-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1 CHRIS FRANGIONE INTERIM CEO/DIRECTOR	(i)	203,287.	0.	0.	3,999.	0.	207,286.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
2 LIZA MCFADDEN PRESIDENT/CEO	(i)	80,782.	0.	186,281.	6,463.	7,672.	281,198.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
3 FONDA ANDERSON CHIEF STRATEGIC OFFICER	(i)	183,979.	18,000.	0.	16,158.	0.	218,137.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
4 ANNE DAVIES CHIEF DEVELOPMENT OFFICER	(i)	182,250.	15,762.	0.	12,241.	4,647.	214,900.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
5 SUSAN JAMES CHIEF MARKETING OFFICER	(i)	148,247.	14,250.	73,143.	13,008.	0.	248,648.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
6 EVANGELINE FIELDS CHIEF FINANCIAL OFFICER	(i)	143,299.	9,082.	0.	6,590.	0.	158,971.	0.
	(ii)	0.	0.	0.				
7	(i)							
	(ii)							
8	(i)							
	(ii)							
9	(i)							
	(ii)							
10	(i)							
	(ii)							
11	(i)							
	(ii)							
12	(i)							
	(ii)							
13	(i)							
	(ii)							
14	(i)							
	(ii)							
15	(i)							
	(ii)							
16	(i)							
	(ii)							

SCHEDULE O
(Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No. 1545-0047

2018

**Open to Public
Inspection**

Department of the Treasury
Internal Revenue Service

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.

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

Name of the organization THE BARBARA BUSH FOUNDATION
FOR FAMILY LITERACY INC

Employer identification number
26-0587238

FORM 990, PART I - VOLUNTEERS

LINE 6

THE BARBARA BUSH FOUNDATION FOR FAMILY LITERACY, INC IS A PUBLIC CHARITY.

MRS. BARBARA BUSH IS THE FOUNDER OF THE BARBARA BUSH FOUNDATION. THE BUSH

FAMILY IS PROUD TO SUPPORT LITERACY THROUGH THEIR PHILANTHROPIC EFFORTS.

DOROTHY BUSH KOCH IS HONORARY CHAIR AND IS A VOLUNTEER MEMBER OF THE

BOARD OF DIRECTORS. DOROTHY'S SISTER-IN-LAW, TRICIA REILLY KOCH, AND

NEPHEW, JEB BUSH, JR ARE ALSO VOLUNTEER MEMBERS OF THE BOARD OF

DIRECTORS. OTHER BUSH FAMILY MEMBERS WHO LEND THEIR NAME AND VALUABLE

TIME AS VOLUNTEERS, PARTICULAR TO SUPPORT CELEBRATION OF READING EVENTS,

INCLUDE PRESIDENT GEORGE W AND LAURA BUSH, GOVERNOR JEB AND COLUMBA BUSH,

MARVIN AND MARGARET BUSH, JENNA BUSH HAGER, SAM LEBLOND, ELLIE SOSA AND

GIGI KOCH.

FORM 990, PART VI: GOVERNANCE, MANAGEMENT & DISCLOSURE

SECTION A

LINE 2

DORO BUSH KOCH AND TRICIA REILLY KOCH ARE RELATED AND HAVE A BUSINESS

RELATIONSHIP.

JEB BUSH, JR AND DORO BUSH KOCH ARE RELATED.

LINE 8

THE EXECUTIVE COMMITTEE SHALL BE VESTED WITH THE POWERS PERMITTED BY THE

BOARD OF DIRECTORS CONSISTENT WITH THE FOLLOWING COMPOSITION. THE

Name of the organization THE BARBARA BUSH FOUNDATION
FOR FAMILY LITERACY INC

Employer identification number
26-0587238

EXECUTIVE BOARD/COMMITTEE SHALL CONSIST OF THE OFFICERS OF THE
FOUNDATION, INCLUDING THE CHAIR, VICE CHAIR, SECRETARY AND TREASURER.

MEETINGS

THE EXECUTIVE COMMITTEE SHALL MEET AT LEAST TWO(2) TIMES PER YEAR,
EXCLUSIVE OF THE MEETINGS OF THE BOARD OF DIRECTORS.

TERMS

MEMBERS OF THE EXECUTIVE COMMITTEE SHALL SERVE FOR A TERM OF TWO(2)
YEARS, CONSISTENT WITH THE NOMINATIONS FOR SERVICE AS OFFICERS OF THE
CORPORATION. MEMBERS MAY SERVE AS MANY TERMS AS DESIRED AT THE DISCRETION
OF THE MAJORITY OF THE BOARD OF DIRECTORS. THE EXECUTIVE COMMITTEE MAY
MEET AT THE WILL OF THE CHAIR TO MAKE DECISIONS IN BETWEEN MEETINGS OF
THE FULL BOARD.

FORM 990, PART VI, SECTION B

LINE 11B

THE FORM 990 AND ALL ACCOMPANYING SCHEDULES ARE PREPARED BY THE
ORGANIZATION'S PUBLIC ACCOUNTING FIRM BASED ON DATA SUPPLIED BY THE
ORGANIZATION. ONCE A REVIEW IS PERFORMED BY MANAGEMENT OF THE
ORGANIZATION, THE FORM 990 AND ALL ACCOMPANYING SCHEDULES ARE PRESENTED
TO THE BOARD OF DIRECTORS FOR THEIR FINAL REVIEW AND APPROVAL.

FORM 990, PART VI, SECTION B

LINE 12C

ANNUALLY, THE ORGANIZATION'S CONFLICT OF INTEREST POLICY COVERING

Name of the organization THE BARBARA BUSH FOUNDATION
FOR FAMILY LITERACY INC

Employer identification number
26-0587238

MANAGEMENT STAFF AND BOARD MEMBERS IS REVIEWED AND REVISED AS REVISIONS ARE CONSIDERED NECESSARY BY THE CEO. ANNUALLY THE MANAGEMENT STAFF AND BOARD MEMBERS ARE REQUIRED TO REVIEW, SIGN, AND SUBMIT A CONFLICT OF INTEREST FORM. FOLLOWING FULL DISCLOSURE OF A POSSIBLE CONFLICT, THE BOARD OF DIRECTORS SHALL DETERMINE WHETHER A CONFLICT OF INTEREST EXISTS AND, IF SO THE BOARD SHALL VOTE TO AUTHORIZE OR REJECT THE TRANSACTION OR TAKE ANY OTHER ACTIONS DEEMED NECESSARY TO ADDRESS THE CONFLICT AND PROTECT THE BARBARA BUSH FOUNDATION'S BEST INTEREST.

FORM 990, PART VI, SECTION B

LINE 15

THE EXECUTIVE BOARD OF DIRECTORS REVIEWED THE SALARY RANGES THAT WERE BASED ON REVIEW OF VARIED SALARY SURVEYS AND AN ANALYSIS OF SELECT ORGANIZATION'S FORMS 990S COMBINED WITH AN ANALYSIS OF A NOT-FOR-PROFIT SALARY GUIDE. THE SALARY RANGE WAS APPROVED FOR THE CEO AND STAFF ON JUNE 9, 2016. THE CHAIRMAN OF THE BOARD PERFORMS AN ANNUAL REVIEW OF THE CEO AND MAY AWARD A BONUS. THE PROCESS IS DOCUMENTED IN THE EXECUTIVE BOARD MEETING MINUTES, AND IN THE ANNUAL PERFORMANCE REVIEW OF THE CEO.

FORM 990, PART VI, SECTION C

LINE 19

THE ORGANIZATION'S GOVERNING DOCUMENTS ARE AVAILABLE THROUGH THE FLORIDA DEPARTMENT OF AGRICULTURE & CONSUMER SERVICES.

ATTACHMENT 1

FORM 990, PART III - PROGRAM SERVICE, LINE 4A

THE BARBARA BUSH FOUNDATION'S SIGNATURE TWO-GENERATION FAMILY LITERACY PROGRAMS PROVIDE PARENTS AND THEIR YOUNG CHILDREN,

Name of the organization THE BARBARA BUSH FOUNDATION
FOR FAMILY LITERACY INC

Employer identification number
26-0587238

ATTACHMENT 1 (CONT'D)

TYPICALLY BIRTH THROUGH AGE FIVE, THE OPPORTUNITY TO IMPROVE THEIR LITERACY SKILLS IN THE SAME LEARNING ENVIRONMENT. THE MOST RECENT EVALUATION DETERMINED THAT PARENTS ENROLLED IN THE PROGRAMS, ON AVERAGE, IMPROVED THEIR LITERACY SKILLS BY TWO GRADE LEVELS IN ONE YEAR. NEARLY HALF OF ALL PRESCHOOLERS ENTERING THE PROGRAMS WERE AT RISK FOR DEVELOPMENTAL DELAYS. BY THE END OF THE PROGRAM, ONLY 14% REMAINED AT RISK, REPRESENTING A 70% DECREASE IN THE NUMBER OF CHILDREN AT RISK FOR DEVELOPMENTAL DELAYS.

THE FOUNDATION'S EARLY LITERACY EFFORTS ALSO INCLUDED WORKING WITH THE MOTT FOUNDATION TO CREATE "EXTENDING AND ENHANCING LITERACY LEARNING IN AFTERSCHOOL PROGRAMS: A PRACTICE GUIDE." THIS GUIDE AND CURRICULUM OVERVIEW PROVIDES SUPPORT FOR EARLY LITERACY PROGRAMMING IN 21ST CENTURY COMMUNITY LEARNING CENTERS AND OTHER FORMAL AFTERSCHOOL PROGRAMS. IN ADDITION, THE BARBARA BUSH FOUNDATION DEVELOPED AN ONLINE EARLY LITERACY COURSE TO PROVIDE AFTERSCHOOL AND CHILD CARE PROVIDERS SOME BASIC TRAINING IN LITERACY IN ORDER TO ENHANCE THEIR PROGRAMS.

THE BARBARA BUSH FOUNDATION PARTNERED WITH PI BETA PHI, A NATIONAL SORORITY, TO DEVELOP AND PRESENT TRAINING ON LITERACY ADVOCACY TO PI BETA PHI MEMBERS IN FIVE LOCATIONS ACROSS THE U.S. PI BETA PHI MEMBERS THEN USED THE MATERIALS AND TRAINING RESOURCES TO ADVOCATE FOR LITERACY IN THEIR OWN COMMUNITIES. IN THE SUMMER OF 2018, THE BARBARA BUSH FOUNDATION CREATED A FACILITATOR'S GUIDE FOR PI BETA

Name of the organization THE BARBARA BUSH FOUNDATION
FOR FAMILY LITERACY INC

Employer identification number
26-0587238

ATTACHMENT 1 (CONT'D)

PHI TO USE TO CONTINUE TRAINING NEW LITERACY ADVOCATES AMONG THEIR MEMBERS.

THE BARBARA BUSH FOUNDATION CONTRACTED WITH A VENDOR TO CREATE A DIGITAL PLATFORM CALLED STORY MENTORS FOR FIRST GRADERS, WHICH INCLUDES 25 ONLINE BOOKS ACCOMPANIED BY MENTOR AND PARENT GUIDES. THE MATERIALS HAVE BEEN REVIEWED BY TEACHERS ACROSS THE NATION AND WERE OFFERED FREE OF CHARGE TO TEACHERS IN MISSISSIPPI TO EVALUATE OUR DISSEMINATION PROCESSES. STORY MENTORS FOR FIRST GRADERS WILL BE LAUNCHED NATIONALLY IN 2019.

THE 11TH ANNUAL MAINE LITERACY CONNECTIONS CONFERENCE WAS HELD AT THOMAS COLLEGE THIS YEAR, WITH NEARLY 300 EDUCATORS FROM CHILD CARE TO ADULT EDUCATION IN ATTENDANCE. HIGHLIGHTS INCLUDED A KEYNOTE BY DR. JAYNE SINGER FROM THE BRAZELTON TOUCHPOINTS CENTER AT HARVARD UNIVERSITY ON DEVELOPMENTAL, SOCIAL EMOTIONAL, AND TRAUMA FRAMEWORKS TO STRENGTHEN LEARNING. IN ADDITION, THE CONFERENCE PROVIDED MORE THAN 20 INDIVIDUAL WORKSHOPS FROM WHICH PARTICIPANTS COULD CHOOSE. ONE PARTICIPANT SHARED, "I LOOK FORWARD TO ATTENDING THIS CONFERENCE EVERY YEAR. I ALWAYS LEARN SO MUCH AND WALK AWAY ENERGIZED."

AND FINALLY, THE FOUNDATION WORKED WITH THE FLORIDA CHILDREN'S COUNCIL TO DEVELOP TRAINING MATERIAL FOR EARLY LITERACY PROVIDERS AND DELIVERED SEVERAL TRAINING WORKSHOPS ON LANGUAGE NUTRITION IN

Name of the organization THE BARBARA BUSH FOUNDATION
FOR FAMILY LITERACY INC

Employer identification number
26-0587238

ATTACHMENT 1 (CONT'D)

FLORIDA.

ATTACHMENT 2

FORM 990, PART III - PROGRAM SERVICE, LINE 4B

TEEN TRENDSETTERS IS A CROSS-AGE LITERACY MENTORING PROGRAM THAT
PAIRS MIDDLE AND HIGH SCHOOL STUDENTS (MENTORS) WITH STRUGGLING
READERS (MENTEES) IN FIRST THROUGH THIRD GRADE FOR WEEKLY
ONE-ON-ONE READING SESSIONS. THE GOAL IS TO IMPROVE READING SKILLS
IN THESE AT-RISK MENTEES, WHILE PROMOTING LEADERSHIP AND SERVICE
QUALITIES AMONG MENTORS. PARENTS ARE ALSO ENCOURAGED TO READ WITH
THEIR CHILD AT LEAST TWICE A WEEK, AND OVER THE COURSE OF THE
PROGRAM, CHILDREN RECEIVE 15-20 BOOKS TO ADD TO THEIR PERSONAL
HOME LIBRARIES.

THE 2018-19 TEEN TRENDSETTERS EVALUATION REPORT SHOWS THAT, ON
AVERAGE, MENTEES DEMONSTRATED A 1.20 GRADE LEVEL INCREASE IN
READING SKILLS, WHICH CORRESPONDS TO 50% MORE GROWTH THAN WOULD BE
EXPECTED FOR AN AVERAGE STUDENT DURING THIS TIME PERIOD. HOWEVER,
IT MUST BE REMEMBERED THAT THE MENTEES ARE NOT TYPICAL STUDENTS -
THEY WERE SPECIFICALLY CHOSEN BECAUSE THEY WERE READING AT LEAST
ONE-HALF YEAR BELOW GRADE LEVEL AND ONE MAY EXPECT THEM TO SHOW
SMALLER GAINS THAN THE AVERAGE STUDENT WHO WAS READING AT GRADE
LEVEL OR ABOVE. CONSEQUENTLY, THE ACTUAL IMPACT OF TEEN
TRENDSETTERS ON MENTEES MAY BE GREATER THAN THE INCREASE OF 1.20
GRADE LEVELS WOULD IMPLY.

Name of the organization THE BARBARA BUSH FOUNDATION
FOR FAMILY LITERACY INC

Employer identification number
26-0587238

ATTACHMENT 2 (CONT'D)

WHILE THE FOCUS OF TEEN TRENDSETTERS IS ON MENTEE READING, MENTORS ALSO GAIN FROM TAKING PART IN THE PROGRAM. THEY REPORT STRONGER COMMUNICATIONS SKILLS, NEW LEADERSHIP SKILLS, THE ABILITY TO WORK AS PART OF A TEAM, BETTER PROBLEM SOLVING, IMPROVED SELF CONFIDENCE, AND EVEN ENHANCED READING SKILLS.

THE BARBARA BUSH FOUNDATION SUPPORTED 140 TEEN TRENDSETTERS PROGRAMS IN 10 STATES IN 2018-19 WITH STIPENDS FOR ADVISORS, TRAINING FOR ADVISORS AND MENTORS, CURRICULUM AND SUPPLEMENTAL BOOKS FOR EACH MENTEE, AND INCENTIVES LIKE T-SHIRTS AND CERTIFICATES OF COMPLETION. THE FOUNDATION ALSO SUPPORTED A STUDENT INFORMATION SYSTEM, AN INDEPENDENT EVALUATOR, AND TECHNICAL ASSISTANCE STAFF.

EACH STUDENT IS ALSO PAIRED WITH A TEEN WHO HAS BEEN TRAINED AS A READING MENTOR, AND THE PAIRS MEET WEEKLY TO PRACTICE READING DURING ONE-ON-ONE MENTORING SESSIONS. THE 2016-17 TEEN TRENDSETTERS EVALUATION REPORT SHOWS THAT, ON AVERAGE, MENTEES INCREASE THEIR READING BY 1.24 GRADE LEVELS. IN ADDITION, THE FIVE-YEAR AGGREGATE EVALUATION REPORT FROM 2011-2016 SHOWS THAT, ON AVERAGE, STUDENTS IN GRADES 1-3 ACHIEVED 18 TO 31 PERCENT MORE GROWTH IN THEIR READING SKILLS THAN ONE WOULD EXPECT FOR CHILDREN THEIR AGE.

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FOR FAMILY LITERACY INC

Employer identification number
26-0587238

ATTACHMENT 3

FORM 990, PART III - PROGRAM SERVICE, LINE 4C

TODAY, 36 MILLION AMERICANS CANNOT READ ABOVE A BASIC LEVEL. THIS TRANSLATES TO ONE IN FIVE ADULTS IN THE U.S. WHO STRUGGLE TO READ SIMPLE SENTENCES AND BASIC VOCABULARY WORDS. TWO-THIRDS OF THESE 36 MILLION ARE NATIVE ENGLISH-SPEAKING CITIZENS AND ONE-THIRD ARE IMMIGRANTS. THESE ADULTS ARE MORE LIKELY TO BE UNEMPLOYED, TO GO TO PRISON, AND TO BE HOSPITALIZED. THEIR CHILDREN ARE ALSO AT A SIGNIFICANTLY HIGHER RISK OF BEING LOW-LITERATE THEMSELVES, PERPETUATING THE CYCLE.

THE NEGATIVE CONSEQUENCES AFFECT NOT ONLY INDIVIDUALS AND THEIR FAMILIES, BUT OUR NATION AS A WHOLE. EVEN A SLIGHT RISE IN LITERACY SKILLS HAS THE POTENTIAL TO BOOST LABOR PRODUCTIVITY EXPONENTIALLY AND DECREASE HEALTH CARE COSTS SIGNIFICANTLY.

IN 2015, FORMER FIRST LADY BARBARA BUSH CHALLENGED THE FOUNDATION TO IMPROVE ACCESS TO SERVICES SO THESE ADULTS COULD LEARN TO READ, WRITE, COMPREHEND, AND NAVIGATE LIFE WITH DIGNITY. THE BARBARA BUSH FOUNDATION JOINED WITH THE XPRIZE FOUNDATION AND THE DOLLAR GENERAL LITERACY FOUNDATION TO LAUNCH THE WORLD'S FIRST-EVER ADULT LITERACY XPRIZE COMPETITION. THE COMPETITION CHALLENGED DEVELOPERS TO CREATE APPLICATIONS THAT WOULD ENABLE ADULT LEARNERS TO LEARN AT ANY TIME AND IN ANY PLACE, THROUGH USE OF THEIR SMARTPHONES AND TABLETS.

THE COMPETITION FIELD, WHICH ORIGINALLY NUMBERED 109 TEAMS FROM 22

Name of the organization THE BARBARA BUSH FOUNDATION
FOR FAMILY LITERACY INC

Employer identification number
26-0587238

ATTACHMENT 3 (CONT'D)

COUNTRIES, WAS NARROWED TO FIVE FINALIST TEAMS IN 2017-18. THE APPLICATIONS CREATED BY THESE TEAMS WERE FIELD TESTED WITH NEARLY 12,000 ADULT LEARNERS IN THREE CITIES ACROSS THE COUNTRY: DALLAS, LOS ANGELES, AND PHILADELPHIA. THE RESULTS OF THE FIELD TRIALS WERE REVIEWED BY A TEAM OF EXPERT JUDGES AND WERE DEEMED VERY PROMISING. THE WINNERS WERE ANNOUNCED IN FEBRUARY 2019 AND AWARDED A TOTAL PRIZE PURSE OF \$5.5 MILLION.

IN ADDITION TO INCREASING THE DEVELOPMENT OF EDUCATIONAL TECHNOLOGY THROUGH THE APP DEVELOPMENT PHASE OF THE COMPETITION, THE FOUNDATION LAUNCHED A CAMPAIGN TO INCREASE REACH TO LOW-LITERATE ADULTS. IN THE FALL OF 2018, THE FOUNDATION AND ITS PARTNERS NATIONWIDE LAUNCHED THE COMMUNITIES COMPETITION AIMED AT PLACING THE WINNING ADULT LITERACY APPS INTO THE HANDS OF AS MANY LOW-LITERATE ADULTS AS POSSIBLE, WITH \$1 MILLION IN PRIZES AVAILABLE TO THE PARTICIPATING COMMUNITIES. THE RESULTS OF THIS PHASE WILL BE MADE PUBLIC IN NOVEMBER 2019. TO TEST THE EFFECTIVENESS OF THE ADULT LEARNER RECRUITMENT STRATEGIES OF THE ORGANIZATIONS COMPETING IN THE COMMUNITIES COMPETITION, THE BARBARA BUSH FOUNDATION ALSO HIRED AN INDEPENDENT EVALUATOR. THE EVALUATION REPORT WILL BE AVAILABLE IN THE FALL OF 2019.

ATTACHMENT 4

FORM 990, PART VI, LINE 17 - STATES

AL, AK, AR, CA, CT,

DC, FL, GA, HI, IL, KS, KY, MD, MA, MI,

MN, MS, NV, NH, NJ, NY, NC, OK, OR, PA,

Name of the organization **THE BARBARA BUSH FOUNDATION
FOR FAMILY LITERACY INC**

Employer identification number
26-0587238

ATTACHMENT 4 (CONT'D)

FORM 990, PART VI, LINE 17 - STATES

SC, TN, UT, VA, WA, WV, WI, WY

ATTACHMENT 5

990, PART VII- COMPENSATION OF THE FIVE HIGHEST PAID IND. CONTRACTORS

<u>NAME AND ADDRESS</u>	<u>DESCRIPTION OF SERVICES</u>	<u>COMPENSATION</u>
GRAVINA, SMITH, MATTE, & ARNOLD 12474 BRANTLEY COMMONS COURT FORT MYERS, FL 33907	MEETING PLANNER	153,117.
THE PURSUANT GROUP, INC. P.O. BOX 203421 DALLAS, TX 75320	MKT, SOC & DIGITAL	112,315.
THE GLOVER PARK GROUP, LLC 1025 F STREET NW, 9TH FLOOR WASHINGTON, DC 20004	STRATEGIC COMMUN.	179,275.
LJ ENTERPRISES, INC. P.O. BOX 574 SOUTH DENNIS, MA 02660	PROGRAM CONSULTANT	103,935.

ATTACHMENT 6

FORM 990, PART IX - OTHER FEES

<u>DESCRIPTION</u>	(A) <u>TOTAL FEES</u>	(B) <u>PROGRAM SERVICE EXP.</u>	(C) <u>MANAGEMENT AND GENERAL</u>	(D) <u>FUNDRAISING EXPENSES</u>
PROFESSIONAL SERVICE	908,735.	773,394.	11,974.	123,367.
TOTALS	<u>908,735.</u>	<u>773,394.</u>	<u>11,974.</u>	<u>123,367.</u>

**Regulation Section 1.263(a)-1(f) - De Minimis
Safe Harbor Election**

Taxpayer Name: THE BARBARA BUSH FOUNDATION

Taxpayer Address: 516 NORTH ADAMS STREET, TALLAHASSEE, FL 32301

Taxpayer ID Number: 26-0587238

Year-End: 06/30/2019

Under IRC Regulation Section 1.263(a)-1(f), the taxpayer hereby elects to apply the de minimis safe harbor election.