Form 990

Department of the Treasury Internal Revenue Service

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

**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.

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2016
Open to Public Inspection

Form **990** (2016)

		information about 1 of in 330 and its instructions is at we	<del></del>	_ <u>, v</u> _	( ) Intobaction		
<u>A</u>	For the 2016 c	alendar year, or tax year beginning $09/01/16$ , and ending $08/3$	<u> 1/17</u>				
В	Check if applicable	C Name of organization		D Employe	r identification number		
П	Address change	THE LITERACY ALLIANCE, INC					
$\equiv$	•	Doing business as		35-1	710780		
Ш	Name change	Number and street (or P O box if mail is not delivered to street address)	Room/suite	E Telephon			
П	Initial return	1005 W. RUDISILL BLVD, # 307		260-	426-7323		
Ħ	Final return/	City or town, state or province, country, and ZIP or foreign postal code			<del></del>		
닏	terminated	FORT WAYNE IN 46807		- 0	(20 220		
П	Amended return	FORT WAYNE IN 46807  F Name and address of principal officer	<del></del>	G Gross rec	eipts\$ 628,228		
一	Application mandian		H(a) Is this a grou	in return for si	ubordinates? Yes X No		
	Application pending	DREW DUNLAVY	11(2) 15 6115 6 9150	.p 10.2 10. 0.			
		1005 W. RUDISILL BLVD, #307	H(b) Are all subc	rdinates incli	uded? Yes No		
		FORT WAYNE IN 46807	2   If "No,"	attach a list	(see instructions)		
1	Tax-exempt status	X 501(c)(3) 501(c) ( ) ◀ (insert no ) 4947(a)(1) or 527	$\supset$				
		WLITERACYALLIANCE.ORG	H(c) Group exem	antion numbo	. •		
	Form of organization		··				
7777			L Year of formation 19	9/4	M State of legal domicile LN		
<u>F</u>		mmary					
		scribe the organization's mission or most significant activities					
ģ	THE	LITERACY ALLIANCE PROVIDES INSTRUCTION FOR ADULT	'S WITH READI	NG, WI	RITING		
a		MATH SKILL DEFICITS THAT IMPEDE THEIR ABILITY TO					
Ĕ		UCTIVE WORKERS AND CONTRIBUTING MEMBERS OF OUR C			- <b>,</b>		
Š	2 Check thi	· <del>                                     </del>		nto			
Ö	i		in 25% of its net assi	1 1	1.0		
Activities & Governance	1	f voting members of the governing body (Part VI, line 1a)		3	18		
ţį	1	f independent voting members of the governing body (Part VI, line 1b)		4	18		
⋛	5 Total num	iber of individuals employed in calendar year 2016 (Part V, line 2a)		5	20		
Ą	6 Total num	ber of volunteers (estimate if necessary)		6	82		
-	7a Total unre	elated business revenue from Part VIII, column (C), line 12		7a	0		
		ated business taxable income from Form 990-T, line 34		7b	0		
		The state of the s	Prior Year		Current Year		
C C	8 Contribut	ons and grants (Part VIII, line 1h)		,525	572,849		
I Revenue?	9 Program	service revenue (Part VIII, line 2g)		,675	13,325		
Ϋ́Θ,	40 Investment	<u>-</u> .		2,563			
& £	10 investme	nt income (Part VIII, column (A), lines 3, 4, and 7d)					
<b>-</b>	11 Other rev	enue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		,877	32,876		
<u> </u>	12 Total reve	nue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)	689	,085	621,613		
<u>₹</u>	13 Grants ar	d similar amounts paid (Part IX, column (A), lines 1–3)			0.		
	14 Benefits p	paid to or for members (Part IX, column (A), line 4)		ĺ	0		
xpenses)		other compensation, employee benefits (Part IX, column (A), lines 5–10)	428	,178	410,263		
~.	l .	nal fundraising fees (Part IX, column (A), line 11e)		7 10	0		
<u> </u>		- , , , , , , , , , , , , , , , , , , ,					
X	1	•		0.7.5	222 662		
٣	17 Other exp	enses (Part IX, column (A), lines 11a-11d, 11f-24e)		,215	220,662		
Ü	18 Total exp	enses Add lines 13–17 (must equal Part IX, column (A) line 25/ED		,393	630,925		
	19 Revenue	The state of the s		,692	-9,312		
Net Assets or Fund Balances			Beginning of Curre		End of Year		
alar	20 Total asse	ets (Part X, line 16)  MAR 2 7 2018	516	,388	484,029		
₽ B B	21 Total liabi	lities (Part X, line 26) $ \mathbf{m} $	126	,496	100,553		
휥	22 Net asset	s or fund balances Subtract line 21 from line 20	389	,892	383,476		
		nature Block OGDEN, UI		<del></del>			
		erjury, I declare that I have examined this return, including accompanying schedules and sta	tements, and to the her	t of my kn	nuladae and ballef it is		
tru	ue, correct, and co	mplete Declaration of preparer (other than officer) is based on all information of which prepare	rer has any knowledge		owledge and belief, it is		
		2014=					
٠.	- <del>-</del>				116/18		
Sig	'''   <u>'</u>	gnature of officer		Date			
He	re   👠 _	NICOLE KROUSE CHA	IRPERSON				
	Ty	pe or print name and title			,		
	Print/Type	preparer's name Preparer's signature	Date	Check	If PTIN		
Paid	٠				LJ " [		
	narer MARK U			18 self-em			
	Only		) Fin	m's EIN ▶	<u>35-1679361</u>		
JJE	· · · · · · ·	110 W BERRY STREET, STE. 2202					
	Firm's add	ress FORT WAYNE, IN 46802-2311	Ph	one no	260-423-9405		
May	the IRS discuss	this return with the preparer shown above? (see instructions)			No. O Ma		

orm 990 (2016)	THE LITERACY A	LLIANCE, INC	35-1710780	Page <b>2</b>
Part III St	atement of Program	Service Accomplishment	ts	
, C	heck if Schedule O con	tains a response or note to	o any line in this Part III	
THE LITE	H SKILL DEFICI	PROVIDES INSTRU IS THAT IMPEDE T		WITH READING, WRITING BE STRONG PARENTS, MMUNITY.
2 Did the organ	nization undertake any signif	icant program services during th	e year which were not listed on th	e
prior Form 9	90 or 990-EZ? cribe these new services on		<b>5,0</b> 0	Yes X No
services?	_	r make significant changes in ho	w it conducts, any program	Yes X No
4 Describe the expenses S	ection 501(c)(3) and 501(c)(4	ice accomplishments for each o	f its three largest program service eport the amount of grants and al d	
AND MATI INSTRUCT INTERNET 212 ADUI 5 LEARN	H UNDER THE GUITON OCCURS THE CONNECTED COLUMN BET THE STING BETON CENTERS.	IDANCE OF LICENS ROUGH ONE-ON-ONE MPUTER LABS AND FWEEN 5TH AND 10 123 ADULTS TESTI	OUDY BASIC SKILLS SED TEACHERS AND C TUTORING, IN SM IN GED/HSE LEARN TH GRADE PREPARE ING BELOW THE 5TH	) (Revenue \$ 13,325) IN READING, WRITING VOLUNTEER TUTORS. ALL GROUPS, IN ING CENTER CLASSROOMS. D FOR THE GED/HSE IN GRADE LEVEL STUDIED GANIZATION AMOUNTS TO
BY SUPPO	ORTING PARENTS	IN THEIR ROLE A	ants of \$ INTERGENERATIONAL AS THEIR CHILD'S HILDREN AT ONE PR	FIRST TEACHER.
4c (Code	) (Expenses \$	including gra	ants of \$	) (Revenue \$
		<del></del>		
· -	m services (Describe in Sch	•		
(Expenses		including grants of \$	<u>) (Revenue \$</u>	
	m service expenses >	458,845		
)AA				Form <b>990</b> (2016)

	· ·		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
	complete Schedule A	_1	<u>X</u>	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	X	<u> </u>
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to	_		
	candidates for public office? If "Yes," complete Schedule C, Part I	3		<u> X</u>
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)	. }		٦,
	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,	ı	ļ	
	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C,	_ 1		v
_	Part III	_5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors	1		
	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If	ا ،	1	v
_	"Yes," complete Schedule D, Part I	-6		<u> </u>
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	_		v
_	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	_7		_X_
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"		ľ	v
	complete Schedule D, Part III	_8_		<u>x</u> _
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a	1	Ì	
	custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or			v
	debt negotiation services? If "Yes," complete Schedule D, Part IV	9		<u>X</u> _
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted	10	х	
11	endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i> If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,	-10		-
	VII, VIII, IX, or X as applicable			
2	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"	Ì		
a	complete Schedule D, Part VI	11a	х	
h	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more			
_	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	116	х	
c	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more			
•	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		х
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets			
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11a		Х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	X	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	X	<u> </u>
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	X	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If			
	"Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b		ĺ		
	fundraising, business, investment, and program service activities outside the United States, or aggregate	}		
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		<u>X</u> _
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or	1		
	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other			
_	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on			,,
	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	_17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on		٠,	
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	X	<del> </del>
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?	40		
	If "Yes," complete Schedule G, Part III	19		X

Form 990 (2016) THE LITERACY ALLIANCE, INC
Part IV Checklist of Required Schedules (continued)

<u> </u>	THE TY CHECKHIST OF REQUIRED SCHOOLINGEDY		. 1	<del></del>
		20-	Yes	No X
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a 20b		
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	200		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	21		X
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II			
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Ì	Х
	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
23	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23		Х
242	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
:4a	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			
	through 24d and complete Schedule K. If "No," go to line 25a	24a		X
h	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
·	to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		Х
b				
-	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?			
	If "Yes," complete Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any			
	current or former officers, directors, trustees, key employees, highest compensated employees, or			
	disqualified persons? If "Yes," complete Schedule L, Part II	26		_X_
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			
	Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		<u>X</u>
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
	Schedule L, Part IV	28b		<u>X</u>
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)			
	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			,,
	conservation contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,	١		3,7
	Part I	31_		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"			v
	complete Schedule N, Part II	32_		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	-		- V
	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		<u> x</u> _
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III,			<sub>V</sub>
	or IV, and Part V, line 1	34	<u> </u>	X
35a		35a	<u> </u>	
b		256		l
	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	<del>                                     </del>	-
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable	36		$ _{\mathbf{x}}$
27	related organization? If "Yes," complete Schedule R, Part V, line 2	130	<u> </u>	<del>  ^</del>
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,			
		37		x
30	Part VI  Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and	<del>,</del>	<del>                                     </del>	†
38	19? Note. All Form 990 filers are required to complete Schedule O	38	x	

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 Yes Nο 1a Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? X 1c 2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax 20 Statements, filed for the calendar year ending with or within the year covered by this return b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 2b Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? Х 3a b If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O 3b 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial Х 4a If "Yes," enter the name of the foreign country ▶ See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5a Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5b If "Yes" to line 5a or 5b, did the organization file Form 8886-T? 5c 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? 6a Х b If "Yes," did the organization include with every solicitation an express statement that such contributions or X gifts were not tax deductible? 6b Organizations that may receive deductible contributions under section 170(c). Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? X 7a If "Yes," did the organization notify the donor of the value of the goods or services provided? 7b Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? 7с d If "Yes," indicate the number of Forms 8282 filed during the year Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7е Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7f If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 7g If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 7h 8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year? 8 9 Sponsoring organizations maintaining donor advised funds. Did the sponsoring organization make any taxable distributions under section 4966? 9a b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? 9b 10 Section 501(c)(7) organizations. Enter а Initiation fees and capital contributions included on Part VIII, line 12 10a Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b 11 Section 501(c)(12) organizations. Enter Gross income from members or shareholders 11a Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them ) 11b 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b 13 Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? 13a Note. See the instructions for additional information the organization must report on Schedule O Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans 13b Enter the amount of reserves on hand 13c 14a Did the organization receive any payments for indoor tanning services during the tax year? 14a If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O 14b

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.  $|\mathbf{X}|$ Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management Yes No 1a Enter the number of voting members of the governing body at the end of the tax year 18 If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O Enter the number of voting members included in line 1a, above, who are independent 18 1b Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? 2 3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person? 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 5 Did the organization become aware during the year of a significant diversion of the organization's assets? 6 6 Did the organization have members or stockholders? 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? 7a Are any governance decisions of the organization reserved to (or subject to approval by) members, X stockholders, or persons other than the governing body? 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following The governing body? 8a b Each committee with authority to act on behalf of the governing body? 8b Х Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No 10a Did the organization have local chapters, branches, or affiliates? 10a b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a b Describe in Schedule O the process, if any, used by the organization to review this Form 990. 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12a b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done 12c Х 13 Did the organization have a written whistleblower policy? 13 Did the organization have a written document retention and destruction policy? 14 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? a The organization's CEO, Executive Director, or top management official 15a X Other officers or key employees of the organization 15b If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? Х 16a b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? 16b Section C. Disclosure 17 List the states with which a copy of this Form 990 is required to be filed > Section 6104 requires an organization to make its Forms 1023 (or 1024 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, | X | Own website | X | Another's website | X | Upon request | X | Other (explain in Schedule O) 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

State the name, address, and telephone number of the person who possesses the organization's books and records

1005 W. RUDISILL BLVD, # 307

FORT WAYNE

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MIKE LANDRAM, EXECUTIVE DIRECTOR

Form 990 (2016)	THE	LITERACY	ALLIANCE.	INC

35-1710780

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

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

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

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

(A) Name and Title	(B) Average hours per week (list any hours for	bo: off	x, unle icer a	Pos check ess pe nd a d	rson I	than o s both r/truste	an ee)	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the
	related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)	(W. Ziroso mileo)	organization and related organizations
(1) DREW DUNLAVY		Ì								
	3.00	}			1					
CHAIRPERSON	0.00	X		X				0	0	0
(2) NICOLE KROUSE			ĺ							
	3.00	ì		1						
VICE CHAIRPERSON	0.00	X		X	L.			0	0	_0
(3) ERIC CLABAUGH										
	3.00			ļ						
SECRETARY	0.00	X	<u> </u>	X	L	Ш		0	0	0
(4) COLIN GALLAGHER								l		
	3.00	}								
TREASURER	0.00	X	<u> </u>	X	<u> </u>	Ш		0	0	0
(5) BETSY THOMAS		ļ								
	1.00	١				i				•
DIRECTOR	0.00	X	<u> </u>		<u> </u>			0	0	0
(6) BECKY COOPER	1 00	1			1					
n T D E GEO N	1.00	١,,	ĺ		ļ	H				•
DIRECTOR DELIBER	0.00	X	├-	_	_	$\vdash$		0	0	0
(7) CRISSY DWIRE	1.00	Ì	Ì		}					
DIRECTOR	0.00	$\mathbf{x}$								0
(8) MARNA RENTERIA	0.00	┼^	-			$\vdash$		0	0	
(6) MAKINA KENTEKIA	1.00	1								
DIRECTOR	0.00	x						o	0	0
(9) SONJA STRAHM	<u> </u>	1		$\vdash$						
(1) = 01:011 = = 1:0111	1.00			1			i			
DIRECTOR	0.00	x						o	0	0
(10) DUSTIN TIRPAK	<del></del>	1								
	1.00									
DIRECTOR	0.00	X						o	0	0
(11) BILL REYNOLDS								1		
i	1.00									
DIRECTOR	0.00	X	i i		ĺ	1 1		ol	0	0

Part VII Section A. Officers	, Directors, Tru	stee	s, K	ey E	mpl	oyee	s, a	nd Highest Compensated	Employees (continued)	
(A) Name and title	(B) Average hours per week (list any hours for	bo	x, unle	Pos check ess pe	rson	than o	an	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the
	related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)	(W-2)033 Midely	organization and related organizations
(12) JOSETTE JORDA	1									
DIRECTOR	1.00 0.00	x		L		_		0	0	0
(13) SHERI DAVIS	1.00	v	ŀ			ļ			0	
DIRECTOR (14) GARY GATMAN	0.00	X	-	-			<u> </u>	0	0	0
DIRECTOR	1.00	X			<u> </u>			0	0	0
(15) MIKE LANDRAM										
EXECUTIVE DIRECTOR	40.00	_	_	х	_	_		77,200	0	0
										<del></del>
*		_	_	_		\ 				
										,
						-				
1b Sub-total	l	<u> </u>		<u></u>	<u></u>	<u></u>		77,200		
c Total from continuation she d Total (add lines 1b and 1c)	ets to Part VII, S	Secti	on A	4			<b>&gt;</b>	77,200		
2 Total number of individuals (in				thos	e lis	ted a	bov		\$100,000 of	L
reportable compensation from  3 Did the organization list any for				truct	ا مم		mnl	ovae, or highest componen		Yes No
employee on line 1a? If "Yes," 4 For any individual listed on line	omplete Schele 1 chele	<i>dule</i> of re	<i>J for</i> porta	suci able	h ind	lividi. ipens	<i>ial</i> satio	n and other compensation	from the	3 X
organization and related organization	nizations greater	thar	\$15	0,00	1 °00	f "Ye	s," c	complete Schedule J for suc	ch	4 X
5 Did any person listed on line 1 for services rendered to the or									ındıvıdual	5 X
Section B. Independent Contracto	ors									
Complete this table for your five compensation from the organical compensation from the organical compensation.	zation Report co							lar year ending with or with	in the organization's tax ye	
Name and	(A) business address						_	Descript	(B) tion of services	(C) Compensation
								<del></del>	<del></del>	
								<del>-</del>		
	<del>.</del>						_	· · · · · · · · · · · · · · · · · · ·		
	<del></del>	_	_							
2 Total number of independent of	contractors (in all	ıdına	hut	not!	imit		that	on listed above) who		
received more than \$100,000								e lipren anove) Muo	0	Form <b>990</b> (2016)
DAA										Form 930 (2016)

Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (C) Unrelated business (A) Total revenue (B) Related or (D) Revenue exempt excluded from tax revenue under sections 512-514 revenue 1a Federated campaigns 1a 30,500 1b **b** Membership dues c Fundraising events 1c 1d d Related organizations 182,185 e Government grants (contributions) 1e f All other contributions, gifts, grants, and similar amounts not included above 360,164 1f g Noncash contributions included in lines 1a-1f h Total. Add lines 1a-1f 572,849 Program Service Revenue Busn. Code 611710 PROGRAM SERVICE FEES 13,325 13,325 b f All other program service revenue Total. Add lines 2a-2f 13,325 Investment income (including dividends, interest, and other similar amounts) 2,563 2,563 Income from investment of tax-exempt bond proceeds ▶ 5 Royalties (i) Real (ii) Personal 6a Gross rents **b** Less rental exps Rental inc or (loss) Net rental income or (loss) Gross amount from (II) Other (i) Securities sales of assets other than inventor **b** Less cost or other basis & sales exps c Gain or (loss) d Net gain or (loss) 8a Gross income from fundraising events Other Revenue (not including \$ of contributions reported on line 1c) See Part IV, line 18 39,491 6,615 b Less direct expenses c Net income or (loss) from fundraising events 32,876 32,876 9a Gross income from gaming activities See Part IV, line 19 b Less direct expenses c Net income or (loss) from garning activities 10a Gross sales of inventory, less returns and allowances b Less cost of goods sold b Net income or (loss) from sales of inventory Miscellaneous Revenue Busn. Code 11a b All other revenue Total. Add lines 11a-11d 35,439 Total revenue. See instructions 621,613 13,325

# Form 990 (2016) THE LITERACY ALLIANCE, INC Part IX Statement of Functional Expenses

Do n	Check if Schedule O contains a response of include amounts reported on lines 6b.	(A)	(B)	(C)	(D)
	b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21		L		
2	Grants and other assistance to domestic				
	individuals See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	77,200	38,600	19,300	19,300
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	301,022	257,732	25,599	17,691
8	Pension plan accruals and contributions (include	Ì	ľ		
	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits	2,010	1,297	271	442
10	Payroll taxes	30,031	23,766	3,467	2,798
11	Fees for services (non-employees)				
а	Management				
b	Legal				
С	Accounting	20,935	11,715	1,778	7,442
d	Lobbying				
e	Professional fundraising services See Part IV, line 17				
f	Investment management fees	318		318	
g	Other (If line 11g amount exceeds 10% of line 25, column				
	(A) amount, list line 11g expenses on Schedule O)	44,282	24,778	3,762	15,742
12	Advertising and promotion	2,782	687	212	1,883
13	Office expenses	14,039	5,877	772	7,390
14	Information technology				
15	Royalties				
16	Occupancy	32,109	16,364	2,778	12,967
17	Travel	135	101	14	20
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	25,287	18,892	2,289	4,106
23	Insurance	2,159	1,412	285	462
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.)				
а	EQUIPMENT RENTAL AND MAIN	24,108	17,902	2,590	3,616
b	STAFF DEVELOPMENT	12,214	8,527	792	2,895
С	SUPPLIES	9,589	7,063	1,245	1,281
d	RESOURCE MATERIAL	9,072	9,072		
е	All other expenses	23,633	15,060	509	8,064
25	Total functional expenses. Add lines 1 through 24e	630,925	458,845	65,981	106,099
26	Joint costs. Complete this line only if the				
	organization reported in column (B) joint costs				
	from a combined educational campaign and fundraising solicitation. Check here ▶ ☐ if		)		
	following SOP 98-2 (ASC 958-720)	Í			

Part X **Balance Sheet** Check if Schedule O contains a response or note to any line in this Part X (A) (B) Beginning of year End of year 150 150 Cash-non-interest bearing 279,171 256,981 Savings and temporary cash investments 2 30,181 41,425 3 3 Pledges and grants receivable, net Accounts receivable, net 4 5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees 5 Complete Part II of Schedule L 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 6 Notes and loans receivable, net 7 Inventories for sale or use 8 5,013 6,263 Prepaid expenses and deferred charges 10a Land, buildings, and equipment cost or 220,822 other basis Complete Part VI of Schedule D 10a 107,110 10b 138,999 113,712 b Less accumulated depreciation 10c Investments—publicly traded securities 11 58,461 63,283 12 Investments—other securities See Part IV, line 11 12 13 Investments—program-related See Part IV, line 11 13 14 Intangible assets 14 3,163 3,465 15 Other assets See Part IV, line 11 15 516,388 484,029 16 Total assets. Add lines 1 through 15 (must equal line 34) 16 17 Accounts payable and accrued expenses 45,590 17 7,842 18 Grants payable 18 26,180 19 Deferred revenue 19 43,092 20 Tax-exempt bond liabilities 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D 21 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 22 23 Secured mortgages and notes payable to unrelated third parties 23 Unsecured notes and loans payable to unrelated third parties 24 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 54,726 49,619 Total liabilities. Add lines 17 through 25 126,496 26 100,553 Organizations that follow SFAS 117 (ASC 958), check here Balances complete lines 27 through 29, and lines 33 and 34. 27 Unrestricted net assets 242,024 27 267,949 28 Temporarily restricted net assets 147,868 28 115,527 Net Assets or Fund 29 Permanently restricted net assets 29 Organizations that do not follow SFAS 117 (ASC 958), check here ▶ 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 32 383,476 33 Total net assets or fund balances 389,892 33 Total liabilities and net assets/fund balances 516,388 484,029 34

Form **990** (2016)

	1990 (2016) THE LITERACY ALLIANCE, INC 35-1710780				Pa	ge 12	
Pa	art 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_1_		62	21,	613	
2	Total expenses (must equal Part IX, column (A), line 25)	2		630,		925	
3	Revenue less expenses Subtract line 2 from line 1	3_			<u>-9,31</u>		
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		38	<u> 39, </u>	9,892	
5	Net unrealized gains (losses) on investments	5			2,	<u>896</u>	
6	Donated services and use of facilities	6					
7	Investment expenses	7					
8	Prior period adjustments	8					
9	Other changes in net assets or fund balances (explain in Schedule O)	9					
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line						
	33, column (B))	10		38	33 <i>, •</i>	476	
Pa	art XII Financial Statements and Reporting						
	Check if Schedule O contains a response or note to any line in this Part XII						
		_	_		Yes	No_	
1	Accounting method used to prepare the Form 990 Cash X Accrual Other						
	If the organization changed its method of accounting from a prior year or checked "Other," explain in						
	Schedule O					į	
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		Ĺ	2a		<u>X</u>	
	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					ĺ	
	Separate basis Consolidated basis Both consolidated and separate basis				i	É	
b	Were the organization's financial statements audited by an independent accountant?		Ĺ	2b	X		
	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						
	X Separate basis Consolidated basis Both consolidated and separate basis			- 1		Í	
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight		1	}		1	
	of the audit, review, or compilation of its financial statements and selection of an independent accountant?		L	2c	X	L	
	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		J	J			
	the Single Audit Act and OMB Circular A-133?		L	3a_		<u>X</u>	
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			3b			
	- · · · · · · · · · · · · · · · · · · ·		<del>-</del>	For	n 990	(2016)	

### **SCHEDULE A** (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

## **Public Charity Status and Public Support**

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt chantable trust.

Attach to Form 990 or Form 990-EZ.

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

OMB No 1545-0047

Open to Public Inspection

Employer identification number Name of the organization THE LITERACY ALLIANCE, INC 35-1710780 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) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 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). 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. 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) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). X 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) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II) 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). 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 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. 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. 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. 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. Check this box if the organization received a written determination from the IRS that it is a Type II, Type III, Type III functionally integrated, or Type III non-functionally integrated supporting organization Enter the number of supported organizations Provide the following information about the supported organization(s) (i) Name of supported (II) EIN (iii) Type of organization (iv) is the organization (v) Amount of monetary (vi) Amount of organization (described on lines 1-10 listed in your governing other support (see support (see above (see instructions)) document? instructions) instructions) (A) (B) (C) (D) (E)

Page 2

n 990 or 990-EZ) 2016 THE LITERACY ALLIANCE, INC 35-1710780
Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) Schedule A (Form 990 or 990-EZ) 2016 (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III If the organization fails to qualify under the tests listed below, please complete Part III)

Sec	tion A. Public Support			•			-
	ndar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	545,170	567,899	666,319	654,243	572,849	3,006,480
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge	7,680	7,680	7,680	7,680	7,680	38,400
4	Total. Add lines 1 through 3	552,850	575,579	673,999	661,923	580,529	3,044,880
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)			# # # # # # # # # # # # # # # # # # #			1 121 250
6	Public support. Subtract line 5 from line 4.						1,131,278 1,913,602
	tion B. Total Support	, .		<u></u>		<del> </del>	1,313,602
	ndar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
7	Amounts from line 4	552,850	575,579	673,999	661,923	580,529	3,044,880
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	7,581	3,145	1,378	-741	2,563	13,926
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10 11	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)	6,662	605	27,886	28,736	39,491	103,380
12	Total support. Add lines 7 through 10	(a.a	L	I_	L		3,162,186
13	Gross receipts from related activities, etc	•	accord third four	th or fifth toy your	as a section FO1/	12	13,325
13	First five years. If the Form 990 is for the organization, check this box and stop here	=	secona, tnira, tour	th, or fifth tax year	as a section 501(	c)(3)	▶ □
Sec	tion C. Computation of Public Su		nge				
14	Public support percentage for 2016 (line 6.	<del></del>	<del>-x</del>	(f))		14	60 52%
15	Public support percentage from 2015 Sche	• • •	· ·	(1))		15	59.69%
	33 1/3% support test—2016. If the organi			3. and line 14 is 33	1/3% or more, ch		33.03.0
	box and stop here. The organization quali						<b>▶</b> [X]
b	33 1/3% support test—2015. If the organi	zation did not check	c a box on line 13	or 16a, and line 15	ıs 33 1/3% or moı	e, check	_
	this box and stop here. The organization of						▶ □
17a	10%-facts-and-circumstances test—201	6. If the organizatio	n did not check a b	oox on line 13, 16a	, or 16b, and line	14 is	
	10% or more, and if the organization meet Part VI how the organization meets the "fa organization						▶ □
b	10%-facts-and-circumstances test—201 15 is 10% or more, and if the organization	meets the "facts-an	d-circumstances"	test, check this bo	x and stop here.		• []
18	Explain in Part VI how the organization me supported organization  Private foundation. If the organization did			-		·	▶ []
	instructions	THOSE CHOCK & DOX OF		- · · · · · · · · · · · · · · · · · · ·		chadula A (Form 99)	<b>&gt;</b>

#### 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)

Sect	ion A. All Supporting Organizations	<u> </u>		
,,,,,	ion A. All Supporting Organizations		Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing			
	documents? If "No," describe in Part VI how the supported organizations are designated. If designated by			
	class or purpose, describe the designation. If historic and continuing relationship, explain	_ 1		
2	Did the organization have any supported organization that does not have an IRS determination of status			
	under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported			
	organization was described in section 509(a)(1) or (2)	2		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer			
	(b) and (c) below	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and			
	satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the			
	organization made the determination	3ь		
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B)			
	purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use	3с		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If			
	"Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign			
	supported organization? If "Yes," describe in Part VI how the organization had such control and discretion			
	despite being controlled or supervised by or in connection with its supported organizations	4b		
С	Did the organization support any foreign supported organization that does not have an IRS determination			
	under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used			
	to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B)			
	purposes	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes,"			
	answer (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)	5a		····
b	Type I or Type II only. Was any added or substituted supported organization part of a class already			
	designated in the organization's organizing document?	5b		
С	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
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? If "Yes," provide detail in Part VI.	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor			
	(defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with			
_	regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7?			
_	If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more		- 1	
	disqualified persons as defined in section 4946 (other than foundation managers and organizations described		- 1	
	in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.	9a		
b	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which			
	the supporting organization had an interest? If "Yes," provide detail in Part VI.	9b		
С	Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit			
	from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.	9c		
I0a	Was the organization subject to the excess business holdings rules of section 4943 because of section			
	4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated			
	supporting organizations)? If "Yes," answer 10b below	10a		
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to			
	CONTRACTOR WINDS THE APPROXIMATION AND AVERAGE AVERAGE ACTION TO			

اع	igency temporary reduction	(see instructions)		0		<u>i</u>
	Check here if the current	year is the organization's first as a n	ion-functionally integrated T	ype II	I supporting organization (	see
	instructions)					

3

4

5

Minimum asset amount for prior year (from Section B, line 8, Column A)

Distributable Amount. Subtract line 5 from line 4, unless subject to

Enter greater of line 2 or line 3

Income tax imposed in prior year

Schedule A (Form 990 or 990-EZ) 2016

	le A (Form 990 or 990-EZ) 2016 THE LITERACY ALL		35-1710	) 780 Page <b>7</b>						
_Par		Supporting Organiza	tions (continued)	<del></del>						
Sect	ion D - Distributions		<u></u>	Current Year						
_1_	Amounts paid to supported organizations to accomplish exempt purp			<del></del>						
2	Amounts paid to perform activity that directly furthers exempt purpose	es of supported								
	organizations, in excess of income from activity									
3_	Administrative expenses paid to accomplish exempt purposes of sup	ported organizations	<del></del>	<del> </del>						
4	Amounts paid to acquire exempt-use assets									
5	Qualified set-aside amounts (prior IRS approval required)	<del></del>								
	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 to the	zation is responsive								
	(provide details in Part VI) See instructions	<del></del>	<del></del>	<del> </del>						
9	Distributable amount for 2016 from Section C, line 6		<del></del>	<u> </u>						
_10_	Line 8 amount divided by Line 9 amount	<del></del>	· · · · · · · · · · · · · · · · · · ·	400						
•	One Albert E. Blad Houte. Alle also de la la la la la	(i)	(ii)	(iii)						
	Section E - Distribution Allocations (see instructions)	Excess Distributions	Underdistributions	Distributable						
			Pre-2016	Amount for 2016						
_1_	Distributable amount for 2016 from Section C, line 6			<del></del>						
	Underdistributions, if any, for years prior to 2016									
2	(reasonable cause required-explain in Part VI) See instructions									
3	Excess distributions carryover, if any, to 2016			<del> </del>						
a										
b	<del></del>	1	***************************************							
c	From 2013									
d	From 2014		<del> </del>	<b>1</b>						
е	From 2015									
f	Total of lines 3a through e									
g	Applied to underdistributions of prior years									
h	Applied to 2016 distributable amount									
<u>i</u>	Carryover from 2011 not applied (see instructions)									
	Remainder Subtract lines 3g, 3h, and 3i from 3f									
4	Distributions for 2016 from									
	Section D, line 7 \$									
a	Applied to underdistributions of prior years									
b	Applied to 2016 distributable amount									
<u> </u>	Remainder Subtract lines 4a and 4b from 4									
5	Remaining underdistributions for years prior to 2016, 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 2016 Subtract lines 3h									
	and 4b from line 1 For result greater than zero, explain in									
	Part VI See instructions		***							
7	Excess distributions carryover to 2017. Add lines 3j									
	and 4c		*************************	<u> </u>						
8	Breakdown of line 7									
a			 							
b	Excess from 2013									
<u>c</u>	Excess from 2014		*****************	<u> </u>						
<u>d</u>	Excess from 2015									
_	Evenes from 2016	; ·		F						

Schedule A (Form 990 or 990-EZ) 2016 THE LITERACY ALLIANCE, INC 35-171<u>078</u>0 Supplemental Information. Provide the explanations required by Part II, line 10, Part II, line 17a or 17b; Part III, line 12, Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c, Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1, Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b,

3a and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E,

lines 2, 5, and 6. Also complete this part for any additional information. (See instructions )

PART II, LINE 10 - OTHER INCOME DETAIL

SPECIAL EVENT

97,363

OTHER INCOME

\$ 6,017

#### SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

## **Supplemental Financial Statements**

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

Attach to Form 990.

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

OMB No 1545-0047

2016

Open to Public

Inspection

Employer identification number

35-1710780 THE LITERACY ALLIANCE, 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. (b) Funds and other accounts (a) Donor advised funds Total number at end of year Aggregate value of contributions to (during year) 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 Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or education) Preservation of a historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space 2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Tax Year 2a a Total number of conservation easements 2b b Total acreage restricted by conservation easements c Number of conservation easements on a certified historic structure included in (a) 2c d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? 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 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) Yes No and section 170(h)(4)(B)(ii)? 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. 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

		CACY ALLIAN			35-1						age ∠
Pa	rt III Organizations Maintaining							sets (	contin	ıed)	
3	Using the organization's acquisition, accessicollection items (check all that apply)	on, and other record	s, check any of the follo	owing that ar	e a signific	cant use	of its				
а	Public exhibition	d ☐	Loan or exchange prog	ırams .							
b	Scholarly research	e 🗍	Other								
С	Preservation for future generations										
4	Provide a description of the organization's co	ollections and explain	how they further the o	rganization's	exempt p	urpose i	n Parl	t			
	XIII	•		J	• •	·					
5	During the year, did the organization solicit of	r receive donations of	of art, historical treasur	es, or other s	simılar						
•	assets to be sold to raise funds rather than t								Ye	s	No
Pa	Part IV Escrow and Custodial Arrangements.										
	Complete if the organization 990, Part X, line 21.	answered "Yes	on Form 990, Pa	rt IV, line 9	, or repo	orted a	n am	ount o	n Form	1	
1a	Is the organization an agent, trustee, custod	an or other intermed	ary for contributions of	r other asset	s not						
_	included on Form 990, Part X?		•						Ye	s 🗆	No
h	If "Yes," explain the arrangement in Part XIII	and complete the fo	llowing table								•
•	Tes, explain the arrangement in Fart XIII	and complete the le	g table			ſ			Amoun		
_	Beginning balance						1c		-		
						F	1d				
	Additions during the year					-	1e				
_	Distributions during the year					ŀ	1f				
f	•		04 (	- 4 1	ر ما المال المال الم	L	_!'		Ye		No
	Did the organization include an amount on F								16	's  -	NO
	If "Yes," explain the arrangement in Part XIII	Check here if the e	xplanation has been pr	ovided on Pa	III JII						
Pa	Endowment Funds.		" F 000 Da		0						
	Complete if the organization							1			
	<u> </u>	(a) Current year	(b) Prior year	(c) Two yea		(d) Thre		-	(e) Fou	years I	
1a	Beginning of year balance	58,461	56,729		1,372		52	,603		46,	<u>877</u>
þ	Contributions										
С	Net investment earnings, gains, and							1			
	losses	5,140	2,074	_	4,265		8	,926		6,	352
d	Grants or scholarships									_	
е	Other expenditures for facilities and										
	programs										
f	Administrative expenses	318	342		378			157			214
g	End of year balance	63,283	58,461		6,729		61	.,372		52,	603
2	Provide the estimated percentage of the cur	rent year end balanc	e (line 1g, column (a))	held as							
а	Board designated or quasi-endowment ▶		· · · · · · · · · · · · · · · · · · ·								
	Permanent endowment ▶ %										
c	Temporarily restricted endowment ▶	%									
•	The percentages on lines 2a, 2b, and 2c she										
32	Are there endowment funds not in the posse		ation that are held and	administered	l for the						
Ja	organization by	ssion of the organiza	ation that are note and	44111111010101						Yes	No
	(i) unrelated organizations								3a(i)	X	
	•								3a(ii)		Х
	(ii) related organizations		and on Cohodula D2						3b		- 12
b	If "Yes" on line 3a(ii), are the related organiz							•	30		
4	Describe in Part XIII the intended uses of the		owment tunas			-					
Pa	art VI Land, Buildings, and Equ		" F 000 D-		14- 0		000	D-4 V	1: 4	^	
	Complete if the organization							Part A			
	Description of property	(a) Cost or other I	[			ccumulated	1		(d) Book	value	
		(investment)	(othe	er)	de	preciation					
1a	Land							<del> </del>			
b	Buildings							<u> </u>			
C	Leasehold improvements										
d	Equipment		2:	20,822		107	11	이	1	13 <u>,</u>	<u>712</u>
е	Other										
Tota	I. Add lines 1a through 1e (Column (d) must	equal Form 990, Par	t X, column (B), line 10	)c)				<u> </u>	1	13,	712

35.	_ 1 -	7 <b>1</b> 0	70	Λ

Sched <u>ule D</u> (F	orm 990) 2016 THE LITERACY ALLIANCE	I, INC	35-1710780	Page <b>3</b>
Part VII	Investments—Other Securities.			
	Complete if the organization answered "Yes" on	Form 990, Part IV, line	e 11b. See Form 990, F	Part X, line 12.
	(a) Description of security or category	(b) Book value	(c) Method of	valuation
	(including name of security)		Cost or end-of-yea	ar market value
(1) Financial	derivatives			
(2) Closely-he	eld equity interests			
	OMMUNITY FOUNDATION OF GREATE	63,283	MARKET	
(A)				
(B)				
(C)				
(D)				
(E)				
(F)				
(G)			<del> </del>	-
(H)			<del></del>	
	n (b) must equal Form 990, Part X, col (B) line 12)▶	63,283		· · · · · · · · · · · · · · · · · · ·
Part VIII	Investments—Program Related.			
	Complete if the organization answered "Yes" on	Form 990, Part IV, line	e 11c See Form 990. F	Part X, line 13.
	(a) Description of investment	(b) Book value	(c) Method of	
		''	Cost or end-of-year	
(1)	N SAME			
(2)	· · · · · · · · · · · · · · · · · · ·			
(3)				
(4)				
(5)			<del></del>	
(6)	<del></del>			
(7)			w <del>.</del>	
(8)			*******	
(9)			<del></del>	
	n (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	e 11d See Form 990, F	Part X, line 15
	(a) Description			(b) Book value
(1)				
(2)		•		
(3)				
(4)		. ,		
(5)				
(6)				
(7)				
(8)				
(9)				
	n (b) must equal Form 990, Part X, col (B) line 15)		<u> </u>	
Part X	Other Liabilities.			<del></del>
	Complete if the organization answered "Yes" on	Form 990, Part IV, line	e 11e or 11f See Form	990, Part X,
	line 25			
1.	(a) Description of liability	(b) Book value		
	income taxes			
(2) LEASI	EHOLD OBLIGATION	49,619		
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				

49,619

Total. (Column (b) must equal Form 990, Part X, col (B) line 25 ) ▶

<sup>2.</sup> 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

Sche	dele D (Form 990) 2016 THE LITERACY ALLIANCE,	INC		35-171078	0	
Pa	art XI Reconciliation of Revenue per Audited Financia	I Statement	s W	ith Revenue per Ret	urn.	
	Complete if the organization answered "Yes" on Fo	rm 990, Part	IV,	line 12a.		
1	Total revenue, gains, and other support per audited financial statements				1	636,631
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12	_				
а	Net unrealized gains (losses) on investments		2a_	2,896		
b	Donated services and use of facilities		2b_	12,440		
С	Recoveries of prior year grants					
d	Other (Describe in Part XIII )					
е	Add lines 2a through 2d				2e	<u>15,336</u>
3	Subtract line 2e from line 1				3	621,295
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1	1	1			
а	Investment expenses not included on Form 990, Part VIII, line 7b					
b	Other (Describe in Part XIII )		4b_			
С	Add lines 4a and 4b				4c_	318
5_	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line	12)			5	621,613
Pa	art XII Reconciliation of Expenses per Audited Financi	al Statemen	ts V	Vith Expenses per F	Retur	n.
	Complete if the organization answered "Yes" on Fo	rm 990, Part	IV,	line 12a.		
1	Total expenses and losses per audited financial statements				1	643,047
2	Amounts included on line 1 but not on Form 990, Part IX, line 25					
а	Donated services and use of facilities		2a_	12,440		
b	Prior year adjustments		2b			
C	Other losses		2c			
d	Other (Describe in Part XIII )		2d			
е	Add lines 2a through 2d				2e	12,440
3	Subtract line 2e from line 1				3	630,607
4	Amounts included on Form 990, Part IX, line 25, but not on line 1	1	ļ			
а	Investment expenses not included on Form 990. Part VIII, line 7b		4a	318		

Part XIII Supplemental Information.

b Other (Describe in Part XIII)c Add lines 4a and 4b

Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line

2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b Also complete this part to provide any additional information PART V, LINE 4 - INTENDED USES FOR ENDOWMENT FUNDS

5 Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)

ENDOWMENT EXISTS FOR THE PURPOSE OF ENRICHING AND PERPETUATING THE ORGANIZATION IN ITS ENDEAVORS BY PROVIDING A PERMANENT SOURCE OF REVENUE FOR THE ORGANIZATION.

4b

#### PART X - FIN 48 FOOTNOTE

THE ORGANIZATION HAS ADOPTED FASB ASC 740-10-25 AND DETERMINED NO MATERIAL UNRECOGNIZED TAX BENEFITS OR LIABILITIES EXIST AS OF AUGUST 31, 2017. THE ADOPTION OF FASB ASC 740-10-25 DID NOT IMPACT THE ORGANIZATION'S FINANCIAL POSITION OR RESULTS OF OPERATIONS. IF APPLICABLE, THE ORGANIZATION WILL RECOGNIZE INTEREST AND PENALTIES RELATED TO UNDERPAYMENT OF INCOME TAXES AS INCOME TAX EXPENSE. AS OF AUGUST 31, 2017, THE ORGANIZATION HAD NO AMOUNTS

Part XIII Supplemental Information (continued)

RELATED TO UNRECOGNIZED INCOME TAX BENEFITS AND NO AMOUNTS RELATED TO ACCRUED INTEREST AND PENALTIES. THE ORGANIZATION DOES NOT ANTICIPATE ANY SIGNIFICANT CHANGES TO UNRECOGNIZED INCOME TAX BENEFITS OVER THE NEXT YEAR. THE ORGANIZATION IS GENERALLY NO LONGER SUBJECT TO EXAMINATION BY FEDERAL AND STATE AGENCIES FOR YEARS ENDED BEFORE AUGUST 31, 2014.

Department of the Treasury Internal Revenue Service

### SCHEDULEG (Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

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

Attach to Form 990 or Form 990-EZ.

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

OMB No 1545-0047

Name of the organization				Employer identifica	
THE LITERACY ALLIA				35-17107	
Part I Fundraising Activities. Complete if Form 990-EZ filers are not required to	the organization of complete this	on answe s part	ered "Yes" on Form 9	190, Part IV, line	17. 
1 Indicate whether the organization raised funds through	any of the following	g activities	Check all that apply		
a Mail solicitations	e Solicitation	of non-go	vernment grants		
b Internet and email solicitations	f Solicitation	of govern	ment grants		
c Phone solicitations	g Special fun	idraising e	vents		
d In-person solicitations					
2a Did the organization have a written or oral agreement w or key employees listed in Form 990, Part VII) or entity	in connection with	profession	nal fundraising services?		Yes No
b If "Yes," list the 10 highest paid individuals or entities (for compensated at least \$5,000 by the organization	ındraisers) pursua	nt to agree	ements under which the fu	indraiser is to be	
(i) Name and address of individual or entity (fundraiser)	(II) Activity	(iii) Did fund raiser have custody or control of contributions	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col (i)	(vi) Amount paid to (or retained by) organization
	†	Yes No	,		
1			]		
2	<del> </del>	<del>                                     </del>	† — †		
3					
4					
		-	<u> </u>		
5					
6				<del></del>	
7					
8					
9					
10					
Total	<del></del>	<u> </u>	<del>  -                                   </del>	<del></del>	
3 List all states in which the organization is registered or I	icensed to solicit o	ontribution	ns or has been notified it is	e evemnt from	<u> </u>

registration or licensing

DAA

Schedale G (Form 990.or 990-EZ) 2016

P	art II	Fundraising Ethan \$15,000 of gross receipts of	f fundra	aising event	contributi									
				(a) Event #1	-		(b) Even	#2		N	(c) Other events	_		otal events
				(event type)			(event typ	e)		<u> </u>	(total number)			ol (c))
Revenue	1 Gros	ss receipts		3	39,491									39,491
	2 1 - 00	Contributions	}						ļ					
		s income (line 1 minus			39,491									39,491
	4 Cast	n prizes						<u>.</u>						
	5 None	cash prizes												
enses	6 Rent	/facility costs												
Direct Expenses	<b>7</b> Food	d and beverages												
Dire	8 Ente	rtainment									<del></del>			
	9 Othe	er direct expenses		<del></del>	6,615	<u> </u>				<u></u>				6,615
		ct expense summary		-	-							<b>&gt;</b>		6,615 32,876
P	art III	Gaming. Com					d "Yes" on	Form 99	90. Pa	art l	V. line 19. o	r report	ted more	32,010
		than \$15,000 c												
Revenue				(a) Bingo			(b) Pull tab				(c) Other gamin	g		gaming (add rough col (c))
æ	1 Gros	s revenue												
														_
Direct Expenses	2 Cash										-			
ot Exp	3 None	cash prizes	_											
Dire	4 Rent	/facility costs								-			<del></del>	
	5 Othe	r direct expenses												
	6 Volu	nteer labor	_	Yes No	% 		Yes No	· · ·	%		Yes No	%		<u>_</u> _
i	7 Direc	ct expense summary	Add line	es 2 through 5	ın column (	d)						•	<del></del>	
	8 Net (	gaming income sumr	nary Su	btract line 7 fro	m line 1, co	olumn	(d)					<b>&gt;</b>		
а		e state(s) in which the ganization licensed to xplain	-											Yes 🗌 No
	Were any	y of the organization' explain <sup>.</sup>	's gamını	g licenses revo	ked, suspei	nded,	or terminated	during the	e tax y	ear?	,			Yes 🗌 No

THE LITERACY ALLIANCE,

INC

Page 2

35-1710780

Schedule G (Form 990 or 990-EZ) 2016

Caba	edwle G (F,orm 990 or 990-EZ) 2016 THE LITERACY ALLIANCE, INC	35-1710780	Page 3
11	odele G (Form 990 or 990-EZ) 2016 THE LITERACY ALLIANCE, INC  Does the organization conduct gaming activities with nonmembers?	Yes	<del></del>
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 No
13	Indicate the percentage of gaming activity conducted in	٠٠٠ بي	
а	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	<u> </u>	
	records		
	Name ▶		
	Address ▶		
15a	Does the organization have a contract with a third party from whom the organization receives gaming		_
	revenue?	Yes	No
b	If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ and the	е	
С	amount of gaming revenue retained by the third party ► \$  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 ▶ \$		
Pai	* Supplemental Information. Provide the explanations required by Part I, line 2b, column		
	Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any addition	nal information	
	See instructions		

SCHEDULE O (Form 990 or 990-EZ) Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

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

ZUIO

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

THE LITERACY ALLIANCE, INC

35-1710780

**Employer identification number** 

FORM 990, PART I, LINE 6

THE LITERACY ALLIANCE VOLUNTEER TUTORS ARE TRAINED TO WORK WITH ADULT LEARNERS IN BOTH ONE-ON-ONE AND CLASSROOM SETTINGS BY PROVIDING INSTRUCTION AND STUDY ASSISTANCE IN READING, WRITING AND MATH.

FORM 990, PART VI, LINE 11B - ORGANIZATION'S PROCESS TO REVIEW FORM 990
THE COMPLETED FORM 990 IS PREPARED BY A CPA FIRM, IN CONSULTATION WITH
MANAGEMENT. THE FORM IS PRESENTED TO ALL BOARD MEMBERS VIA EMAIL WITH
INSTRUCTIONS TO RESPOND TO THE EXECUTIVE DIRECTOR WITH ANY QUESTIONS. THE
FINANCE COMMITTEE MEETS AND REVIEWS THE FORM 990 PRIOR TO FILING.

FORM 990, PART VI, LINE 12C - ENFORCEMENT OF CONFLICTS POLICY

ANY CONFLICTS OF INTEREST ARE REVIEWED AND ADDRESSED AT MONTHLY BOARD

MEETINGS.

FORM 990, PART VI, LINE 15A - COMPENSATION PROCESS FOR TOP OFFICIAL

THE 2016 NORTHEAST INDIANA NONPROFIT SALARY REPORT WAS USED AS A REFERENCE

FOR ESTABLISHING THE ED'S AND PROGRAM MANAGER'S SALARIES. THOSE SALARIES

WERE REVIEWED AND APPROVED BY THE BOARD.

FORM 990, PART VI, LINE 15B - COMPENSATION PROCESS FOR OFFICERS

ONLY THE EXECUTIVE DIRECTOR IS PAID SALARY, NOT THE OFFICERS. SALARY

INCREASES ARE INCLUDED IN ANNUAL BUDGET APPROVAL.

FORM 990, PART VI, LINE 18 - NO PUBLIC DISCLOSURE EXPLANATION

Schedele & (F&m 990 or 990-EZ) (2016)

Page 2

Name of the organization

Employer identification number

THE LITERACY ALLIANCE, INC

35-1710780

THE ORGANIZATION'S IRS FORM 990 FOR THE PAST THREE YEARS CAN BE FOUND AT WWW.GUIDESTAR.ORG.

FORM 990, PART VI, LINE 19 - GOVERNING DOCUMENTS DISCLOSURE EXPLANATION
ALL GOVERNING DOCUMENTS, POLICIES AND FINANCIAL STATEMENTS ARE MAINTAINED
IN THE ADMINISTRATIVE OFFICES. UPON REQUEST, THESE ITEMS ARE AVAILABLE TO
THE PUBLIC.