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# Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

**2010**

**Open to Public Inspection**

Department of the Treasury  
Internal Revenue Service

▶ The organization may have to use a copy of this return to satisfy state reporting requirements

**A** For the 2010 calendar year, or tax year beginning **JULY 01**, 2010, and ending **JUNE 30**, 20 **11**

**B** Check if applicable:  
 Address change  
 Name change  
 Initial return  
 Terminated  
 Amended return  
 Application pending

**C** Name of organization **THE ALAIN LOCKE INITIATIVE**  
 Doing Business As **(F/K/A INNER-CITY TEACHING CORPS OF AMERICA)**  
 Number and street (or P O box if mail is not delivered to street address) Room/suite  
**150 N MICHIGAN AVENUE 2100**  
 City or town, state or country, and ZIP + 4  
**CHICAGO, IL 60601-7559**

**D** Employer identification number  
**36-3764476**

**E** Telephone number  
**(312)893-6600**

**G** Gross receipts \$ **8,399,164**

**H(a)** Is this a group return for affiliates?  Yes  No  
**H(b)** Are all affiliates included?  Yes  No  
 If "No," attach a list (see instructions)

**I** Tax-exempt status  501(c)(3)  501(c) ( ) ◀ (insert no)  4947(a)(1) or  527

**J** Website: ▶ **HTTP://WWW.ALAINLOCKE.ORG**

**H(c)** Group exemption number ▶

**K** Form of organization  Corporation  Trust  Association  Other ▶

**L** Year of formation **1991**

**M** State of legal domicile **IL**

**Part I Summary**

1 Briefly describe the organization's mission or most significant activities: **THE ALAIN LOCKE INITIATIVE IS AN ORGANIZATION DEVOTED TO THE BETTERMENT OF URBAN CHILDREN THROUGH EDUCATION.**

2 Check this box  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)	3
4	Number of independent voting members of the governing body (Part VI, line 1b)	3
5	Total number of individuals employed in calendar year 2010 (Part V, line 2a)	80
6	Total number of volunteers (estimate if necessary)	10
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

	Prior Year	Current Year
8	2,721,484	7,360,743
9	957,590	1,028,125
10	12,084	7,886
11	15,421	1,951
12	3,706,579	8,398,705
13	800,000	300,000
14	0	0
15	1,407,834	1,517,540
16a	0	0
b	170,243	
17	1,513,755	1,548,149
18	3,721,589	3,365,689
19	-15,010	5,033,016

	Beginning of Current Year	End of Year
20	988,525	5,823,780
21	631,669	433,908
22	356,856	5,389,872

SCANNED APR 17 2012 Activities & Governance

RECEIVED  
APR 17 2012  
CROWE HORWATH LLP

**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 *Claire Hartfield* Date **3/22/12**  
**CLAIRE HARTFIELD, SECRETARY**  
 Type or print name and title

**Paid Preparer Use Only**

Print/Type preparer's name: **Nicole Bencik** Preparer's signature: *Nicole Bencik* Date: **2012 03 14 14:22:18 -05'00'** Check  if self-employed PTIN: \_\_\_\_\_

Firm's name ▶ **CROWE HORWATH LLP** Firm's EIN ▶ \_\_\_\_\_  
 Firm's address ▶ **70 WEST MADISON STREET, SUITE 700, CHICAGO, IL 60602-4903** Phone no: **(312)899-7000**

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

**Part III Statement of Program Service Accomplishments**

Check if Schedule O contains a response to any question in this Part III

1 Briefly describe the organization's mission:  
**THE ALAIN LOCKE INITIATIVE IS AN ORGANIZATION DEVOTED TO CLOSING THE ACHIEVEMENT GAP BY ENERGIZING URBAN SCHOOL WITH THE HIGH IMPACT LEADERS OF TODAY AND TOMORROW. THE ORGANIZATION HAS THREE PRIMARY PROGRAM COMPONENTS: A TEACHER DEVELOPMENT PROGRAM (INNER-CITY TEACHING CORPS); (CONTINUED IN SCHEDULE O)**

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 exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts 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 \$ 3,041,155 including grants of \$ 300,000 ) (Revenue \$ 1,030,076 )  
**THE RYAN FELLOWSHIP IS IN ITS FIRST YEAR. THE RYAN FELLOWS ARE SOME OF THE HIGHEST ACHIEVING TEACHERS IN THE NATION WITH DEMONSTRATED ABILITY TO ACCELERATE STUDENT ACHIEVEMENT IN URBAN SCHOOLS. PRINCIPALS THAT COMPLETED THE PREDECESSOR PRINCIPAL DEVELOPMENT PROGRAM ACHIEVED AN AVERAGE +32% STUDENT GROWTHS IN THE FIRST YEAR OF OPERATION. (CONTINUED IN SCHEDULE O)**

4b (Code: ) (Expenses \$ including grants of \$ ) (Revenue \$ )

4c (Code: ) (Expenses \$ including grants of \$ ) (Revenue \$ )

4d Other program services. (Describe in Schedule O )  
(Expenses \$ 0 including grants of \$ 0 ) (Revenue \$ 0 )

4e Total program service expenses ▶ 3,041,155

**Part IV Checklist of Required Schedules**

	Yes	No
<b>1</b> Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A . . . . .</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>2</b> Is the organization required to complete Schedule B, Schedule of Contributors? (see instructions) . . . . .	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>3</b> Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I . . . . .</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>4</b> <b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II . . . . .</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>5</b> Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III . . . . .</i>	<input type="checkbox"/>	<input type="checkbox"/>
<b>6</b> Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I . . . . .</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>7</b> Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II . . . . .</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>8</b> Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III . . . . .</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>9</b> Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV . . . . .</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>10</b> Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V . . . . .</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>11</b> If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.		
<b>a</b> Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI . . . . .</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>b</b> 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? <i>If "Yes," complete Schedule D, Part VII . . . . .</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>c</b> 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? <i>If "Yes," complete Schedule D, Part VIII . . . . .</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>d</b> Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX . . . . .</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>e</b> Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X . . . . .</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>f</b> 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)? <i>If "Yes," complete Schedule D, Part X . . . . .</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>12 a</b> Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI, XII, and XIII . . . . .</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>b</b> Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional . . . . .</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>13</b> Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E . . . . .</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>14 a</b> Did the organization maintain an office, employees, or agents outside of the United States? . . . . .	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>b</b> Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? <i>If "Yes," complete Schedule F, Parts I and IV . . . . .</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>15</b> Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? <i>If "Yes," complete Schedule F, Parts II and IV . . . . .</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>16</b> Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? <i>If "Yes," complete Schedule F, Parts III and IV . . . . .</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>17</b> 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? <i>If "Yes," complete Schedule G, Part I (see instructions) . . . . .</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>18</b> Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II . . . . .</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>19</b> Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III . . . . .</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>20 a</b> Did the organization operate one or more hospitals? <i>If "Yes," complete Schedule H . . . . .</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>b</b> If "Yes" to line 20a, did the organization attach its audited financial statements to this return? <b>Note.</b> Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Part IV Checklist of Required Schedules (continued)

Table with 3 columns: Question ID, Question Text, and Yes/No checkboxes. Rows include questions 21 through 38 regarding grants, compensation, bond issues, and organizational structure.

**Part V Statements Regarding Other IRS Filings and Tax Compliance**

Check if Schedule O contains a response to any question in this Part V

		Yes	No		
<b>1a</b>	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	33		
<b>b</b>	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0		
<b>c</b>	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c		✓	
<b>2a</b>	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a	80		
<b>b</b>	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? <b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. (see instructions)	2b		✓	
<b>3a</b>	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a			✓
<b>b</b>	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b			
<b>4a</b>	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a			✓
<b>b</b>	If "Yes," enter the name of the foreign country: _____ See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.	4b			
<b>5a</b>	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a			✓
<b>b</b>	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b			✓
<b>c</b>	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c			
<b>6a</b>	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?	6a			✓
<b>b</b>	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b			
<b>7</b>	<b>Organizations that may receive deductible contributions under section 170(c).</b>				
<b>a</b>	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a			✓
<b>b</b>	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b			
<b>c</b>	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c			✓
<b>d</b>	If "Yes," indicate the number of Forms 8282 filed during the year	7d			
<b>e</b>	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e			✓
<b>f</b>	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f			✓
<b>g</b>	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g			
<b>h</b>	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h			
<b>8</b>	<b>Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.</b> Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8			
<b>9</b>	<b>Sponsoring organizations maintaining donor advised funds.</b>				
<b>a</b>	Did the organization make any taxable distributions under section 4966?	9a			
<b>b</b>	Did the organization make a distribution to a donor, donor advisor, or related person?	9b			
<b>10</b>	<b>Section 501(c)(7) organizations.</b> Enter:				
<b>a</b>	Initiation fees and capital contributions included on Part VIII, line 12	10a			
<b>b</b>	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b			
<b>11</b>	<b>Section 501(c)(12) organizations.</b> Enter:				
<b>a</b>	Gross income from members or shareholders	11a			
<b>b</b>	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b			
<b>12a</b>	<b>Section 4947(a)(1) non-exempt charitable trusts.</b> Is the organization filing Form 990 in lieu of Form 1041?	12a			
<b>b</b>	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b			
<b>13</b>	<b>Section 501(c)(29) qualified nonprofit health insurance issuers.</b>				
<b>a</b>	Is the organization licensed to issue qualified health plans in more than one state? <b>Note.</b> See the instructions for additional information the organization must report on Schedule O.	13a			
<b>b</b>	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b			
<b>c</b>	Enter the amount of reserves on hand	13c			
<b>14a</b>	Did the organization receive any payments for indoor tanning services during the tax year?	14a			✓
<b>b</b>	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b			

**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 to any question in this Part VI

**Section A. Governing Body and Management**

		Yes	No
<b>1a</b>	Enter the number of voting members of the governing body at the end of the tax year . . . . .	<b>1a</b> 3	
<b>b</b>	Enter the number of voting members included in line 1a, above, who are independent . . . . .	<b>1b</b> 3	
<b>2</b>	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? . . . . .	<b>2</b> ✓	
<b>3</b>	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? . . . . .	<b>3</b>	✓
<b>4</b>	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	<b>4</b> ✓	
<b>5</b>	Did the organization become aware during the year of a significant diversion of the organization's assets? . . . . .	<b>5</b>	✓
<b>6</b>	Does the organization have members or stockholders? . . . . .	<b>6</b>	✓
<b>7a</b>	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body? . . . . .	<b>7a</b>	✓
<b>b</b>	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	<b>7b</b>	✓
<b>8</b>	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
<b>a</b>	The governing body? . . . . .	<b>8a</b> ✓	
<b>b</b>	Each committee with authority to act on behalf of the governing body? . . . . .	<b>8b</b> ✓	
<b>9</b>	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 . . . . .	<b>9</b>	✓

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

		Yes	No
<b>10a</b>	Does the organization have local chapters, branches, or affiliates? . . . . .	<b>10a</b>	✓
<b>b</b>	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization? . . . . .	<b>10b</b>	
<b>11a</b>	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form? . . . . .	<b>11a</b> ✓	
<b>b</b>	Describe in Schedule O the process, if any, used by the organization to review this Form 990.		
<b>12a</b>	Does the organization have a written conflict of interest policy? If "No," go to line 13 . . . . .	<b>12a</b> ✓	
<b>b</b>	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts? . . . . .	<b>12b</b> ✓	
<b>c</b>	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done. . . . .	<b>12c</b> ✓	
<b>13</b>	Does the organization have a written whistleblower policy? . . . . .	<b>13</b> ✓	
<b>14</b>	Does the organization have a written document retention and destruction policy? . . . . .	<b>14</b> ✓	
<b>15</b>	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?		
<b>a</b>	The organization's CEO, Executive Director, or top management official . . . . .	<b>15a</b> ✓	
<b>b</b>	Other officers or key employees of the organization . . . . .	<b>15b</b>	
	If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.) . . . . .		
<b>16a</b>	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? . . . . .	<b>16a</b>	✓
<b>b</b>	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements? . . . . .	<b>16b</b>	

**Section C. Disclosure**

- 17** List the states with which a copy of this Form 990 is required to be filed ► IL
- 18** Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply.  
 Own website     Another's website     Upon request
- 19** Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public.
- 20** State the name, physical address, and telephone number of the person who possesses the books and records of the organization: ► JUDY MCGARVEY  
150 N MICHIGAN AVENUE, SUITE 2100, CHICAGO, IL 60601-7559, (312)893-6600

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

Check if Schedule O contains a response to any question 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 (describe hours for related organizations in Schedule O)	(C) Position (check all that apply)						(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) PATRICK G RYAN JR PRESIDENT/TREASURER	15	✓		✓			0	0	0	
(2) LYDIA RYAN DIRECTOR	1	✓					0	0	0	
(3) ROBERT J W RYAN DIRECTOR	1	✓					0	0	0	
(4) JUDY MCGARVEY ASSISTANT TREASURER	10			✓			0	0	0	
(5) CLAIRE HARTFIELD SECRETARY/COO	40			✓			117,800	0	11,437	
(6) DAWN MOORE ASSISTANT TREASURER	1			✓			0	0	0	
(7) ELAINE BERNDDES DIRECTOR OF RYAN FELLOWS	40					✓	103,500	0	10,916	
(8)										
(9)										
(10)										
(11)										
(12)										
(13)										
(14)										
(15)										
(16)										

**Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees** (continued)

(A) Name and title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (check all that apply)						(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			
(17)										
(18)										
(19)										
(20)										
(21)										
(22)										
(23)										
(24)										
(25)										
(26)										
(27)										
(28)										
<b>1b Sub-total</b>							221,300	0	22,353	
<b>c Total from continuation sheets to Part VII, Section A</b>										
<b>d Total (add lines 1b and 1c)</b>							221,300	0	22,353	

**2** Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization **2**

	Yes	No
<b>3</b> Did the organization list any <b>former</b> officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>		✓
<b>4</b> For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>		✓
<b>5</b> Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>		✓

**Section B. Independent Contractors**

**1** Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization.

(A) Name and business address	(B) Description of services	(C) Compensation

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

**Part VII Statement of Revenue**

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514		
<b>Contributions, gifts, grants and other similar amounts</b>	<b>1a</b>	Federated campaigns	<b>1a</b>						
	<b>b</b>	Membership dues	<b>1b</b>						
	<b>c</b>	Fundraising events	<b>1c</b>						
	<b>d</b>	Related organizations	<b>1d</b>						
	<b>e</b>	Government grants (contributions)	<b>1e</b>	305,000					
	<b>f</b>	All other contributions, gifts, grants, and similar amounts not included above	<b>1f</b>	7,055,743					
	<b>g</b>	Noncash contributions included in lines 1a-1f \$							
	<b>h</b>	<b>Total.</b> Add lines 1a-1f		7,360,743					
<b>Program Service Revenue</b>				<b>Business Code</b>					
	<b>2a</b>	<b>PROGRAM FEES</b>		1,028,125	1,028,125				
	<b>b</b>			0					
	<b>c</b>			0					
	<b>d</b>			0					
	<b>e</b>			0					
	<b>f</b>	All other program service revenue		0	0	0	0		
	<b>g</b>	<b>Total.</b> Add lines 2a-2f		1,028,125					
<b>Other Revenue</b>	<b>3</b>	Investment income (including dividends, interest, and other similar amounts)		48			48		
	<b>4</b>	Income from investment of tax-exempt bond proceeds		0					
	<b>5</b>	Royalties		0					
	<b>6a</b>	Gross Rents	(i) Real	(ii) Personal					
	<b>b</b>	Less: rental expenses							
	<b>c</b>	Rental income or (loss)	0	0					
	<b>d</b>	Net rental income or (loss)			0				
	<b>7a</b>	Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other					
				8,297					
			<b>b</b>	Less: cost or other basis and sales expenses		459			
			<b>c</b>	Gain or (loss)	0	7,838			
	<b>d</b>	Net gain or (loss)			7,838		7,838		
	<b>8a</b>	Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18							
<b>b</b>			Less: direct expenses						
<b>c</b>			Net income or (loss) from fundraising events			0			
<b>9a</b>	Gross income from gaming activities. See Part IV, line 19								
		<b>b</b>	Less: direct expenses						
		<b>c</b>	Net income or (loss) from gaming activities			0			
<b>10a</b>	Gross sales of inventory, less returns and allowances								
		<b>b</b>	Less: cost of goods sold						
		<b>c</b>	Net income or (loss) from sales of inventory			0			
Miscellaneous Revenue			<b>Business Code</b>						
<b>11a</b>	<b>OTHER INCOME</b>			1,951	1,951				
<b>b</b>				0					
<b>c</b>				0					
<b>d</b>	All other revenue			0	0	0	0		
<b>e</b>	<b>Total.</b> Add lines 11a-11d			1,951					
<b>12</b>	<b>Total revenue.</b> See instructions.			8,398,705	1,030,076	0	7,886		

**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) but are not required to complete columns (B), (C), and (D).

<i>Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.</i>		(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21 . . . . .	300,000	300,000		
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22 . . . . .	0			
3	Grants and other assistance to governments, organizations, and individuals outside the U.S. 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 . . . . .	131,606	131,606		
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 . . . . .	1,146,057	1,039,680	99,860	6,517
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions) . . . . .	29,591	29,591		
9	Other employee benefits . . . . .	103,264	103,264		
10	Payroll taxes . . . . .	107,022	100,899	6,123	
11	Fees for services (non-employees):				
a	Management . . . . .	0			
b	Legal . . . . .	1,005		1,005	
c	Accounting . . . . .	25,915		25,915	
d	Lobbying . . . . .	0			
e	Professional fundraising services. See Part IV, line 17	0			
f	Investment management fees . . . . .	0			
g	Other . . . . .	342,169	307,094	11,816	23,259
12	Advertising and promotion . . . . .	11,675	11,565	110	
13	Office expenses . . . . .	227,817	98,731		129,086
14	Information technology . . . . .	37,427	29,651		7,776
15	Royalties . . . . .	0			
16	Occupancy . . . . .	212,989	212,989		
17	Travel . . . . .	79,541	77,934		1,607
18	Payments of travel or entertainment expenses for any federal, state, or local public officials . . . . .	0			
19	Conferences, conventions, and meetings . . . . .	34,691	34,286		405
20	Interest . . . . .	3,966		3,966	
21	Payments to affiliates . . . . .	0			
22	Depreciation, depletion, and amortization . . . . .	36,204	36,204		
23	Insurance . . . . .	100,589	99,007	1,582	
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24f. If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O.)				
a	GRADUATE SCHOOL TUITION/BOOKS	302,799	302,799		
b	SCHOOL SCHOLARSHIP SUPPORT	38,436	38,436		
c	SUMMER SCHOOL PROGRAM	32,452	32,452		
d	SCHOOL MENTOR & ACTIVITIES	12,822	12,822		
e	GENERAL OPERATING EXPENSES	7,258	7,258		
f	All other expenses	40,394	34,887	3,914	1,593
25	<b>Total functional expenses.</b> Add lines 1 through 24f	<b>3,365,689</b>	<b>3,041,155</b>	<b>154,291</b>	<b>170,243</b>
26	<b>Joint costs.</b> Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720). Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation . . . . .	0			

**Part X Balance Sheet**

		(A)		(B)	
		Beginning of year		End of year	
<b>Assets</b>	<b>1</b> Cash—non-interest-bearing . . . . .		500	<b>1</b>	500
	<b>2</b> Savings and temporary cash investments . . . . .		769,818	<b>2</b>	736,246
	<b>3</b> Pledges and grants receivable, net . . . . .			<b>3</b>	
	<b>4</b> Accounts receivable, net . . . . .		66,763	<b>4</b>	4,964,681
	<b>5</b> Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L . . . . .			<b>5</b>	
	<b>6</b> 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) . . . . .			<b>6</b>	
	<b>7</b> Notes and loans receivable, net . . . . .			<b>7</b>	
	<b>8</b> Inventories for sale or use . . . . .			<b>8</b>	
	<b>9</b> Prepaid expenses and deferred charges . . . . .		38,720	<b>9</b>	53,383
	<b>10a</b> Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	<b>10a</b>	265,467		
	<b>b</b> Less: accumulated depreciation . . . . .	<b>10b</b>	201,997	<b>10c</b>	63,470
	<b>11</b> Investments—publicly traded securities . . . . .			<b>11</b>	
	<b>12</b> Investments—other securities. See Part IV, line 11 . . . . .			<b>12</b>	0
	<b>13</b> Investments—program-related. See Part IV, line 11 . . . . .			<b>13</b>	0
	<b>14</b> Intangible assets . . . . .			<b>14</b>	
	<b>15</b> Other assets. See Part IV, line 11 . . . . .		5,500	<b>15</b>	5,500
<b>16</b> <b>Total assets.</b> Add lines 1 through 15 (must equal line 34) . . . . .		988,525	<b>16</b>	5,823,780	
<b>Liabilities</b>	<b>17</b> Accounts payable and accrued expenses . . . . .		98,075	<b>17</b>	90,366
	<b>18</b> Grants payable . . . . .			<b>18</b>	
	<b>19</b> Deferred revenue . . . . .			<b>19</b>	
	<b>20</b> Tax-exempt bond liabilities . . . . .			<b>20</b>	
	<b>21</b> Escrow or custodial account liability. Complete Part IV of Schedule D . . . . .			<b>21</b>	
	<b>22</b> Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L . . . . .			<b>22</b>	
	<b>23</b> Secured mortgages and notes payable to unrelated third parties . . . . .		83,594	<b>23</b>	48,847
	<b>24</b> Unsecured notes and loans payable to unrelated third parties . . . . .			<b>24</b>	
	<b>25</b> Other liabilities. Complete Part X of Schedule D . . . . .		450,000	<b>25</b>	294,695
	<b>26</b> <b>Total liabilities.</b> Add lines 17 through 25 . . . . .		631,669	<b>26</b>	433,908
<b>Net Assets or Fund Balances</b>	<b>Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.</b>				
	<b>27</b> Unrestricted net assets . . . . .		345,051	<b>27</b>	993,384
	<b>28</b> Temporarily restricted net assets . . . . .		11,805	<b>28</b>	4,396,488
	<b>29</b> Permanently restricted net assets . . . . .			<b>29</b>	
	<b>Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34.</b>				
	<b>30</b> Capital stock or trust principal, or current funds . . . . .			<b>30</b>	
	<b>31</b> Paid-in or capital surplus, or land, building, or equipment fund . . . . .			<b>31</b>	
	<b>32</b> Retained earnings, endowment, accumulated income, or other funds . . . . .			<b>32</b>	
<b>33</b> Total net assets or fund balances . . . . .		356,856	<b>33</b>	5,389,872	
<b>34</b> Total liabilities and net assets/fund balances . . . . .		988,525	<b>34</b>	5,823,780	

**Part XI Reconciliation of Net Assets**

Check if Schedule O contains a response to any question in this Part XI

<b>1</b>	Total revenue (must equal Part VIII, column (A), line 12)	<b>1</b>	<b>8,398,705</b>
<b>2</b>	Total expenses (must equal Part IX, column (A), line 25)	<b>2</b>	<b>3,365,689</b>
<b>3</b>	Revenue less expenses. Subtract line 2 from line 1	<b>3</b>	<b>5,033,016</b>
<b>4</b>	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	<b>4</b>	<b>356,856</b>
<b>5</b>	Other changes in net assets or fund balances (explain in Schedule O)	<b>5</b>	<b>0</b>
<b>6</b>	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	<b>6</b>	<b>5,389,872</b>

**Part XII Financial Statements and Reporting**

Check if Schedule O contains a response to any question 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?
- b** Were the organization's financial statements audited by an independent accountant?
- 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.
- d** If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a separate basis, consolidated basis, or both:  
 Separate basis  Consolidated basis  Both consolidated and separate basis
- 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
<b>2a</b>		✓
<b>2b</b>	✓	
<b>2c</b>	✓	
<b>3a</b>		✓
<b>3b</b>		

**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 charitable trust.

▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No 1545-0047

**2010**

**Open to Public Inspection**

Name of the organization <b>THE ALAIN LOCKE INITIATIVE</b>	Employer identification number <b>36-3764476</b>
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**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 11, 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.)
- 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 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.)
- 10  An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**.
- 11  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 that describes the type of supporting organization and complete lines 11e through 11h.
  - a  Type I      b  Type II      c  Type III—Functionally integrated      d  Type III—Other
- e  By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).
- f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box
- g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?
 

(i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization? . . . . .	Yes	No
(ii) A family member of a person described in (i) above? . . . . .	11g(ii)	
(iii) A 35% controlled entity of a person described in (i) or (ii) above? . . . . .	11g(iii)	
- h Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) Is the organization in col. (i) listed in your governing document?		(v) Did you notify the organization in col. (i) of your support?		(vi) Is the organization in col (i) organized in the U S ?		(vii) Amount of support
			Yes	No	Yes	No	Yes	No	
(A)									
(B)									
(C)									
(D)									
(E)									
<b>Total</b>									0

**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) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") . . . . .	1,873,683	2,218,106	1,460,788	2,721,484	7,360,743	15,634,804
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 <b>Total.</b> Add lines 1 through 3 . . . . .	1,873,683	2,218,106	1,460,788	2,721,484	7,360,743	15,634,804
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) . . . . .						3,406,945
6 <b>Public support.</b> Subtract line 5 from line 4.						12,227,859

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
7 Amounts from line 4 . . . . .	1,873,683	2,218,106	1,460,788	2,721,484	7,360,743	15,634,804
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources . . . . .	21,242	6,157	1,325	1,110	48	29,882
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 IV.) . . . . .	110,657	91,415	2,144	15,421	1,951	221,588
11 <b>Total support.</b> Add lines 7 through 10						15,886,274
12 Gross receipts from related activities, etc. (see instructions) . . . . .					12	0
13 <b>First five years.</b> 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 <b>stop here</b> . . . . . <input type="checkbox"/>						

**Section C. Computation of Public Support Percentage**

14 Public support percentage for 2010 (line 6, column (f) divided by line 11, column (f)) . . . . .	14	76.97 %
15 Public support percentage from 2009 Schedule A, Part II, line 14 . . . . .	15	74.19 %
16a <b>33 1/3% support test—2010.</b> If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization . . . . . <input checked="" type="checkbox"/>		
b <b>33 1/3% support test—2009.</b> 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 <b>stop here.</b> The organization qualifies as a publicly supported organization . . . . . <input type="checkbox"/>		
17a <b>10%-facts-and-circumstances test—2010.</b> 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 <b>stop here.</b> Explain in Part IV how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization . . . . . <input type="checkbox"/>		
b <b>10%-facts-and-circumstances test—2009.</b> 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 <b>stop here.</b> Explain in Part IV how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization . . . . . <input type="checkbox"/>		
18 <b>Private foundation.</b> 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 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ►	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
<b>2</b> 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 . . . .						
<b>3</b> Gross receipts from activities that are not an unrelated trade or business under section 513						
<b>4</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf . . . .						
<b>5</b> The value of services or facilities furnished by a governmental unit to the organization without charge . . . .						
<b>6 Total.</b> Add lines 1 through 5 . . . .						
<b>7a</b> Amounts included on lines 1, 2, and 3 received from disqualified persons . . . .						
<b>b</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 . . . .						
<b>c</b> Add lines 7a and 7b . . . .						
<b>8 Public support</b> (Subtract line 7c from line 6.) . . . .						

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ►	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
<b>9</b> Amounts from line 6 . . . .						
<b>10a</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources . . . .						
<b>b</b> Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 . . . .						
<b>c</b> Add lines 10a and 10b . . . .						
<b>11</b> Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on . . . .						
<b>12</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) . . . .						
<b>13 Total support.</b> (Add lines 9, 10c, 11, and 12.) . . . .						
<b>14 First five years.</b> 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 <b>stop here</b> . . . . <input type="checkbox"/>						

**Section C. Computation of Public Support Percentage**

<b>15</b> Public support percentage for 2010 (line 8, column (f) divided by line 13, column (f)) . . . .	<b>15</b>	%
<b>16</b> Public support percentage from 2009 Schedule A, Part III, line 15 . . . .	<b>16</b>	%

**Section D. Computation of Investment Income Percentage**

<b>17</b> Investment income percentage for <b>2010</b> (line 10c, column (f) divided by line 13, column (f)) . . . .	<b>17</b>	%
<b>18</b> Investment income percentage from <b>2009</b> Schedule A, Part III, line 17 . . . .	<b>18</b>	%

- 19a 33 1/3% support tests—2010.** 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—2009.** 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**

**Supplemental Information** Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).

Return Reference	Identifier	Explanation
SCHEDULE A, PART II, SECTION B, LINE 10	OTHER INCOME	OTHER INCOME - 2006=\$62,212, 2007=\$915, 2008=\$2,144, 2009=\$15,421, 2010=\$1,951 TOTAL=\$82,643 GROSS RECEIPTS FROM FUNDRAISING - 2006=\$48,000, 2007=\$90,500, 2008=NONE, 2009=NONE, 2010=NONE, TOTAL=\$138,500 SALE OF INVENTORY - 2006=\$445, 2007=NONE, 2008=NONE, 2009=NONE, 2010=NONE TOTAL=\$445

Supplemental Financial Statements

2010

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

Attach to Form 990. See separate instructions.

Name of the organization

Employer identification number

THE ALAIN LOCKE INITIATIVE

36-3764476

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

Table with 2 columns: (a) Donor advised funds, (b) Funds and other accounts. Rows include: 1 Total number at end of year, 2 Aggregate contributions to (during year), 3 Aggregate 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" to Form 990, Part IV, line 7.

Table with 2 columns: 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, 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, and enforcing conservation easements during the year, 7 Amount of expenses incurred in monitoring, inspecting, 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 XIV, 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" to Form 990, Part IV, line 8.

Table with 2 columns: \$, \$. 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 XIV, 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) Revenues included in Form 990, Part VIII, line 1, (ii) Assets included in Form 990, Part X, 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: a Revenues included in Form 990, Part VIII, line 1, b Assets included in Form 990, Part X

**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 XIV.

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" to 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 XIV 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?  Yes  No

b If "Yes," explain the arrangement in Part XIV

**Part V Endowment Funds.** Complete if the organization answered "Yes" to 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 year end balance held as:

- a Board designated or quasi-endowment ▶ ..... %
- b Permanent endowment ▶ ..... %
- c Term endowment ▶ ..... %

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

	Yes	No
(i) unrelated organizations . . . . .	3a(i)	
(ii) related organizations . . . . .	3a(ii)	
b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? . . . . .	3b	

4 Describe in Part XIV the intended uses of the organization's endowment funds.

**Part VI Land, Buildings, and Equipment.** See Form 990, Part X, line 10.

Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land . . . . .				0
b Buildings . . . . .				0
c Leasehold improvements . . . . .				0
d Equipment . . . . .		265,467	201,997	63,470
e Other . . . . .				0
<b>Total.</b> Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).) . . . . .				63,470

**Part VII Investments—Other Securities.** 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) -----		
(I) -----		
<b>Total.</b> (Column (b) must equal Form 990, Part X, col (B) line 12.) ▶		

**Part VIII Investments—Program Related.** See Form 990, Part X, line 13.

(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
<b>Total.</b> (Column (b) must equal Form 990, Part X, col (B) line 13.) ▶		

**Part IX Other Assets.** See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 15.) ▶	

**Part X Other Liabilities.** See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Amount
(1) Federal income taxes	
(2) <b>DUE TO ALAIN LOCKE CHARTER SCHOOL</b>	<b>294,695</b>
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
(11)	
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶	<b>294,695</b>

2. FIN 48 (ASC 740) Footnote. In Part XIV, 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)



**Part XIV**

**Supplemental Information** Complete this part to 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, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information.

Return Reference	Identifier	Explanation
SCHEDULE D, PART X, LINE 2	FIN 48 (ASC 740) FOOTNOTE	THE ORGANIZATION IS A NON-PROFIT ORGANIZATION AND QUALIFIES UNDER SECTION 501 (C)(3) OF THE INTERNAL REVENUE CODE FOR TAX-EXEMPT STATUS. THE ORGANIZATION FOLLOWS ACCOUNTING STANDARDS APPLICABLE TO UNCERTAIN TAX POSITIONS. NO PROVISION HAS BEEN MADE FOR INCOME TAXES IN THE ACCOMPANYING FINANCIAL STATEMENTS, AS THE ORGANIZATION HAS HAD NO UNRELATED BUSINESS INCOME.  MANAGEMENT BELIEVES THE ORGANIZATION HAS NO MATERIAL UNRECOGNIZED INCOME TAX BENEFITS, INCLUDING ANY POTENTIAL LOSS OF ITS TAX-EXEMPT STATUS. THE ORGANIZATION RECOGNIZES INTEREST AND PENALTIES RELATED TO UNRECOGNIZED TAX BENEFITS IN INTEREST AND INCOME TAX EXPENSE, RESPECTIVELY. THE ORGANIZATION RECOGNIZED AND ACCRUED NO AMOUNTS FOR INTEREST OR PENALTIES AS OF AND FOR THE YEAR ENDED JUNE 30, 2011 OR 2010. THE ORGANIZATION HAS NOT BEEN EXAMINED BY ANY TAX JURISDICTION, AND IS NO LONGER SUBJECT TO EXAMINATION BY THE FEDERAL OR STATE TAXING AUTHORITIES FOR YEARS BEFORE THE YEAR ENDED JUNE 30, 2008. THE ORGANIZATION DOES NOT EXPECT THE TOTAL AMOUNT OF UNRECOGNIZED TAX BENEFITS TO SIGNIFICANTLY CHANGE IN THE NEXT 12 MONTHS.

**SCHEDULE I  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

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

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

OMB No 1545-0047

**2010**

**Open to Public  
Inspection**

Name of the organization

**THE ALAIN LOCKE INITIATIVE**

Employer identification number

36-3764476

**Part I General Information on Grants and Assistance**

- 1 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
- 2 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 Governments and Organizations in the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient 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 non-cash assistance	(h) Purpose of grant or assistance
(1) THE ALAIN LOCKE CHARTER SCHOOL 150 N MICHIGAN AVENUE, SUITE 2100, CHICAGO, IL 60601	36-4182397	501(C)(3)	300,000	0	N/A	N/A	OPERATING ASSISTANCE
(2) .....							
(3) .....							
(4) .....							
(5) .....							
(6) .....							
(7) .....							
(8) .....							
(9) .....							
(10) .....							
(11) .....							
(12) .....							

2 Enter total number of section 501(c)(3) and government organizations  1

3 Enter total number of other organizations  0

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

Cat. No. 50055P

Schedule I (Form 990) (2010)



**Part IV****Supplemental Information** Complete this part to provide the information required in Part I, line 2, and any other additional information.

Return Reference	Identifier	Explanation
SCHEDULE I, PART I, LINE 2	PROCEDURES FOR MONITORING USE OF GRANT FUNDS	THE ALAIN LOCKE INITIATIVE COLLECTS AND RECORDS INFORMATION ON GRANTS PAID THROUGH WRITTEN PROGRESS REPORTS AS WELL AS THROUGH PHONE CALLS AND SITE VISITS, WHICH ARE RECORDED IN A FILE NOTE. FUNDS ARE PROPERLY ACCOUNTED FOR USING ACCEPTED ACCOUNTING PRINCIPLES, WITH SAFEGUARDS TO PREVENT MISUSE

**Schedule O  
(Form 990)**

Department of Treasury  
Internal Revenue Service

**Supplemental Information to Form 990 or 990-EZ**

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

OMB No 1545-0047

**2010**

Open to Public  
Inspection

Name of the Organization  
**THE ALAIN LOCKE INITIATIVE**

Employer Identification Number  
**36-3764476**

Return Reference	Identifier	Explanation
FORM 990, PART III, LINE 4A	PROGRAM SERVICE DESCRIPTION	(CONTINUED FROM FROM 990, PART III, LINE 4A) INNER-CITY TEACHING CORPS MEMBERS ARE TOP RECENT COLLEGE GRADUATES AND ACCOMPLISHED CAREER CHANGERS WHO HAVE DEMONSTRATED LEADERSHIP AND ARE COMMITTED TO BECOMING LEADERS IN EDUCATION ICTC ALUMNI INCLUDE MANY WHO HAVE WON PRESTIGIOUS TEACHING AWARDS AND HAVE GONE ON TO BECOME SCHOOL LEADERS  ALAIN LOCKE CHARTER SCHOOL HAS THE #1 TEST SCORES GAINS IN THE HISTORY OF THE ILLINOIS STANDARDIZED TEST (ISAT) WITH 91% OF STUDENTS MEETING OR EXCEEDING STANDARDS IN READING AND MATH IN 2011 THE SCHOOL HAS BEEN RECOGNIZED BY THE U S DEPARTMENT OF EDUCATION AS ONE OF SEVEN SCHOOLS IN THE NATION BEST CLOSING THE ACHIEVEMENT GAP
FORM 990, PART VI, SECTION A, LINE 2	FAMILY/BUSINESS RELATIONSHIPS AMONGST INTERESTED PERSONS	PATRICK G RYAN JR, LYDIA RYAN, AND ROBERT J W RYAN - FAMILY RELATIONSHIP
FORM 990, PART VI, SECTION A, LINE 4	SIGNIFICANT CHANGES TO ORGANIZATIONAL DOCUMENTS	THE ORGANIZATION'S NAME CHANGED TO THE ALAIN LOCKE INITIATIVE, EFFECTIVE MARCH 17, 2011
FORM 990, PART VI, SECTION B, LINE 11B	REVIEW OF FORM 990 BY GOVERNING BODY	THE ORGANIZATION'S MANAGEMENT WORKS WITH ITS INDEPENDENT THIRD PARTY TAX PREPARERS TO COMPLETE THE FORM 990 UPON ITS COMPLETION, THE ORGANIZATION S MANAGEMENT PERFORMS A DETAILED PRELIMINARY REVIEW OF THE PREPARED FORM 990  SUBSEQUENT TO THE PRELIMINARY REVIEW, A COPY OF THE COMPLETED FORM 990 IS DISTRIBUTED TO THE FULL BOARD FOR THEIR REVIEW AND COMMENTS PRIOR TO FILING WITH THE IRS
FORM 990, PART VI, SECTION B, LINE 12C	CONFLICT OF INTEREST POLICY	THE CONFLICT OF INTEREST POLICY INCLUDES ANY DIRECTOR, ADVISORY DIRECTOR, OFFICER, OR MEMBER OF A COMMITTEE WITH BOARD-DELEGATED POWERS WHO HAS A DIRECT OR INDIRECT FINANCIAL INTEREST IN CONNECTION WITH ANY ACTUAL OR POSSIBLE CONFLICTS OF INTEREST, AN INTERESTED PERSON MUST DISCLOSE THE EXISTENCE OF HIS OR HER FINANCIAL INTEREST TO THE BOARD OF DIRECTORS AND MEMBERS OF ANY COMMITTEE WITH BOARD-DELEGATED POWERS CONSIDERING THE PROPOSED TRANSACTION  CONFLICT OF INTEREST QUESTIONNAIRES ARE DISTRIBUTED ANNUALLY FOR THE PURPOSE OF FACILITATING THIS DISCLOSURE IF IT IS DETERMINED THAT A CONFLICT OF INTEREST EXISTS, THE BOARD OF DIRECTORS OR COMMITTEE SHALL DETERMINE WHETHER THE ORGANIZATION CAN OBTAIN A MORE ADVANTAGEOUS TRANSACTION WITH REASONABLE EFFORTS FROM A PERSON OR ENTITY THAT WOULD NOT GIVE RISE TO A CONFLICT OF INTEREST IF IT IS DETERMINED THAT AN INTERESTED PERSON HAS A CONFLICT THE ORGANIZATION TAKES ACTION TO ENSURE THAT APPROPRIATE RESTRICTIONS ARE PUT IN PLACE SUCH AS PROHIBITING THEM FROM ANY RELATED DISCUSSION, VOTE OR SIMILAR ACTION ON THE MATTER  THE BOARD OR COMMITTEE MAY, IF APPROPRIATE, APPOINT A DISINTERESTED PERSON OR COMMITTEE TO INVESTIGATE ALTERNATIVES TO THE PROPOSED TRANSACTION IF THE BOARD OR COMMITTEE DETERMINES THAT A MORE ADVANTAGEOUS TRANSACTION IS NOT REASONABLY ATTAINABLE UNDER CIRCUMSTANCES THAT WOULD NOT GIVE RISE TO A CONFLICT OF INTEREST, THE BOARD OR COMMITTEE SHALL DETERMINE BY MAJORITY VOTE OF THE DISINTERESTED DIRECTORS WHETHER THE PROPOSED TRANSACTION IS IN THE ORGANIZATION'S BEST INTERESTS AND IS FAIR AND REASONABLE TO THE ORGANIZATION, AND SHALL MAKE ITS DECISION (BY MAJORITY VOTE OF THE DISINTERESTED DIRECTORS) AS TO WHETHER TO ENTER INTO THE TRANSACTION IN CONFORMITY WITH SUCH DETERMINATION
FORM 990, PART VI, SECTION B, LINE 15A	PROCESS USED TO ESTABLISH COMPENSATION OF TOP MANAGEMENT OFFICIAL	THE ORGANIZATION'S BOARD UTILIZES COMPARABILITY DATA FOR SIMILARLY QUALIFIED PERSONS IN FUNCTIONALLY COMPARABLE POSITIONS IN THE INDUSTRY OBTAINED FROM A COMPENSATION STUDY, AS WELL AS PERFORMANCE EVALUATIONS TO DETERMINE THE COMPENSATION OF THE ORGANIZATION'S TOP MANAGEMENT OFFICIAL  THE FINAL DETERMINATION OF COMPENSATION ARRANGEMENT IS SUBJECT TO THE ORGANIZATION'S INDEPENDENT BOARD'S REVIEW AND APPROVAL AND DOCUMENTED IN A WRITTEN EMPLOYMENT CONTRACT  THE PROCESS FOR DETERMINING COMPENSATION FOR THE ALAIN LOCKE INITIATIVE'S COO WAS LAST UNDERTAKEN IN JULY 2009
FORM 990, PART VI, SECTION C, LINE 19	PUBLIC DISCLOSURE	THE ORGANIZATION MAKES ITS CONFLICT OF INTEREST POLICY, GOVERNING DOCUMENTS, AND AUDITED FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST
FORM 990, PART VI, SECTION B, LINE 15B	COMPENSATION OF OTHER OFFICERS AND KEY EMPLOYEES	THE ORGANIZATION DOES NOT COMPENSATE ANY OTHER OFFICERS OR KEY EMPLOYEES, THEREFORE, THIS QUESTION IS NOT APPLICABLE AND HAS BEEN INTENTIONALLY LEFT BLANK
FORM 990, PART VII, SECTION A, COLUMN B	AVERAGE HOURS WORKED PER WEEK FOR RELATED ORGANIZATION	PATRICK G RYAN JR - PATRICK G RYAN JR, PRESIDENT/TREASURER DEVOTED APPROXIMATELY 15 HOURS A WEEK TO THE ALAIN LOCKE CHARTER SCHOOL, A RELATED TAX-EXEMPT ORGANIZATION JUDY MCGARVEY - JUDY MCGARVEY, ASSISTANT TREASURER DEVOTED APPROXIMATELY 10 HOURS A WEEK TO THE ALAIN LOCKE CHARTER SCHOOL, A RELATED TAX-EXEMPT ORGANIZATION CLAIRE HARTFIELD - CLAIRE HARTFIELD, SECRETARY/COO DEVOTED APPROXIMATELY 25 HOURS A WEEK TO THE ALAIN LOCKE CHARTER SCHOOL, A RELATED TAX-EXEMPT ORGANIZATION DAWN MOORE - DAWN MOORE, ASSISTANT TREASURER, DEVOTED APPROXIMATELY 1 HOUR A WEEK TO THE ALAIN CHARTER SCHOOL, A RELATED TAX-EXEMPT ORGANIZATION

Return Reference	Identifier	Explanation
FORM 990, PART III, LINE 1	ORGANIZATION'S MISSION	<p>(CONTINUED FROM FORM 990, PART III, LINE 1)  A PRINCIPAL DEVELOPMENT PROGRAM (THE RYAN FELLOWSHIP), AND A SUBSIDIARY, THE ALAIN LOCKE CHARTER SCHOOL.</p> <p>INNER-CITY TEACHING CORPS (ICTC) RECRUITS, SELECTS, TRAINS, AND SUPPORTS RECENT COLLEGE GRADUATES AND MID-CAREER CHANGERS TO WORK AS TEACHERS IN INNER-CITY SCHOOLS WITHIN THE CITY OF CHICAGO. TEACHERS RECEIVE ALTERNATIVE CERTIFICATION THROUGH OUR PARTNERSHIP WITH NORTHWESTERN UNIVERSITY SCHOOL OF EDUCATION AND SOCIAL POLICY. ICTC SELECTS PARTICIPANTS WHO HAVE DEMONSTRATED ABILITY AND DESIRE TO BECOME EDUCATION LEADERS. TRAINING INCLUDES DEVELOPMENT OF LEADERSHIP CAPABILITIES.</p> <p>THE RYAN FELLOWSHIP RECRUITS, SELECTS, TRAINS AND SUPPORTS TEACHERS WHO HAVE DEMONSTRATED SUCCESS IN ACCELERATING ACHIEVEMENT TO BECOME PRINCIPALS IN START-UP CHARTER SCHOOLS. RYAN FELLOWS PARTICIPATE IN THE FOUR-WEEK ACCELERATE INSTITUTE PROVIDED IN PARTNERSHIP WITH NORTHWESTERN UNIVERSITY'S KELLOGG GRADUATE SCHOOL OF MANAGEMENT. FOLLOWING THIS SUMMER INSTITUTE, FELLOWS ENGAGE IN FIELD RESEARCH IN A CHARTER SCHOOL FOR THE FALL SEMESTER. UPON PLACEMENT IN A PRINCIPAL POSITION IN THE SPRING, THEY RECEIVE PRE-LAUNCH MENTORING.</p> <p>THE ALAIN LOCKE CHARTER SCHOOL IS A PRE-K THROUGH EIGHTH GRADE ELEMENTARY SCHOOL IN ONE OF CHICAGO'S MOST UNDERSERVED COMMUNITIES. THE SCHOOL FOCUSES ON ABSOLUTE EXCELLENCE AND PREPARING ITS STUDENTS TO BE GLOBALLY COMPETITIVE.</p>

**SCHEDULE R  
(Form 990)**

**Related Organizations and Unrelated Partnerships**

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.  
▶ Attach to Form 990. ▶ See separate instructions.

**2010**

**Open to Public Inspection**

Department of the Treasury  
Internal Revenue Service

Name of the organization  
**THE ALAIN LOCKE INITIATIVE**  
Employer identification number  
**36-3764476**

**Part I Identification of Disregarded Entities** (Complete if the organization answered "Yes" to Form 990, Part IV, line 33.)

(1)	(a) Name, address, and EIN of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
(1)						
(2)						
(3)						
(4)						
(5)						
(6)						

**Part II Identification of Related Tax-Exempt Organizations** (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.)

	(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
							Yes	No
(1)	<b>THE ALAIN LOCKE CHARTER SCHOOL (36-4182397) 150 N MICHIGAN AVE, STE 2100, CHICAGO, IL 60601-7559</b>	<b>EDUCATION</b>	<b>IL</b>	<b>501(C)(3)</b>	<b>2</b>	<b>THE ALAIN LOCKE INITIATIVE</b>		<input checked="" type="checkbox"/>
(2)								
(3)								
(4)								
(5)								
(6)								
(7)								

**Part III Identification of Related Organizations Taxable as a Partnership** (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	
(1).....												
(2).....												
(3).....												
(4).....												
(5).....												
(6).....												
(7).....												

**Part IV Identification of Related Organizations Taxable as a Corporation or Trust** (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership
(1).....							
(2).....							
(3).....							
(4).....							
(5).....							
(6).....							
(7).....							

**Part V Transactions With Related Organizations** (Complete if the organization answered "Yes" to Form 990, Part IV, line 34, 35, 35a, or 36.)

**Note.** Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

		Yes	No
<b>1</b>	During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?		
<b>a</b>	Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity . . . . .		<input checked="" type="checkbox"/>
<b>b</b>	Gift, grant, or capital contribution to other organization(s) . . . . .	<input checked="" type="checkbox"/>	
<b>c</b>	Gift, grant, or capital contribution from other organization(s) . . . . .		<input checked="" type="checkbox"/>
<b>d</b>	Loans or loan guarantees to or for other organization(s) . . . . .		<input checked="" type="checkbox"/>
<b>e</b>	Loans or loan guarantees by other organization(s) . . . . .		<input checked="" type="checkbox"/>
<b>f</b>	Sale of assets to other organization(s) . . . . .		<input checked="" type="checkbox"/>
<b>g</b>	Purchase of assets from other organization(s) . . . . .		<input checked="" type="checkbox"/>
<b>h</b>	Exchange of assets . . . . .		<input checked="" type="checkbox"/>
<b>i</b>	Lease of facilities, equipment, or other assets to other organization(s) . . . . .		<input checked="" type="checkbox"/>
<b>j</b>	Lease of facilities, equipment, or other assets from other organization(s) . . . . .		<input checked="" type="checkbox"/>
<b>k</b>	Performance of services or membership or fundraising solicitations for other organization(s) . . . . .		<input checked="" type="checkbox"/>
<b>l</b>	Performance of services or membership or fundraising solicitations by other organization(s) . . . . .		<input checked="" type="checkbox"/>
<b>m</b>	Sharing of facilities, equipment, mailing lists, or other assets . . . . .		<input checked="" type="checkbox"/>
<b>n</b>	Sharing of paid employees . . . . .		<input checked="" type="checkbox"/>
<b>o</b>	Reimbursement paid to other organization for expenses . . . . .		<input checked="" type="checkbox"/>
<b>p</b>	Reimbursement paid by other organization for expenses . . . . .		<input checked="" type="checkbox"/>
<b>q</b>	Other transfer of cash or property to other organization(s) . . . . .		<input checked="" type="checkbox"/>
<b>r</b>	Other transfer of cash or property from other organization(s) . . . . .		<input checked="" type="checkbox"/>

**2** If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

	(a) Name of other organization	(b) Transaction type (a-r)	(c) Amount involved	(d) Method of determining amount involved
(1)	THE ALAIN LOCKE CHARTER SCHOOL	B	300,000	COST
(2)	THE ALAIN LOCKE CHARTER SCHOOL	N	59,533	COST
(3)				
(4)				
(5)				
(6)				

**Part VI** Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 37.)

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Are all partners section 501(c)(3) organizations?		(e) Share of end-of-year assets	(f) Disproportionate allocations?		(g) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(h) General or managing partner?	
			Yes	No		Yes	No		Yes	No
(1).....										
(2).....										
(3).....										
(4).....										
(5).....										
(6).....										
(7).....										
(8).....										
(9).....										
(10).....										
(11).....										
(12).....										
(13).....										
(14).....										
(15).....										
(16).....										

**INNER-CITY TEACHING CORPS OF AMERICA**  
**an Illinois not for profit corporation**

**DIRECTORS' ACTION BY UNANIMOUS WRITTEN CONSENT**  
**IN LIEU OF A SPECIAL MEETING**

The undersigned, being all of the Directors (the "Directors") of INNER-CITY TEACHING CORPS OF AMERICA, an Illinois not for profit corporation (the "Corporation"), hereby waive all notice of the time, place or purpose of a meeting and do hereby take the following actions and adopt the following resolutions by written consent pursuant to Section 108.45 of the Illinois General Not For Profit Corporation Act of 1986 (the "Act") and Section 5.10 of the By-laws of the Corporation:

**NAME CHANGE AMENDMENT**

**WHEREAS**, the Directors have determined it to be in the best interests of the Corporation to amend the existing Articles of Incorporation of the Corporation to change the legal name of the Corporation to "The Alain Locke Initiative" (the "Name Change");

**WHEREAS**, pursuant to Section 110.15 of the Act, the Directors are empowered to adopt amendments to the Articles of Incorporation of the Corporation where a corporation has no members; and

**WHEREAS**, pursuant to Section 110.30 of the Act, the Articles of Incorporation are amended by filing the Articles of Amendment in the office of the Secretary of State.

**NOW, THEREFORE, BE IT RESOLVED**, that the form of Articles of Amendment to the Articles of Incorporation of the Corporation attached hereto as Annex A (the "Articles of Amendment") for the Name Change be, and hereby is, adopted and approved;

**FURTHER RESOLVED**, that the Directors hereby authorize and approve any and all actions taken on behalf of the Corporation by any and all of its officers, including but not limited to, Patrick G. Ryan, Jr. in his capacity as President, acting alone or together to execute and deliver in the name and on behalf of the Corporation the Articles of Amendment;

**FURTHER RESOLVED**, that the officers of the Corporation, and each of them acting alone or together with one or more other officers, be and they hereby are authorized and empowered to execute and deliver all such consents, certificates, assignments, agreements, instruments and other documents, and to do all such acts, as such officer or officers may deem necessary or appropriate in order to carry out the purposes of the foregoing resolutions, and the execution and delivery of such documents and the doing of such acts shall be conclusive evidence that the same were in all respects hereby fully authorized and approved;

**AND, FURTHER RESOLVED**, that this Consent may be signed in any number of counterparts, each of which shall be deemed an original, and all of which taken together shall be deemed to be a single document.

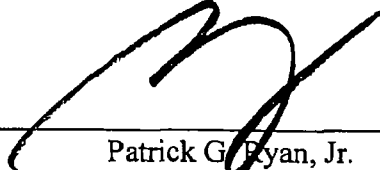
The actions taken by this Consent shall have the same force and effect as if taken by the undersigned at a special meeting duly called and constituted pursuant to the By-laws of the Corporation and the laws of the State of Illinois.

This Consent shall be filed with the minutes of the Corporation.

\* \* \* \* \*

**IN WITNESS WHEREOF**, the undersigned have executed this Directors'

Consent as of the \_\_\_\_\_ day of January, 2011.

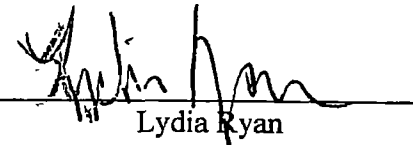


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Patrick G. Ryan, Jr.

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Robert J.W. Ryan



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Lydia Ryan

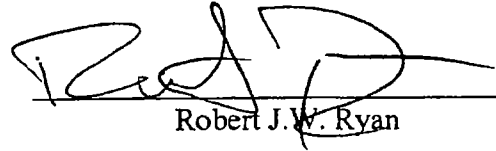
Being all of the Directors  
of the Corporation

**IN WITNESS WHEREOF**, the undersigned have executed this Directors'

Consent as of the \_\_\_\_\_ day of January, 2011.

---

Patrick G. Ryan, Jr.



---

Robert J. W. Ryan

---

Lydia Ryan

Being all of the Directors  
of the Corporation

**Annex A**

**Form of Articles of Amendment**

FORM NFP 110.30 (rev. Dec. 2003)

ARTICLES OF AMENDMENT

General Not For Profit Corporation Act

Jesse White, Secretary of State  
Department of Business Services  
Springfield, IL 62756  
Telephone (217) 782-1832  
<http://www.cyberdriveillinois.com>

Remit payment in the form of a  
check or money order payable  
to the Secretary of State.

File # 56375635

Filing Fee: \$25.00 Approved.

Submit in duplicate

Type or Print clearly in black ink

Do not write above this line

1. Corporate name (Note 1): Inner-City Teaching Corps of America

2. Manner of adoption of amendment:

The following amendment of Articles of Incorporation was adopted on January, 2011 in the manner indicated below (Check one only):  
(Month, Day & Year)

By affirmative vote of a majority of the directors in office, at a meeting of the board of directors, in accordance with Section 110.15. (Note 2)

By written consent, signed by all the directors in office, in compliance with Sections 110.15 and 108.45 (Note 3)

By members at a meeting of members entitled to vote by the affirmative vote of the members having not less than the minimum number of votes necessary to adopt such amendment, as provided by this Act, the articles of incorporation or the bylaws, in accordance with Section 110.20. (Note 4)

By written consent signed by members entitled to vote having not less than the minimum number of votes necessary to adopt such amendment, as provided by this Act, the articles of incorporation, or the bylaws, in compliance with Sections 107.10 and 110.20. (Note 5)

3. Text of amendment

(a.) When an amendment effects a name change, insert the new corporate name below. Use 3 (b) below for all other amendments. \*Article 1: The name of the corporation is:

The Alain Locke Initiative

(New Name)

(b) All amendments other than name change.

(If amendment affects the corporate purpose, the amended purpose is required to be set forth in its entirety.) If there is not sufficient space to add the full text of the amendment, add one or more sheets of this size.

**(COMPLETE ITEM 4 OR, IF APPLICABLE, ITEM 5.) ALL SIGNATURES MUST BE IN BLACK INK.**

4. The undersigned corporation has caused these articles to be signed by duly authorized officer, who affirms, under penalties of perjury, that the facts stated herein are true. (All signatures must be in **BLACK INK.**)

Dated January 2011 Inner-City Teaching Corps of America  
(Month & Day) (Year) (Exact Name of Corporation)

(Any Authorized Officer's Signature)  
Patrick G. Ryan, Jr., President  
(Print Name and Title)

5. If there are no duly authorized officers, then the persons designated under Section 101 10(b)(2) must sign below and print name and title.  
The undersigned affirms, under penalties of perjury, that the facts stated herein are true.

Dated \_\_\_\_\_ (Month, Day & Year)

Signature

Print Name and Title

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

#### NOTES

- Note 1:** State the true and exact corporate name as it appears on the records of the Secretary of State, BEFORE any amendment herein reported.
- Note 2:** Directors may adopt amendments without member approval only when the corporation has no members, or no members entitled to vote pursuant to §110.15
- Note 3:** Director approval may be (1) by vote at a director's meeting (*either annual or special*) or (2) by consent, in writing, without a meeting.
- Note 4:** All amendments not adopted under Sec. 110.15 require (1) that the board of directors adopt a resolution setting forth the proposed amendment and (2) that the members approve the amendment.
- Member approval may be (1) by vote at a members meeting (*either annual or special*) or (2) by consent, in writing, without a meeting.
- To be adopted, the amendment must receive the affirmative vote or consent of the holders of at least 2/3 of the outstanding members entitled to vote on the amendment, (*but if class voting applies, then also at least a 2/3 vote within each class is required*).
- The articles of incorporation may supersede the 2/3 vote requirement by specifying any smaller or larger vote requirement not less than a majority of the outstanding votes of such members entitled to vote and not less than a majority within each when class voting applies. (*Sec. 110.20*)
- Note 5:** When member approval is by written consent, all members must be given notice of the proposed amendment at least 5 days before the consent is signed. If the amendment is adopted, members who have not signed the consent must be promptly notified of the passage of the amendment. (*Sec. 107.10 & 110.20*)



## OFFICE OF THE SECRETARY OF STATE

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JESSE WHITE • Secretary of State

MARCH 17, 2011

5637-563-5

C T CORPORATION SYSTEM  
600 S 2ND ST  
SPRINGFIELD, IL 62704

RE THE ALAIN LOCKE INITIATIVE

DEAR SIR OR MADAM:

ENCLOSED YOU WILL FIND THE ARTICLES OF AMENDMENT FOR THE ABOVE NAMED CORPORATION.

FEES IN THIS CONNECTION HAVE BEEN RECEIVED AND CREDITED.

SINCERELY,

*Jesse White*

JESSE WHITE  
SECRETARY OF STATE  
DEPARTMENT OF BUSINESS SERVICES  
CORPORATION DIVISION  
TELEPHONE (217) 782-6961

FORM NFP 110.30 (rev. Dec. 2003)  
ARTICLES OF AMENDMENT  
General Not For Profit Corporation Act

Jesse White, Secretary of State  
Department of Business Services  
Springfield, IL 62758  
Telephone (217) 782-1832  
http://www.cyberdriveillinois.com

FILED

MAR 17 2011

JESSE WHITE  
SECRETARY OF STATE

Remit payment in the form of a  
check or money order payable  
to the Secretary of State.

File # 56375635

Filing Fee: \$25.00 Approved: *JK*

Submit in duplicate \_\_\_\_\_ type or Print clearly in black ink \_\_\_\_\_ Do not write above this line \_\_\_\_\_

1. Corporate name (Note 1): Inner-City Teaching Corps of America

2. Manner of adoption of amendment:

The following amendment of Articles of Incorporation was adopted on March 16, 2011 in the manner indicated below (Check one only):  
(Month, Day & Year)

By affirmative vote of a majority of the directors in office, at a meeting of the board of directors, in accordance with Section 110.15. (Note 2)

By written consent, signed by all the directors in office, in compliance with Sections 110.15 and 108.45 (Note 3)

By members at a meeting of members entitled to vote by the affirmative vote of the members having not less than the minimum number of votes necessary to adopt such amendment, as provided by this Act, the articles of incorporation or the bylaws, in accordance with Section 110.20. (Note 4)

By written consent signed by members entitled to vote having not less than the minimum number of votes necessary to adopt such amendment, as provided by this Act, the articles of incorporation, or the bylaws, in compliance with Sections 107.10 and 110.20. (Note 5)

3. Text of amendment

(a.) When an amendment effects a name change, insert the new corporate name below. Use 3 (b) below for all other amendments. \*Article 1: The name of the corporation is:

The Alain Locke Initiative

(New Name)

(b) All amendments other than name change.

(If amendment affects the corporate purpose, the amended purpose is required to be set forth in its entirety.) If there is not sufficient space to add the full text of the amendment, add one or more sheets of this size.

**(COMPLETE ITEM 4 OR, IF APPLICABLE, ITEM 5.) ALL SIGNATURES MUST BE IN BLACK INK.**

4. The undersigned corporation has caused these articles to be signed by duly authorized officer, who affirms, under penalties of perjury, that the facts stated herein are true. (All signatures must be in **BLACK INK.**)

Dated March 14, 2011  
*(Month & Day)* *(Year)*  
Patrick G. Ryan, Jr., President  
*(Any Authorized Officer's Signature)*  
*(Print Name and Title)*

Inner-City Teaching Corps of America  
*(Exact Name of Corporation)*

5. If there are no duly authorized officers, then the persons designated under Section 101.10(b)(2) must sign below and print name and title.

The undersigned affirms, under penalties of perjury, that the facts stated herein are true.

Dated \_\_\_\_\_ (Month, Day & Year)

Signature

Print Name and Title

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

#### NOTES

**Note 1:** State the true and exact corporate name as it appears on the records of the Secretary of State, BEFORE any amendment herein reported.

**Note 2:** Directors may adopt amendments without member approval only when the corporation has no members, or no members entitled to vote pursuant to §110.15

**Note 3:** Director approval may be (1) by vote at a director's meeting (*either annual or special*) or (2) by consent, in writing, without a meeting.

**Note 4:** All amendments not adopted under Sec. 110.15 require (1) that the board of directors adopt a resolution setting forth the proposed amendment and (2) that the members approve the amendment.

Member approval may be (1) by vote at a members meeting (*either annual or special*) or (2) by consent, in writing, without a meeting.

To be adopted, the amendment must receive the affirmative vote or consent of the holders of at least 2/3 of the outstanding members entitled to vote on the amendment, (*but if class voting applies, then also at least a 2/3 vote within each class is required*).

The articles of incorporation may supersede the 2/3 vote requirement by specifying any smaller or larger vote requirement not less than a majority of the outstanding votes of such members entitled to vote and not less than a majority within each when class voting applies. (*Sec. 110.20*)

**Note 5:** When member approval is by written consent, all members must be given notice of the proposed amendment at least 5 days before the consent is signed. If the amendment is adopted, members who have not signed the consent must be promptly notified of the passage of the amendment. (*Sec. 107.10 & 110.20*)

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

OMB No 1545-1709

▶ File a separate application for each return.

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** and check this box
  - If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** (on page 2 of this form).
- Do not complete Part II unless** you have already been granted an automatic 3-month extension on a previously filed Form 8868.

**Electronic filing (e-file).** You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit [www.irs.gov/efile](http://www.irs.gov/efile) and click on *e-file for Charities & Nonprofits*.

**Part I Automatic 3-Month Extension of Time.** Only submit original (no copies needed).

A corporation required to file Form 990-T and requesting an automatic 6-month extension—check this box and complete Part I only

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

<b>Type or print</b>	Name of exempt organization <b>THE ALAIN LOCKE INITIATIVE (F/K/A INNER-CITY TEACHING CORPS OF AMERICA)</b>	Employer identification number <b>36-3764476</b>
File by the due date for filing your return See instructions	Number, street, and room or suite no. If a P.O. box, see instructions. <b>150 N MICHIGAN AVENUE, 2100</b>	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. <b>CHICAGO, IL 60601-7559</b>	

Enter the Return code for the return that this application is for (file a separate application for each return) 0 1

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

• The books are in the care of ▶ JUDY MCGARVEY

Telephone No. ▶ (312)893-6600 FAX No. ▶ \_\_\_\_\_

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

**1** I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until February 15, 20 12, to file the exempt organization return for the organization named above. The extension is for the organization's return for:

▶  calendar year 20\_\_\_\_ or

▶  tax year beginning July 01, 20 10, and ending June 30, 20 11.

**2** If the tax year entered in line 1 is for less than 12 months, check reason:  Initial return  Final return  Change in accounting period

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

**Caution.** If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

- If you are filing for an **Additional (Not Automatic, 3-Month Extension, complete only Part II and check this box**
- Note.** Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868.
- If you are filing for an **Automatic 3-Month Extension, complete only Part I** (on page 1).

**Part II Additional (Not Automatic) 3-Month Extension of Time.** Only file the original (no copies needed).

<b>Type or print</b>  <small>File by the extended due date for filing your return. See instructions</small>	Name of exempt organization <b>THE ALAIN LOCKE INITIATIVE</b>	Employer identification number <b>36-3764476</b>
	Number, street, and room or suite no. If a P.O. box, see instructions. <b>150 N MICHIGAN AVENUE, 2100</b>	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. <b>CHICAGO, IL 60601-7559</b>	

Enter the Return code for the return that this application is for (file a separate application for each return) 0 1

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

**STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.**


- The books are in the care of **JUDY MCGARVEY**  
 Telephone No. **(312)893-6600** FAX No.
- If the organization does not have an office or place of business in the United States, check this box
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) . If this is for the whole group, check this box . If it is for part of the group, check this box  and attach a list with the names and EINs of all members the extension is for.

- I request an additional 3-month extension of time until **May 15**, 20 **12**.
- For calendar year , or other tax year beginning **July 01**, 20 **10**, and ending **June 30**, 20 **11**.
- If the tax year entered in line 5 is for less than 12 months, check reason:  Initial return  Final return  
 Change in accounting period
- State in detail why you need the extension **ADDITIONAL TIME IS REQUIRED TO GATHER THE INFORMATION NECESSARY TO FILE A COMPLETE AND ACCURATE RETURN.**

<b>8a</b> If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	<b>8a</b>	\$
<b>b</b> If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868.	<b>8b</b>	\$
<b>c Balance due.</b> Subtract line 8b from line 8a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	<b>8c</b>	\$

**Signature and Verification**

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form

Signature  Title **CRA** Date **12-21-11**