

See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

July 1

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

OMB No 1545-0047

Open to Public Inspection

Form **990** (2011)

Cat. No. 11282Y

June 30

For the 2011 calendar year, or tax year beginning 2011, and ending 20 12 C Name of organization Literacy Volunteers of America Bitterroot, Inc. D Employer identification number Check if applicable Doing Business As Literacy Bitterroot 81-0478575 Address change Number and street (or P O. box if mail is not delivered to street address) E Telephone number Room/suite Name change 406 363 2900 316 N Third ST Suite 156 Initial return City or town, state or country, and ZIP + 4 Terminated Hamilton MT 59840-2475 G Gross receipts \$ 99,211.35 Amended return Dixie Stark (same as C above) Application pending F Name and address of principal officer H(a) Is this a group return for affiliates? Yes No) ◀ (insert no) ☐ 4947(a)(1) or ☐ 527 If "No," attach a list (see instructions) √ 501(c)(3) 501(c) (Tax-exempt status: literacybitterroot.org Website: ▶ H(c) Group exemption number ▶ Form of organization: Corporation Trust Association [Other ▶ L Year of formation M State of legal domicile MT Summary Part I Briefly describe the organization's mission or most significant activities: Our mission is to provide free, confidential instruction to enable Ravalli County adults to become literate or complete their high school equivalency diploma so they can Activities & Governance succeed as workers, parents, and citizens. Check this box ▶ ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets. Number of voting members of the governing body (Part VI, line 1a) 5 Number of independent voting members of the governing body (Part VI, line 1b) 4 5 Total number of individuals employed in calendar year 2011 (Part V, line 2a) 5 13 Total number of volunteers (estimate if necessary) 6 28 Total unrelated business revenue from Part VIII, column (C), line 12 0 7a 7a Net unrelated business taxable income from Form 990-T, line 34 0 Current Year Contributions and grants (Part VIII, line 1h) . 100,443 96,434 8 /enne 9 Program service revenue (Part VIII, line 2q) 0 investment income (Part VIII, column (A), lines 3, 4, and 2.378 2,777 10 Other revenue (Part VIII, column (A), lines 5, 66 8c, 9c, 10c, and 11e).
Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 02 11 102,821 12 99,211 Grants and similar amounts paid (Part IX, collimn (A), lines 1-3) 13 1,547 1.880 Benefits paid to or for members (Part IX, column (A); line; 14 0 0 15 Salaries, other compensation, employee benefits (Part X) colur 82,385 73,663 16a Professional fundraising fees (Part IX, column (A), line 11e) O Total fundraising expenses (Part IX, column (D), line 25) ▶ 17.974 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 26,137 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 101,906 101,680 19 Revenue less expenses. Subtract line 18 from line 12 915 (2,469) End of Year Beginning of Current Year 20 128,022 Total assets (Part X, line 16) 21 Total liabilities (Part X, line 26) . 175 187 Net assets or fund balances. Subtract line 21 from line 20 128,022 Signature Block Under penalties of penjury, 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 re of officer Board Presiden Here Type or print name and title Print/Type preparer's name Date Preparer's signature **Paid** Check I If setf-employed Preparer Firm's name Firm's EIN ▶ **Use Only** May the IRS discuss this return with the preparer shown above? (see instructions) 🗌 Yes 🗌 No

For Paperwork Reduction Act Notice, see the separate instructions.

Part	
	Check if Schedule O contains a response to any question in this Part III
1	Briefly describe the organization's mission:
	Our mission is to provide free, confidential instruction to enable Ravalli County adults to become literate or complete their high
	school equivalency diploma so they can compete as workers, parents, and citizens.
2	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program
	services?
	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by
	expenses. Section 501(c)(3) and 501(c)(4) organizations 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.
	(Oada
4a	(Code:) (Expenses \$ 78,662 including grants of \$ 1,880) (Revenue \$ 0) 205 adults (16 and older and not enrolled in public school) received direct literacy instruction to enable them to function on the job,
	in their families, and in society. 58 students completed their high school equivalency diploma, or GED. 11 students entered post-
	Secondary education or training.
	Explanation of grants: 16 students received scholarships for the cost of the GED testing fee @ \$55 each. One student was given a
	\$1000 scholarship for post-secondary education. The GED testing scholarships were made out to the GED test center so they could
	not be used for any other purpose. The postsecondary scholarship was made out to the college and the student.
	The second of any enter parpose. The postesserious y serious sinp was made out to the contege and the statem.
4b	(Code:) (Expenses \$ 4,023 including grants of \$) (Revenue \$ 0)
	English Language/Civics instruction for 26 adults seeking to speak English better and to become participants in the community or
	to gain citizenship.
	·
	•
4c	(Code:) (Expenses \$ 493 including grants of \$ 0) (Revenue \$ 0)
70	Family literacy activities included: workshops for 16 parents of preschool children, story times for more than 300 children, and 567
	new books were distributed to needy children. Volunteers staff this project.
	•••••••••••••••••••••••••••••••••••••••
	······································
	······································
4d	Other program services (Describe in Schedule O.)
	(Expenses \$ 0 including grants of \$ 0) (Revenue \$ 0)
4e	Total program service expenses ▶ \$83,178

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	1	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	1	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		1
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		1
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		✓
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		✓
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		/
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8	-	· •
9	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? If "Yes," complete Schedule D, Part IV	9		<u>·</u>
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	/	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.			,
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a		·
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? If "Yes," complete Schedule D, Part VII	11b		√
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? if "Yes," complete Schedule D, Part VIII	11c		7
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		✓
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		✓
	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X .	11f		1
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12a		✓
b	the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		✓
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		√
14 a b	Did the organization maintain an office, employees, or agents outside of the United States?	14a		<u> </u>
	fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		1
15	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? If "Yes," complete Schedule F, Parts II and IV.	15		1
16	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? If "Yes," complete Schedule F, Parts III and IV	16	-	<u> </u>
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		<u>·</u>
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II.	18		<u>·</u>
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		1
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		✓
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? .	20b		
		For	ո 990	(2011)

Form 99				Page 4
Part	Checklist of Required Schedules (continued)			
24	Did the organization report more than \$5,000 of grapts and other equiptance to any government or organization	<u></u>	Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		✓
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		1
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23		✓_
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25	24a		✓
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary penod exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24b		
d 25a	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>	24d 25a		✓
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		√
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		√
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		√
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
a b	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		1
C	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		1
29 30	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	29 30		√
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		1
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		√
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		<u>·</u>
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		<u>,</u>
35a b	Did the organization have a controlled entity within the meaning of section 512(b)(13)? Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35a 35b		1
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		✓
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,			
38	Part VI	37	1	-
		Forr	n 990	(2011)

Part	Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response to any question in this Part V			
	Onto a in Conto date Contained a response to dry question in tills rate v		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a -0-			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
C	Did the organization comply with backup withholding rules for reportable payments to vendors and			,
	reportable gaming (gambling) winnings to prize winners?	1c	✓	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax		1	
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 13	-	_ [,
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b	✓	
0-	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)		-	- , -
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a 3b		✓
b 4a	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O At any time during the calendar year, did the organization have an interest in, or a signature or other authority	3D		
70	over, a financial account in a foreign country (such as a bank account, securities account, or other financial	1 1		
	account)?	4a		✓
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.			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		√
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		√
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			,
L	organization solicit any contributions that were not tax deductible?	6a		✓
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).	OD		
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
	and services provided to the payor?	7a -	~ -	1
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c		✓_
d	If "Yes," indicate the number of Forms 8282 filed during the year		~-	
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		√
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7f 7g		-
g h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	79 7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting			
	organizations. 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	- 1	-
9	Sponsoring organizations maintaining donor advised funds.		,	
а	Did the organization make any taxable distributions under section 4966?	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
a b	Initiation fees and capital contributions included on Part VIII, line 12			
11	Section 501(c)(12) organizations. Enter:			ı
	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
þ	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		<u> </u>
ь	Note. See the instructions for additional information the organization must report on Schedule O. Enter the amount of reserves the organization is required to maintain by the states in which			
U	the organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		1
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.	14b		Ť
			n 990	(2011)

Part						
	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. S		struct	_		
Cocti	Check if Schedule O contains a response to any question in this Part VI	•••	• •	. 🗸		
Secu	on A. Governing Body and Management		Yes	No		
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 5	$\overline{}$		10		
	If there are material differences in voting rights among members of the governing body, or					
	if the governing body delegated broad authority to an executive committee or similar					
	committee, explain in Schedule O.					
b	Enter the number of voting members included in line 1a, above, who are independent . 1b 5					
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with	į į		İ		
	any other officer, director, trustee, or key employee?	2	ļ	1		
3	Did the organization delegate control over management duties customanly performed by or under the direct					
supervision of officers, directors, or trustees, or key employees to a management company or other person? .						
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		✓		
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		✓		
6	Did the organization have members or stockholders?	6	✓			
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint					
	one or more members of the governing body?	7a	✓			
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,			1		
	stockholders, or persons other than the governing body?	7b		Ľ.		
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			}		
•	The governing body?	ءَ ا	, -			
a b	Each committee with authority to act on behalf of the governing body?	8a 8b	· /	├─		
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at	OD	-	 		
-	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		1		
Secti	on B. Policies (This Section B requests information about policies not required by the Internal Reven		ode.)	 		
			Yes	No		
10a	Did the organization have local chapters, branches, or affiliates?	10a		1		
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,					
	affiliates, and branches to ensure their operations are consistent-with the organization's exempt-purposes?	-10b-		<u> </u>		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	✓			
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.					
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	✓	<u> </u>		
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	✓	↓		
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done.	ا ۔۔ ا	,			
13	Did the organization have a written whistleblower policy?	12c	V	 		
14		13 14	✓			
15	Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by	14	-	\vdash		
	Independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?					
а	The organization's CEO, Executive Director, or top management official	15a		1		
b	Other officers or key employees of the organization	15b		1		
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).					
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement					
	with a taxable entity during the year?	16a		1		
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its					
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the					
	organization's exempt status with respect to such arrangements?	16b		<u>L</u>		
	on C. Disclosure					
17 18	List the states with which a copy of this Form 990 is required to be filed ► Section 6104 requires an organization to make its Forms 1003 (or 1004 if applicable), 000, and 000 T (Section 6104 is applicable).		-1/01			
10	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section available for public inspection. Indicate how you made these available. Check all that apply.	501(င)(၃)s	only)		
	<u> </u>					
19	Own website Another's website Upon request Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict o	f into:	roet r	nolios.		
- •	and financial statements available to the public during the tax year.	ıııter	est þ	oncy,		
20	State the name, physical address, and telephone number of the person who possesses the books and records	of the				
	organization: ► Dixie Stark, 316 N Third ST, Suite 156, Hamilton, MT 59840-2475 (406) 363-2900	J. 1110				

Form	990	(201	17
------	-----	------	----

_	
Dana	•

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

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 employées; 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. Position (A) (B) (F) (do not check more than one Name and Title Average Reportable Reportable Estimated box, unless person is both an hours per compensation compensation from amount of officer and a director/trustee) week from related other Individual t or director Institutional Key employee (describe Highest co employee the organizations compensation hours for organization (W-2/1099-MISC) from the related W-2/1099-MISC organization compensated proanizations and related trustee in Schedule organizations O) (1) John Davenport, President PO Box 1014, Darby MT 59829 1⁻hr/wk⁻ (2) Anna Hughes, Vice President 871 Birch Creek Loop, Corvallis MT 59828 1 hr/wk -0--0--0-(3) Jackie Berenyi, Treasurer 202 South 8th ST, Hamilton MT 59840 1 hr/wk -0--0-(4) Jane Samuelson, Secretary 230 Weber Drive, Hamilton MT 59840 1 hr/wk -0--0-(5) Chris King PO Box 809, Lolo MT 59847 1 hr/wk -0--O-(7) (9) (10) (11) (13)

Part	VII Section A. Officers, Directors, Trust	ees, Key E	mploy	/ees			lighe	st C	ompensated E	mployees (c	ontinue	ed)		
					•	C)								
	(A)	(B)	(do n	ot ch		ition more	than o	one	(D)	(E)			(F)	
	Name and title	Average					is both		Reportable	Reportable			mated	
		hours per	office	r and	dad	irect	or/trus	tee)	compensation	compensation	from		ount of	
		week (describe	익호	'n	Q	~	목표	Fo	from the	related organization	15		ither ensatio	'n
		hours for	름	≝	Officer	🖔	흥	Former	organization	(W-2/1099-MI			m the	**
		related	Individual trustee or director	Institutional trustee	ļ ¬	Key employee	yest c	۳	(W-2/1099-MISC)	•			nızatıon	
		organizations	7 7	E E		💆	<u>-</u> 8	1		•	ŀ		related	
		in Schedule O)	iste	2		#	Pen					orgai	nization	S
		, ,	Ι Φ	6	l	}	Highest compensated employee	ì		<u> </u>	Ì			
							8							
(15)						1								
		1				l			l	. .				
(16)	•													
J		1]	ł							
(17)							-	t						
<u> Ω/</u>		1			}					ļ				
/4 O)				_				-	· · · · -	· · · · · · · · · · · · · · · · · · ·				
(18)					ŀ									
				:	<u> </u>		ļ	<u> </u>						
(19)]			j	1								
										,				
(20)												·		
22		1	1							Ì				
(21)						 		\vdash						
35:7		1	i						•	l	ł			
(00)					-			 	-					
(22)		ł		ŀ	İ		ľ	1		ļ	1			
					_			┞-		ļ	$-\!\!\!+\!\!\!\!-$			
(23)]									- 1			
		<u> </u>			l	l		<u></u>						
(24)														
32		1				ł								
(25)	·····					 		✝			-			
177		1				İ								
1b	Sub-total	L		Ш.—			<u> </u>	┢	-0-	 	-0-			-0-
		 	· •	•	•		•				-v- -			
C	Total from continuation sheets to Part	•		•	•		•							
d									1	L	L			-0-
2	Total number of individuals (including but			ose	e list	ted	above	e) w	ho received m	ore than \$10	0,000	of		
	reportable compensation from the organi	izatıon ► n	one											
													Yes	No
3	Did the organization list any former of	ficer, direc	tor, c	or tr	ust	ee,	key e	emp	oloyee, or high	est comper	sated			
	employee on line 1a? If "Yes," complete	Schedule J	for si	uch	ind	ivid	ual					3	•	1
4	For any individual listed on line 1a, is the												†	
7	organization and related organizations												1	}
	individual												-	,
_												4	—	/
5	Did any person listed on line 1a receive of													
	for services rendered to the organization	? IT "Yes," C	compi	ete	Scr	neau	JIE J	tor s	sucn person			5	<u> </u>	
Section	on B. Independent Contractors													
1	Complete this table for your five highest	compensat	ed inc	dep	end	ent	contr	ract	ors that receive	ed more than	ı \$100,	,000 of	i	
	compensation from the organization. Rep	ort compe	nsatio	on fo	or th	ne c	alend	dar y	year ending wit	th or within the	ne orga	anizatı	on's ta	ax
	year.													
	(A)							T	(B)			(C)		
	Name and business add	Iress						1	Description of s	ervices	c	compens		
								+						
none								\vdash						
								<u> </u>						
	<u></u>							L						
2	Total number of independent contractor	ors (includir	ng bi	ıt n	ot	limit	ed to	o th	nose listed ab	ove) who		-		
	received more than \$100,000 of compens									·				

Par		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
ts	1a	Federated campaigns 1a 1,208				
Contributions, Gifts, Grants and Other Similar Amounts	Ь	Membership dues 1b 0	i			
Q E	ြင	Fundraising events 1c 0				
# #	ď	Related organizations 1d 0				
2 등	e	Government grants (contributions) 1e 60,476				
Sins	f	All other contributions, gifts, grants,			}	
ŧ ē	•					
윤통	_				Ì	
Ē 2	9	Noncash contributions included in lines 1a-1f \$			i	
	<u>h</u>	Total. Add lines 1a–1f ▶	96,434			
Program Service Revenue		Business Code				
eVe	2a					
ĕ	b					
<u>Ķ</u>	С					
Ser	d					
Ę	е		•			
g	f	All other program service revenue .				
Ę	g	Total. Add lines 2a–2f	0			
	3	Investment income (including dividends, interest,				
		and other similar amounts) ▶	2,777		}	
	4	Income from investment of tax-exempt bond proceeds ▶				
	5	Royalties				
		(i) Real (ii) Personal				
	6a	Gross rents				
	ь	Less: rental expenses				
	С	Rental income or (loss)				
	d	Net rental income or (loss)			-	
	7a	Gross amount from sales of (i) Securities (ii) Other		· · · · · · · · · · · · · · · · · · ·		
	·	assets other than inventory				i
	b	Less: cost or other basis			j	
		and sales expenses .				
	С	Gain or (loss)				
	d	Net gain or (loss)				
	_	games (coo,				
ne	8a	Gross income from fundraising				
venue		events (not including \$				
o o		of contributions reported on line 1c).				
Other R		See Part IV, line 18 a				
ŧ	ь	Less: direct expenses b				
O		Net income or (loss) from fundraising events .				
		Gross income from gaming activities.				
		See Part IV, line 19 a				
	b	Less: direct expenses b				
		Net income or (loss) from gaming activities				
		Gross sales of inventory, less			<u>. </u>	
		returns and allowances a				
	ь	Less: cost of goods sold b				
		Net income or (loss) from sales of inventory ▶			ļ	
	<u> </u>	Miscellaneous Revenue Business Code				
	11a					
	b					
	-					
	6	All other revenue				
	d	Total. Add lines 11a-11d				
		Total revenue. See instructions.	99 211			-
		TOWN TOTAL DEC HISHULHUNS	99711		i .	

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).

Check if Schedule O contains a response to any question in this Part IX					
	t include amounts reported on lines 6b, 7b, , and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and				
	organizations in the United States. See Part IV, line 21	0			
2	Grants and other assistance to individuals in				
	the United States. See Part IV, line 22	1,880	1,880		
3	Grants and other assistance to governments,				 "·
_	organizations, and individuals outside the				
	United States. See Part IV, lines 15 and 16	o			
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors,				- · · · · · · · · · · · · · · · · · · ·
•	trustees, and key employees	o	ĺ		
6	Compensation not included above, to disqualified				· · · · · · · · · · · · · · · · · · ·
•	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	o			
7	Other salaries and wages	62,671	52,271	8,320	2,080
8	Pension plan accruals and contributions (include	02,071	32,271	0,320	2,080
·	section 401(k) and 403(b) employer contributions)	2,787	2,230	418	139
9	Other employee benefits	1,829	1,464	274	91
10	Payroll taxes	6,376	5,469	680	227
11	Fees for services (non-employees):	0,370	5,405	000	
··	Management	o	į		
b	Legal	0			
	Accounting	0			
d	Lobbying	0			
e	Professional fundraising services. See Part IV, line 17	0		···	
f	Investment management fees	1,312			1,312
<u>.</u>	Other	0			
12	Advertising and promotion	127		127	
13	Office expenses	6,241	4,370	1,378	493
14	Information technology	9,501	8,832	579	90
15	Royalties	0	5,002		
16	Occupancy	7,548	6,039	1,132	377
17	Travel	383	383	.,,,,,	
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	o			
19	Conferences, conventions, and meetings	240	240		
20	Interest	0			
21	Payments to affiliates	0			
22	Depreciation, depletion, and amortization .	0			
23	Insurance	785		785	
24	Other expenses. Itemize expenses not covered				
	above. (List miscellaneous expenses in line 24e. If		ļ		1
	line 24e amount exceeds 10% of line 25, column				
	(A) amount, list line 24e expenses on Schedule O.)				
а					
b					
С					
ď					
е	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	101,680	83,178	13,693	4,809
26	Joint costs. Complete this line only if the				
	organization reported in column (B) joint costs from a combined educational campaign and		1	İ	
	fundraising solicitation. Check here ▶ 🗍 if		ĺ	1	
	following ŠOP 98-2 (ASC 958-720)	0			

Part X **Balance Sheet** (A) (B) End of year Beginning of year 2,425 3.020 1 Savings and temporary cash investments 32.065 2 2 27,597 3 3 4 4 5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of 5 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) 7 7 8 8 Prepaid expenses and deferred charges . . . 9 9 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a 10b b Less: accumulated depreciation 10c 11 102.062 11 97,404 12 Investments—other securities. See Part IV, line 11 12 13 Investments—program-related. See Part IV, line 11 13 14 14 15 Other assets. See Part IV, line 11 15 16 Total assets. Add lines 1 through 15 (must equal line 34) 136.552 16 128,021 Accounts payable and accrued expenses 17 175 17 187 18 18 19 19 20 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D. Payables to current and former officers, directors, trustees, key 22 employees, highest compensated employees, and disqualified persons. 22 23 Secured mortgages and notes payable to unrelated third parties . . . 23 24 Unsecured notes and loans payable to unrelated third parties . . . 24 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X 25 Total liabilities. Add lines 17 through 25 . . 26 175 26 187 Organizations that follow SFAS 117, check here ▶ ☐ and complete Net Assets or Fund Balances lines 27 through 29, and lines 33 and 34. 27 27 28 28 29 Organizations that do not follow SFAS 117, check here ▶ 📝 and complete lines 30 through 34. 30 Capital stock or trust principal, or current funds 34,490 30 30,617 31 Paid-in or capital surplus, or land, building, or equipment fund . . . 31 32 Retained earnings, endowment, accumulated income, or other funds . 102,062 32 97,404 33 136,377 33 127,834 Total liabilities and net assets/fund balances 136.552 34 128,021

_		Pa	ge 12
	<u> </u>		V
	. —		9,211 1,680
			,469)
			6,377
_		(6	5,074)
		12	7,834
	. <u></u>	_ .	
		Yes	No
	2 a		√ ~
	2b		✓
	2c		
		1	

Form **990** (2011)

Part XI Reconciliation of Net Assets Check if Schedule O contains a response to any question in this Part XI 1 Total expenses (must equal Part IX, column (A), line 25) 2 2 3 3 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) . . . 4 Other changes in net assets or fund balances (explain in Schedule O) 5 Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, 6 Part XII Financial Statements and Reporting Check if Schedule O contains a response to any question in this Part XII Accounting method used to prepare the Form 990: Cash Accrual 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 3а b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits 3b

Form 990 (2011)

SCHEDULE A (Form.990 or 990-EZ)

Department of the Treasury

Name of the organization

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 № 1545-0047

Open to Public Inspection

Employer identification number

Literacy Volunteers of America Bitterroot, Inc 81-0478575 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.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). ☐ A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) ☑ An organization that normally receives: (1) more than 331/3% 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 331/3% 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. **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). If the organization received a written determination from the IRS that it is a Type !, Type !!, or Type III supporting \Box 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 Yes Nο (iii) below, the governing body of the supported organization? 11g(i) (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) Provide the following information about the supported organization(s). (i) Name of supported (ii) EIN (iii) Type of organization (iv) is the organization (vi) Is the (v) Did you notify (vii) Amount of organization (described on lines 1-9 in col (i) listed in your the organization in organization in col governing document? col. (i) of your support? above or IRC section (ii) organized in the U.S? (see instructions)) Yes No Yes No Yes No (A) (B) (C) (D) (E) Total

Schedu	le A (Form 990 or 990-EZ) 2011						Page 2
Part	Support Schedule for Organization (Complete only if you checked the Part III. If the organization fails to	ne box on line	e 5, 7, or 8 of	Part I or if th	e organizatio	n failed to qu	
Secti	on A. Public Support			, [2			
	dar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	(-)	(4) 2000	(0) 2000		(0) 2011	(9) 1014
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3						
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)						
6	Public support. Subtract line 5 from line 4.					<u> </u>	
	on B. Total Support			1 () 222	1 1 2 2 1 2	1	
	dar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
7 8	Amounts from line 4						
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
11	Total support. Add lines 7 through 10						
12	Gross receipts from related activities, etc.	•	-			12	
13	First five years. If the Form 990 is for the	_			-		
Coati	organization, check this box and stop her on C. Computation of Public Suppor			· · · · ·	· · · · ·		🕨 📋
14	Public support percentage for 2011 (line 6			1 column (ft)		14	%
15	Public support percentage from 2010 Sch		•			15	//
16a	331/3% support test-2011. If the organiz	zation did not	check the box	on line 13, and	d line 14 is 33¹	/3% or more, c	heck this
	box and stop here. The organization qua			_			
b	331/3% support test—2010. If the organ check this box and stop here. The organi					e 15 is 33¹/₃% 	or more,
17a	10%-facts-and-circumstances test — 2011. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization						
b	10%-facts-and-circumstances test—2010. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly						
18	Private foundation. If the organization dispersions					k this box and	see □

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.)

Secti	on A. Public Support			, p	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
	dar year (or fiscal year beginning in) ▶	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1	Gifts, grants, contributions, and membership fees						
	received. (Do not include any "unusual grants.")	133,022	79,341	109,267	100,443	96,434	518,507
2	Gross receipts from admissions, merchandise				·		
	sold or services performed, or facilities furnished in any activity that is related to the					j	
	organization's tax-exempt purpose					1	
3	Gross receipts from activities that are not an						
	unrelated trade or business under section 513					İ	
4	Tax revenues levied for the					İ	
	organization's benefit and either paid						
	to or expended on its behalf					i	
5	The value of services or facilities						
	furnished by a governmental unit to the					Į.	
	organization without charge						
6	Total. Add lines 1 through 5	133,022	79,341	109,267	100,443	96,434	518,507
7a	Amounts included on lines 1, 2, and 3					Į	
	received from disqualified persons .						
b	Amounts included on lines 2 and 3						
	received from other than disqualified		1			1	
	persons that exceed the greater of \$5,000					1	
	or 1% of the amount on line 13 for the year						
_	Add lines 7a and 7b						
8	Public support (Subtract line 7c from	1				i	
04	line 6.)	1	I				518,507
	on B. Total Support	(-) 0007	#-> 0000	(-) 0000	(5.0040	(-) 0044	
Galen 9	dar year (or fiscal year beginning in)	(a) 2007 133,022	(b) 2008 79,341	(c) 2009 109,267	(d) 2010	(e) 2011	(f) Total
10a	Amounts from line 6	133,022	79,341	109,267	100,443	96,434	518,507
IVa	payments received on securities loans, rents,	İ					
	royalties and income from similar sources .	7,594	2,251	1,847	2,378	2,777	16,847
b	Unrelated business taxable income (less	7,004	-,201	1,047	2,570		
-	section 511 taxes) from businesses						
	acquired after June 30, 1975						
С	Add lines 10a and 10b	7,594	2,251	1,847	2,378	2,777	16,847
11	Net income from unrelated business						
	activities not included in line 10b, whether						
	or not the business is regularly carried on						
12	Other income. Do not include gain or			-	,		-
	loss from the sale of capital assets						
	(Explain in Part IV.)						
13	Total support. (Add lines 9, 10c, 11,						
	and 12.)	140,616	81,592	111,114	102,821	99,211	535,354
14	First five years. If the Form 990 is for the		's first, second	d, third, fourth,	or fifth tax ye	ar as a section	501(c)(3)
	organization, check this box and stop her			<u> </u>	· · · · ·		🕨 🗖
	on C. Computation of Public Suppor						
15	Public support percentage for 2011 (line 8		•			15	97 %
16	Public support percentage from 2010 Sch			<u> </u>	<u></u>	16	96 %
	on D. Computation of Investment Inc					1 1	
17	Investment income percentage for 2011 (I					17	3 %
18	Investment income percentage from 2010					18	4 %
19a	331/23% support tests—2011. If the organi 17 is not more than 331/23%, check this box						-
_	331/3% support tests—2010. If the organiz		-	•		-	_
b	line 18 is not more than 331/3%, check this b						
~	Private foundation If the organization de		_			· ·	_

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).	Page
.		
·		
•		-
••••••		
		
		·
		-
		••••

SCHEDULE D (Form 990)

Supplemental Financial Statements

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

OMB № 1545-0047

Open to Public Inspection

Employer identification number

Department of the Treasury Internal Revenue Service Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, €

Attach to Form 990. ► See separate instructions.

Literacy Volunteers of America Bitterroot, Inc. 81-0478575 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year 1 2 Aggregate contributions to (during year) . 3 Aggregate grants from (during year) . . Aggregate value at end of year 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? ☐ Yes ☐ No 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 ☐ Yes ☐ No Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure ☐ Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year Total number of conservation easements . . . 2a Total acreage restricted by conservation easements 2b Number of conservation easements on a certified historic structure included in (a) . . . Number of conservation easements included in (c) acquired after 8/17/06, and not on a 2d 3 Number of conservation easements modified, transferred, released, extinguished, or-terminated by-the-organization during the Number of states where property subject to conservation easement is located ▶ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year 7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B) 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. 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: 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 Assets included in Form 990, Part X

_	•
Page	_

Part	III Organizations Maintaining					
3	Using the organization's acquisition, collection items (check all that apply):	accession, and ot	her records, chec	k any of the follo	wing that are a sig	Inificant use of its
а	☐ Public exhibition		d 🗌 Loan	or exchange prog	ırams	
b	☐ Scholarly research		e 🗌 Other			
С	☐ Preservation for future generations	S		**		
4	Provide a description of the organizat		ind explain how t	hey further the or	ganization's exemi	ot ouroose in Part
	XIV.			,	,	5. pa.poso a
5	During the year, did the organization	solicit or receive	donations of art	historical treasure	s or other similar	
•	assets to be sold to raise funds rather					☐ Yes ☐ No
Part						
I all	line 9, or reported an amoun			janization answe	red res to ror	in 990, Fait IV,
1a	Is the organization an agent, trustee,			or contributions of	r other accets not	
ra	included on Form 990, Part X?					
						☐ Yes ☐ No
b	If "Yes," explain the arrangement in Pa	an XIV and comple	ete the following to	abie:		
				⊢_	+	ount
C	Beginning balance			<u>10</u>		
đ	Additions during the year					
е	Distributions during the year					
f	Ending balance				<u> </u>	
2a	Did the organization include an amour		art X, line 21? .			☐ Yes ☐ No
	If "Yes," explain the arrangement in Pa				- - · · · · · · · · · · · · · · · · · ·	
Par	V Endowment Funds. Comple					
		(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a	Beginning of year balance	102,062	73,329	65,799	97,114	
b	Contributions	0	9,000			
C	Net investment earnings, gains, and					,
	losses	(3,346)	21,013	8,705	(30,593)	
d	Grants or scholarships	0	0	0	0	
е	Other expenditures for facilities and					
	programs	o	0	o	o	
f	Administrative expenses	1;312	1,280	1 , 175	722	
g	End of year balance	97,404	102,062	73,329	65,799	
2	Provide the estimated percentage of t	he current year en	d balance (line 1g	, column (a)) held	as:	
а	Board designated or quasi-endowmer		ì%	, , , , ,		
b	Permanent endowment ▶	65 %	-			
С	Temporarily restricted endowment ▶	2 %				
	The percentages in lines 2a, 2b, and 2	c should equal 10	0%.			
3a	Are there endowment funds not in the			at are held and ad	lministered for the	
	organization by:	·	· ·			Yes No
	(i) unrelated organizations					3a(i) ✓
						3a(ii) ✓
b	If "Yes" to 3a(ii), are the related organi					3b
4	Describe in Part XIV the intended uses	of the organization	n's endowment f	unds.		
Part						
	Description of property	(a) Cost or oth			Accumulated	(d) Book value
	,	(investme	1 ' '		epreciation	(a) Book tabe
1a	Land					
b	Buildings					
c	Leasehold improvements					
d	Equipment					
e	Other					
	Add lines 1a through 1e. (Column (d) m	nust equal Form 90	00 Part X column	(B) line 10(c))	•	
				1-7,	<u> </u>	

Part·VII	Investments—Other Securities	. See Form 990, Part X	, line 12.	. ago o
	Description of security or category (including name of security)	(b) Book value	(c) Method of val Cost or end-of-year m	
(1) Financial	denvatives			
(2) Closely-h	neld equity interests			
(3) Other				
(A)				
(B)				
(C)				
(D)				
(E) (F)			···	
(G)				
(U)	•••••		 	
(1)				
	b) must equal Form 990, Part X, col. (B) line 12.)			
Part VIII	Investments - Program Related	J. See Form 990, Part	X, line 13.	
	(a) Description of investment type	(b) Book value	(c) Method of val Cost or end-of-year m	
(1)				
(2)	· · · · · · · · · · · · · · · · · · ·		· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·
(3)				
<u>(4)</u> <u>(5)</u>				
(6)				
(7)				
(8)				
(9)				
(10)				
	b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX	Other Assets. See Form 990, Pa			A-1 D1 -1 -
		a) Description		— — (b) Book-value—
(1)				
(2)				
(3)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)				
	mn (b) must equal Form 990, Part X, c		<u> </u>	
Part X	Other Liabilities. See Form 990,	· · · · · · · · · · · · · · · · · · ·		
1. (1) Fodorol	(a) Description of liability Income taxes	(b) Book value	4	
(2)	Income taxes			
(3)				
(4)			-	
(5)			-	
(6)				
(7)			-	
(8)			7	
(9)	· · · · · · · · · · · · · · · · · · ·		7	
(10)			7	
(11)			7	
	b) must equal Form 990, Part X, col. (B) line 25.)			
2 FIN 48 (A	SC 740) Footpote In Part XIV provide	the text of the footnote t	o the organization's financial states	nente that reports the

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).

_	e D (Form 990) 2011	udited Financial Ctates		Page 4
Part				
1	Total revenue (Form 990, Part VIII, column (A), line 12)		1 2	 ·- ·- ·- ·
2 3	Total expenses (Form 990, Part IX, column (A), line 25)		3	
3 4	Net unrealized gains (losses) on investments		4	
5	Donated services and use of facilities		5	
6	Investment expenses		6	
7	Prior period adjustments		7	
8	Other (Describe in Part XIV.)		8	
9	Total adjustments (net). Add lines 4 through 8		9	
10	Excess or (deficit) for the year per audited financial statements. Combine		10	
Part				um
1	Total revenue, gains, and other support per audited financial statements		1	T
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		<u> </u>	
a	Net unrealized gains on investments	2a	ı	
b	Donated services and use of facilities	2b	╗	
C	Recoveries of prior year grants		_	
d	Other (Describe in Part XIV.)	 	_	
е	Add lines 2a through 2d			,
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIV.)	4b	7	
C	Add lines 4a and 4b		4 c	:
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line	12.)	5	
Part	XIII Reconciliation of Expenses per Audited Financial Statem	nents With Expenses p	er R	eturn
1			1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
а	Donated services and use of facilities	2a		
b	Prior year adjustments	2b		
c	Other losses	2c		-
d	Other (Describe in Part XIV.)	-2d-		
е	Add lines 2a through 2d		2e	<i>i</i>
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	_	
b	Other (Describe in Part XIV.)	4b	⊣ -	
c	Add lines 4a and 4b		4c	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line	e 18.)	5	<u> </u>
Part				
	lete this part to provide the descriptions required for Part II, lines 3, 5, and			
	, line 4; Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, Iditional information.	lines 2d and 4b. Also con	npiete	this part to provide
-		ava abasitable avasaca. Fa		
ine p	imary purpose of our endowment fund is to provide long-term stainability for o	our charitable purposes. En	idown	ient runds are managed
for los	ig-term growth until the earnings from the endowment can generate enough fu	da ta marrarra mamt an atha		
01 101	g-term growth drich the earnings from the endownient can generate enough to	inus to pay our rent or othe	nece	ssary costs of neiping
aduits	gain the literacy skills necessary to gain employment or enter training.			
addic.	gain the meracy skins necessary to gain employment of enter daming.			
-	•			

Schedule D (For	chipedule D (Form 990) 2011 Page 5					
Part XIV	Supplemental Information (continued)					
		*** ***				
	<u></u>					
-						
		•••••				
	***************************************	····				
		**				

SCHEDULE O (Form-990 or 990-EZ)

Department of the 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.

► Attach to Form 990 or 990-EZ.

OMB No 1545-0047

2011

Open to Public Inspection

Name of the organization Employer identification number Literacy Volunteers of America Bitterroot, Inc. 81-0478575 Part VI, Section A, Question 6: Corporation members are our volunteers who have been active within the past year. Part VI, Section A, Question 7a: At our annual meeting of the membership, the members elect new and returning board members, and then the board members elect the officers. Part VI, Section B, Question 11b: This tax return was shared with board members at the regularly schedule meeting on February 12, 2013. The form was reviewed in detail at the meeting. The 2011 Form 990 was also sent to the board members electronically on February 11, 2013. Part VI, Section B, Question 12c: Once each year, right after new board members are installed, each board member completes and signs our conflict of interest policy, disclosing any potential conflicts of interest. Part VI, Section C, Question 19: We make our governing documents, conflict of interest policy, and financial statements available upon request. We also include financial statements in our annual report to the community. Part XI, Question 5: Other changes in net assets or fund balances. \$6,074 is the unrealized loss on the stocks held in the endowment fund.