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Form **990**

Return of Organization Exempt From Income Tax

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

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations
 ▶ Do not enter Social Security numbers on this form as it may be made public.

Information about Form 990 and its instructions is at www.irs.gov/form990

Open to Public

inter	nai Reven	iue Service	Information about Form 990 and its instructions is at www.in	s.gov/rorm9	90	illspec	tiosi
<u> </u>	For the	2013 cale	ndar year, or tax year beginning July 1 , 2013, and endi	ng Ji	ine 30	<u>, 20_14</u>	
В	Check if	applicable	C Name of organization Literacy Council of Alaska		D Employ	er identification n	umber
Ш	Address	change	Doing Business As	<u> </u>		92-6010100	
\sqcup	Name ch	hange	Number and street (or P O box if mail is not delivered to street address) Room/si	urte	E Telepho	ne number	
Ц	Initial ret	turn	517 Gaffney Rd.			907-456-6212	
	Terminat	ited	City or town, state or province, country, and ZIP or foreign postal code		1		
	Amende	ed return	Fairbanks, AK 99701	_	G Gross re	ceipts \$	515,907
	Applicat	tion pending	F Name and address of principal officer: Lisa Baker	H(a) Is this a	group return for	subordinates? 🔲 Yes	i ☑ No
			517 Gaffney Rd., Fairbanks, AK 99701	H(b) Are a	ill subordinate	s included? 🔲 Yes	No No
<u>L</u>	Tax-exe	mpt status	√ 501(c)(3) √ (insert no.) √ 4947(a)(1) or √ 527	Hf '	'No," attach a	list (see instruction	ons)
J	Website	e: ► ww	w.literacycouncilofalaska.org	H(c) Grou	p exemption	number ▶	
K	Form of	organization.	Corporation ☐ Trust ☐ Association ☐ Other ► L Year of forma	ition: 197	4 M State	of legal domicile	AK
Р	art I	Summ	nary				
	1	Briefly de	escribe the organization's mission or most significant activities: Our m	ission is to	promote lit	eracy for peopl	e of all
8	l	ages in F	airbanks and the interior of Alaska. Significant activities include adult, sch	ool age, and	computer	literacy as well	as book
Governance	1	and com	outer recycling.				
9	2	Check th	is box ▶☐ if the organization discontinued its operations or disposed	of more tha	an 25% of	its net assets.	
Ĝ	3	Number	of voting members of the governing body (Part VI, line 1a)		. 3		6
9 5	4	Number	of independent voting members of the governing body (Part VI, line 1b)	. 4		0
ŧ	5	Total nur	mber of individuals employed in calendar year 2013 (Part V, line 2a)		. 5		14
Activities &	6	Total nur	mber of volunteers (estimate if necessary)		. 6		280
¥	7a	Total uni	related business revenue from Part VIII, column (C), line 12		. 7a		0
	b	Net unre	lated business taxable income from Form 990-T, line 34		. 7b		0
	T			Prior	Year	Current Y	ear
Revenue	8	Contribu	tions and grants (Part VIII, line 1h)	337,930		318,268	
	9	Program	service revenue (Part VIII, line 2g) RECEIVED	79,873		94,654	
<u>§</u>	10	Investme	ent income (Part VIII, column (A), lines 3, 4, and 76)		0		2,986
Œ	11		venue (Part VIII, column (A), lìnẹْڃِځِةْ, 6طِ, 8ِc, 9ٍc, 10c, and 1 أُواِيُةُ . .	105,365		99,999	
	12	Total rev	523,168		515,907		
	13	Grants a	nd sımılar amounts paid (Part İX, column (A), lines 1-3) .		0		0
	14		paid to or for members (Part IX, column (A), line 4)		0		0
ø	15	Salaries,	other compensation, employee benefits (Part IX column (A) lines 5-10)		329,306		364,450
Expenses	16a	Profession	onal fundraising fees (Part IX, column (A), line 11e)		0		0
8	b	Total fun	draising expenses (Part IX, column (D), line 25) ▶				
a	17	Other ex	penses (Part IX, column (A), lines 11a-11d, 11f-24e)		138,104		116,901
	18	Total exp	penses. Add lines 13-17 (must equal Part IX, column (A), line 25)		467,410		481,611
	19	Revenue	less expenses. Subtract line 18 from line 12		55,758		34,296
2 8				Beginning of	Current Year	End of Ye	ear
egts Jan	20	Total ass	sets (Part X, line 16)		379,358		398,032
Net Assets Fund Balan	21	Total liab	oilities (Part X, line 26)		28,673		12,951
2,5	22	Net asse	ets or fund balances. Subtract line 21 from line 20		350,785		385,081
P	art II	Signa	ture Block				
			rry, I declare that I have examined this return, including accompanying schedules and stat			my knowledge and	d belief, it is
tru	e, correc	ct, and comp	lete. Declaration of preparer (other than officer) is based on all information of which prepar	er has any kno	wledge.		
			Dig Fall			13/201	14_
Sig		Sigr	nature of officer.		Date /	7	/
He	re		Lisa Baker, President				
		Тур	e or print name and title				
Pa	id	Print/Ty	pe preparer's name Preparer's signature	Date	Check	□ f PTIN	<u> </u>
	epare	er 🗀			self-em		
	se On		name ►	F	irm's EIN ▶		
_			address ▶	F	hone no		
Ma	y the If	RS discus	s this return with the preparer shown above? (see instructions)	<u></u>		[] Ye	
For	Paper	work Redu	action Act Notice, see the separate instructions. Cat	No 11282Y		Form	990 (2013),

	(Code:) (Exp	enses \$	141,943 inc	cluding grants of	of \$	66,217) (Revenue \$	165,157)			
	School-age Literacy Proc	ram								
	In a series			ren that builds s		onal foundations and foster	s a lifelong love of			
	SES Program - 15 kids, 2	volunteers								
	Guys Read - 500 boys, 50	volunteers				•••••				
	Gals Read - 508 girls, 39	volunteers								
	Cross-age Tutoring - 24 kids, 11 volunteers									
	After School Program at Birch Park - 42 kids, 1 volunteer Substance Abuse Prevention Program - 49 kids, 3 volunteers									
	Substance Abuse Preven	tion Program -	49 kids, 3 volu	ınteers						
-	(Code:) (Exp	enses \$	108,742 inc	cluding grants of	of \$) (Revenue \$	115,741)			
	Book and Computer Rec	ycling								
	Free Books Provided - 24	,890 books								
	Computers Provided - 70									
	Workplace Literacy Stude	ents - 4								
	Other program services (Expenses \$		Schedule O.) g grants of \$) (Revenue \$)				
	Total program service e	· ·		394,745						
							Form 990 (2			

Part I	V Checklist of Required Schedules			
			Yes	No
	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
	complete Schedule A	1	√	
	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	✓	<u> </u>
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		1
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)	3		
•	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,"	_		١,
_	complete Schedule D, Part III	8		/
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or			l
	debt negotiation services? If "Yes," complete Schedule D, Part IV	9		1
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted	3		
	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	1	
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.		i	
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		1
đ	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		1
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses]	
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	11f	<u> </u>	✓
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete		Ì	1
	Schedule D, Parts XI and XII	12a		
В	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional.	12b		✓
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	 	1
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		1
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,			Ť
	fundraising, business, investment, and program service activities outside the United States, or aggregate	ļ		
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		✓
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or			
	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		✓
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV.	16	ļ	1
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on	 	\vdash	+*
٠.	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		1
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			Ť
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	1	<u>L</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	<u> </u>	1
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a	<u> </u>	1
<u>b</u>	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		<u> </u>
		For	m 49((2013)

Part	V Checklist of Required Schedules (continued)			
			Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		1
22	Did the organization report more than \$5,000 of grants or 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		✓
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		-	1
	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 25a	24a		√ _
b c	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period 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 24c		1
d		24d		/
25a	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? If "Yes," complete Schedule L, Part I	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	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so, complete Schedule L, Part II	26		1
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		1
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 A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete	28a		✓
	Schedule L, Part IV	28b		✓
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		1
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	✓	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		1
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		1
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		1
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		1
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		✓
b	If "Yes" to line 35a, 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	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		1
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,			
	Part VI	37		1
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38	1	
			004	_

Part				_
	Check if Schedule O contains a response or note to any line in this Part V	<u>···</u>		. 📙
10	Fatoutho number reported in Day 2 of Farms 1000 Fatou 0 of not applicable		Yes	No
	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			İ
	Did the organization comply with backup withholding rules for reportable payments to vendors and			1
•	reportable gaming (gambling) winnings to prize winners?	1c	1	·
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	_ <u>.</u> _	Ť	
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 14			1
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b	1	1
_	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)		<u> </u>	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		1
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O.	3b		1
	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	ĺ	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	<u> </u>	1
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	L	1
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		1
þ	If "Yes," did the organization include with every solicitation an express statement that such contributions or		1	
_	gifts were not tax deductible?	6b	├──	↓
7	Organizations that may receive deductible contributions under section 170(c).		1	1
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods		ļ	-
	and services provided to the payor?	7a	├	1
	If "Yes," did the organization notify the donor of the value of the goods or services provided? Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	7b	\vdash	
С	required to file Form 8282?	7c		
a	If "Yes," indicate the number of Forms 8282 filed during the year		 	+
d e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	1	1
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f	 	1
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g	 	+
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	t	
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	1		1
	organization, have excess business holdings at any time during the year?	8		
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:			
а	Initiation fees and capital contributions included on Part VIII, line 12	1		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . 10b	1		
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders	1		l
ь	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them.)	ļ		-
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	ـــــ	↓
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	1		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	1	—	
а	Is the organization licensed to issue qualified health plans in more than one state?	13a	┼	+-
L	Note. See the instructions for additional information the organization must report on Schedule O.			1
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	1		
_	Enter the amount of reserves on hand	1		1
C 140		14a	+-	1
14a h	Did the organization receive any payments for indoor tanning services during the tax year?	14b	+	+
<u>b</u>	ii res, has it lieu a rottii rzo to report triese payments: II rvo, provide air explanation in schedule o .	<u> </u>	ﺒـــــ	

Part				
	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. S.			
Section	Check if Schedule O contains a response or note to any line in this Part VI		<u> </u>	<u> </u>
OGCER	71 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 6	\Box		i
	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 0			1
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			
_	any other officer, director, trustee, or key employee?	2		✓
3	Did the organization delegate control over management duties customarily performed by or under the direct			
	supervision of officers, directors, or trustees, or key employees to a management company or other person? .	3		/
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4 5		/
5 6	Did the organization become aware during the year of a significant diversion of the organization's assets? . 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	,	1
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,			
	stockholders, or persons other than the governing body?	7b		✓
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
	the year by the following:		· 	
а	The governing body?	8a	√	
ь 9	Each committee with authority to act on behalf of the governing body?	8b	✓	
3	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		
Section	on B. Policies (This Section B requests information about policies not required by the Internal Reven		ode.)	<u> </u>
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		✓
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,			Ì
	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 40-	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	100	1	
12a b	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a 12b	▼	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"	120	<u> </u>	
•	describe in Schedule O how this was done	12c	ĺ	1
13	Did the organization have a written whistleblower policy?	13	√	
14	Did the organization have a written document retention and destruction policy?	14	✓	
15	Did the process for determining compensation of the following persons include a review and approval by			
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			ļ!
a	The organization's CEO, Executive Director, or top management official	15a	✓	-
b	Other officers or key employees of the organization	15b		/
16a	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement		l	
,,,,	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> </u>	
	on C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed Alaska Section 6104 required to a required to the filed Alaska	501/	(a)(a)-	. ook 4
18	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.	1 301(ပ)(၁)S	oniy)
19	Own website Another's website Upon request Other (explain in Schedule O) Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of int	erest	polic	v. and
	financial statements available to the public during the tax year.	. = •		
20	State the name, physical address, and telephone number of the person who possesses the books and records	of the)	
	organization: ► Rehecca Magowan			

Dago	•

Form 990 (2013)

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 employees; highest compensated employees; and former such persons.

Check this box if neither the organization no	r anv relate	d ora:	ลกเฮ	atın	n co	nmne	nsa	ted any curren	t officer director	or trustee.	
Oneck this box in heither the organization no	any relate	<u> </u>	A1 11Z	(0		Jilipe	150	T Carry Carrer		, or tradition.	
(A) Name and Title	(B) Average hours per	Officer and a director/ tractory			an	(D) Reportable compensation	(E) Reportable compensation from related	(F) Estimated amount of other			
	week (list any hours for related organizations below dotted line)		Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations	
(1) Lisa Baker, Chair	11										_
517 Gaffney Rd. Fairbanks, AK 99701		✓	_	✓				0	0		0
(2) Bradley McGinnity	ļ <u>1</u>	1		/	'			0	o		0
517 Gaffney Rd. Fairbanks, AK 99701 (3) Mary Huskey	1	+						ļ <u>v</u>			
517 Gaffney Rd. Fairbanks, AK 99701	 	1		1				0	0		0
(4) Michael McConahy	1	<u> </u>	<u> </u>		\vdash			† <u>*</u>	<u> </u>		_
517 Gaffney Rd. Fairbanks, AK 99701	†··	1		l				lo	0		0
(5) Lupe Grammont	1										_
517 Gaffney Rd. Fairbanks, AK 99701		✓		<u> </u>				0	0		0
(6) Kelly Krug	1					ļ					
517 Gaffney Rd. Fairbanks, AK 99701		/	<u> </u>	L	L_		_	0	0		0
		ļ									
(8)											_
(9)							-				
(10)	ļ	-			-						_
(11)					-		_				
(12)				-	-			1			
(13)					-						
(14)	<u> </u>	 		-	<u> </u>		\vdash				

Part	Section A. Officers, Directors, Trust (A)	tees, Key E			(C Pos	C) ation			ompensated E	mployees (c	ontinued		(F)	
	Name and title	Average hours per week (list any	box, office	unles ranc	s pe d a d	rson	than o	an ee)	Reportable compensation from	Reportable compensation related		amo	mated ount of ther	
		hours for related organizations below dotted line)		Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizatioi (W-2/1099-M		from organ and	ensation the nization related izations	1
(15)														
(16)					-									
(17)														
(18)			 			_								
(19)										<u> </u>				
(20)		<u> </u>								 				
(21)								-			- -			
(22)														
(23)		 												
(24)				-										
(25)														
1b c d	Sub-total Total from continuation sheets to Part Total (add lines 1b and 1c)	VII, Sectio	n A	•			- -	<u> </u>						0
2	Total number of individuals (including bur reportable compensation from the organ	t not limited				_		e) w	ho received m	ore than \$10	00,000	of		
3	Did the organization list any former of employee on line 1a? If "Yes," complete							_	oloyee, or high	-		3	Yes	No
4	For any individual listed on line 1a, is the organization and related organizations individual	greater th	an \$	150,	,000)? /	f "Ye	s, "	complete Sch	nedule J fo	r such	4	ļ	✓
5	Did any person listed on line 1a receive of for services rendered to the organization	or accrue co	ompe	nsa	tion	fro	m any	un un	related organi	zation or ind	ıvidual	5		1
	on B. Independent Contractors					_					A		<u> </u>	
1	Complete this table for your five highest compensation from the organization. Rej year.													ax
	(A) Name and business add	dress							(B) Description of s	services	C	(C) ompens		
2	Total number of independent contractor received more than \$100,000 of compen							th	nose listed ab	ove) who				

Form 9	90 (2013	3)							Page 9
Part	VIII	Statement of Reve	nue			· -			
	•	Check if Schedule O	contains	a res	ponse or note to	any line in this (A) Total revenue	Part VIII	(C) Unrelated business	(D) Revenue excluded from tax
1					1		function revenue	revenue	under sections 512-514
2 g	1a	Federated campaigns	<u> </u>	1a	r		reveilue		312-314
Contributions, Gifts, Grants and Other Similar Amounts	Ь			1b			i		ı
S, E	c	Fundraising events .		1c	25,528				,
iifts ar A	d	Related organizations		1d	20,020				
S, E	e	Government grants (con		1e	143,217				
ion	f	All other contributions, gi			,				· ·
なな		and similar amounts not inc	cluded above	1f	149,523				1
E O	g	Noncash contributions includ	ted in lines 1a	-1f: \$			}		
SE	h	Total. Add lines 1a-1	f		▶	318,268			İ
9					Business Code				
Program Service Revenue	2a	Classes and Tutoring F	Fees		n/a	12,484	12,484		
æ	b	Cross Age Tutoring			n/a	10,000	10,000		
Ş.	С	Gals Read and SES			n/a	59,650	59,650		
Ser	d	EL Civics Contract			n/a	9,000	9,000		
E	е	Computer Refurbishing	9		n/a	3,520	3,520		
ogra	f	All other program ser	vice reveni	Je.					<u></u>
_&	g	Total. Add lines 2a-2				94,654			
	3	Investment income		divid	ends, interest,				
	1	and other similar amo	•	-	•	2,986			
	4	Income from investmen	t of tax-exe	mpt b	ond proceeds ►				<u> </u>
	5	Royalties	· · · · ·	<u></u>					
	_		(i) Rea		(ii) Personal				
	6a	Gross rents	<u> </u>						
	b	Less: rental expenses							
	C	Rental income or (loss)			L				}
	d	Net rental income or (Gross amount from sales of	(IOSS) .		▶ (ii) Other				
	7a	assets other than inventory		(II) Other					
	Ь	Less: cost or other basis							
		and sales expenses .	İ						
	c	Gain or (loss)			<u> </u>				
	d	Net gain or (loss)	L		<u> </u>				
	"	rvet gain or (loss) .							
9	8a	Gross income from fu	ındraising						
Ģ		events (not including \$	a. a.og						1
ě		of contributions reporte	ed on line 1	c).					
<u>_</u>		See Part IV, line 18 .							
Other Revenue	ь	Less: direct expenses	S	. b					
U	С	Net income or (loss) f			events . ►		!		
	9a	Gross income from ga							
		See Part IV, line 19 .		· a					İ
	Ь	Less: direct expenses	s	. b					
	С	Net income or (loss) f	rom gamır	ig act	ivities ▶				
	10a	Gross sales of in							
		returns and allowance	es	· a					1
	b	Less: cost of goods s							- <u></u>
	С	Net income or (loss) f		of inv					
		Miscellaneous R	levenue		Business Code				
	11a				n/a	96,186			
	b	Health Insurance Refu	nd		n/a	3,793			-
	C				n/a	20			
	ď	All other revenue .		•	<u> </u>				
	12	Total. Add lines 11a- Total revenue. See in			🟲	99,999			
	112	TOWN REVENUE, 566 II	usuucdons	. .	🗩 1	515 907			1

Part IX Statement of Functional Expenses

Sectio	n 501(c)(3) and 501(c)(4) organizations must com			s must complete colu	mn (A).
	 Check if Schedule O contains a respon 			· · · · · · · · · · · · · · · · · · ·	
	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				
2	Grants and other assistance to individuals in the United States. See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16				
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees				
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 8	Other salanes and wages Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	293,424 5,529	240,252 4,101	53,172 1,428	
9	Other employee benefits	35,982	24,345	11,637	
10	Payroll taxes	29,515	24,853	4,662	
11	Fees for services (non-employees):			j	
а	Management				
b	Legal				
C	Accounting	4,500		4,500	
d	Lobbying				
e	Professional fundraising services. See Part IV, line 17				
f g	Investment management fees				
12	Advertising and promotion	4,574	3,769	25	780
13	Office expenses	11,436	9,166	754	1,516
14	Information technology	11,100	0,100		.,,,,,,,,
15	Royalties	- <u>-</u>			
16	Occupancy	50,138	48.240	1,898	
17	Travel	2,582	2,237	339	6
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings .	494	494		
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization .	11,372	9,769	1,603	· · ·
23	Insurance	5,958	5,434	524	
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
а	Supplies	20.027	17,641	1,324	1.000
b	Equipment and Loss on Assets	20,027 446	17,641	1,324	1,062
C	Dues and Fees	2,491	1,588	593	310
d	Other	3,143	2,410	61	672
e	All other expenses	3,143	2,410		
25	Total functional expenses. Add lines 1 through 24e	481,611	394,745	82,520	4,346
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ☐ if following SOP 98-2 (ASC 958-720)	40,011	004,740	32,020	

Part X · Balance Sheet Check if Schedule O contains a response or note to any line in this Part X (A) (B) Beginning of year End of year 1 118,491 167,291 2 2 57,661 57,788 3 105.003 3 79,658 4 4 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. 5 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary 6 7 7 8 Inventories for sale or use 8 434 549 9 Prepaid expenses and deferred charges . 9 9,605 11,349 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a 10b Less: accumulated depreciation 10c b 64,849 73,956 63,541 Investments—publicly traded securities 11 11 12 12 Investments—other securities. See Part IV, line 11 . 14,193 17,971 13 Investments—program-related. See Part IV, line 11... 13 14 14 15 15 16 Total assets. Add lines 1 through 15 (must equal line 34) . . . 379,458 16 398,032 17 17 Accounts payable and accrued expenses 28,673 12,951 18 18 Deferred revenue 19 19 20 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D. 21 22 Loans and other payables to current and former officers, directors, Liabilities trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 22 23 23 Secured mortgages and notes payable to unrelated third parties . . . 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 26 Total liabilities. Add lines 17 through 25 26 28,673 12,951 Organizations that follow SFAS 117 (ASC 958), check here ▶ ☐ and **Fund Balances** complete lines 27 through 29, and lines 33 and 34. 27 27 204,383 256,540 28 72,446 28 65,000 29 73,956 29 63,541 Organizations that do not follow SFAS 117 (ASC 958), check here ▶ □ and complete lines 30 through 34. ŏ 30 Capital stock or trust principal, or current funds 30 Net Assets 31 31 Paid-in or capital surplus, or land, building, or equipment fund . . . 32 32 Retained earnings, endowment, accumulated income, or other funds. 33 33 350,785 385,081 Total liabilities and net assets/fund balances . . . 34 379,458 34 398,032

	- 4				9	
Part	XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI		<u>.</u>	<u>.</u> .		
1	'Total revenue (must equal Part VIII, column (A), line 12)	1		51	5,907	
2	Total expenses (must equal Part IX, column (A), line 25)	2		48	1,611	
3	Revenue less expenses. Subtract line 2 from line 1	3	34,2			
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	350,78			
5	Net unrealized gains (losses) on investments	5				
6	Donated services and use of facilities	6				
7	Investment expenses	7				
8	Prior period adjustments	8				
9	Other changes in net assets or fund balances (explain in Schedule O)	9				
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line	1				
	33, column (B))	10		38	<u> 5,032</u>	
Part	XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII		<u></u>		<u></u>	
				Yes	No	
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," ex	plaın i	n	1		
	Schedule O.					
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?			✓_		
	If "Yes," check a box below to indicate whether the financial statements for the year were com	oiled o	r			
	reviewed on a separate basis, consolidated basis, or both:					
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis					
b	Were the organization's financial statements audited by an independent accountant?		. 2b		✓	
	If "Yes," check a box below to indicate whether the financial statements for the year were audite	ed on	a			
	separate basis, consolidated basis, or both:					
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis					
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for or			<u> </u>		
	of the audit, review, or compilation of its financial statements and selection of an independent account	intant?	2c	✓		
	If the organization changed either its oversight process or selection process during the tax year, ex	plain i	n			
	Schedule O.					
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set	forth i	n _			
	the Single Audit Act and OMB Circular A-133?		. 3a		1	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo	rgo th	e			
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such a	udits.	3b		<u> </u>	
			For	n 990	(2013)	

SCHEDULE A (Form 990 or 990-EZ)

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.

Department of the Treasury Internal Revenue Service ▶ Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990. OMB No. 1545-0047

Open to Public Inspection

Name of the	ne organization					Employer identification	number
Literacy (Council of Alaska					92-60	10100
Part I	Reason for Public Char	ity Status (All	organizations must	comple	te this p	art.) See instructio	ns.
	inization is not a private founda		•		-		
	A church, convention of church			bed in se	ction 17	0(b)(1)(A)(i).	
	A school described in section		-				
	A hospital or a cooperative hos		e'				
	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.)						
7 🗸	A federal, state, or local govern An organization that normally described in section 170(b)(1):	receives a subs	tantial part of its supp				the general public
8 🗌	A community trust described in	section 170(b)	(1)(A)(vi). (Complete I	Part II.)			
	An organization that normally receipts from activities related support from gross investme acquired by the organization at	I to its exempt int income and	functions—subject to unrelated business to	certain taxable ii	exception ncome (l	ns, and (2) no more ess section 511 ta	than 331/3% of its
11 🗆	An organization organized and an organization organized and one or more publicly supported the box in lines 11a through 11c	operated exclusi l organizations d	vely for the benefit of, lescribed in section 5 6	to perfor 09(a)(1) o	m the fun r section	ctions of, or to carry 509(a)(2). See secti	i on 509(a)(3). Check
a [☐ Type I. A supporting organization organization. You must com) the power to re	egularly appoint or ele				
b [☐ Type II. A supporting organize control or management of the organization(s). You must co	e supporting org	ganization vested in th				
c [Type III functionally integra	rted. A supportin	ng organization opera				y integrated with,
d [Type III non-functionally intended that is not functionally integral requirement (see instructions)	ated. The organi	zation generally must	satisfy a	distributi	ion requirement and	
е [Check this box if the organiz functionally integrated, or Ty	ation received a	written determination	from the	IRS that	rt is a Type I, Type I	I, Type III
f E	inter the number of supported of	organizations .					
g P	rovide the following information	about the supp	oorted organization(s).				
(1)	Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			(see instructions))	Yes	No	-	
(A)							
(B)							
(C)							
(D)							
(E)							
Total		ł	i	1	1	i	I

Schedule A (Form 990 or 990-EZ) 2014 Page 2 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) 2010 **(b)** 2011 (c) 2012 (d) 2013 (e) 2014 (f) Total Gifts. grants, contributions, membership fees received. (Do not include any "unusual grants.") . . . 499,736 299,402 318,268 380,393 311,924 1,809,723 2 revenues levied for organization's benefit and either paid to or expended on its behalf . . . The value of services or facilities 3 furnished by a governmental unit to the organization without charge Total. Add lines 1 through 3. . . . 380,393 499,736 299,402 311,924 318,268 1,809,723 The portion of total contributions by 5 each person (other than governmental unıt or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) Public support. Subtract line 5 from line 4. 1,809,723 Section B. Total Support **(b)** 2011 (c) 2012 (d) 2013 (e) 2014 (f) Total Calendar year (or fiscal year beginning in) (a) 2010 Amounts from line 4 7 380,393 499,736 299,402 311,924 318.268 1,809,723 8 Gross income from interest, dividends, payments received on securities loans. rents, royalties and income from similar sources 608 206 2,986 4,551 751 9 Net income from unrelated business activities, whether or not the business is regularly carried on Other income. Do not include gain or 10 loss from the sale of capital assets (Explain in Part VI.) 138,305 204,202 194,653 131,022 211,244 879,426 Total support. Add lines 7 through 10 11 2,693,700 Gross receipts from related activities, etc. (see instructions) 12 879,426 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) Section C. Computation of Public Support Percentage 67.1 % Public support percentage for 2014 (line 6, column (f) divided by line 11, column (f)) 14 14 15 Public support percentage from 2013 Schedule A, Part II, line 14 69 % 331/2% support test - 2014. If the organization did not check the box on line 13, and line 14 is 331/2% or more, check this 331/3% support test-2013. If the organization did not check a box on line 13 or 16a, and line 15 is 331/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization \square 10%-facts-and-circumstances test - 2014. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported b 10%-facts-and-circumstances test-2013. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly

Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see

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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.)

Socti	on A Public Current	under the te	SIS listed bei	ow, please co	Jinpiele Part		
	on A. Public Support	(-) 0010	(h) 0044	(-) 0010	(d) 0040	(=) 0014	(A T-4-1
Calen 1	dar year (or fiscal year beginning in) Gifts, grants, contributions, and membership fees	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
•	received. (Do not include any "unusual grants.")			1			
2	Gross receipts from admissions, merchandise		 	 	 	 	
	sold or services performed, or facilities		1	ł	1		
	furnished in any activity that is related to the		1				
3	organization's tax-exempt purpose Gross receipts from activities that are not an						
•	unrelated trade or business under section 513		ł	1	ł	}	
4	Tax revenues levied for the		·				
7	organization's benefit and either paid				ļ	ļ	
	to or expended on its behalf		ł	1	1	}	
5	The value of services or facilities			 			
•	furnished by a governmental unit to the				1		
	organization without charge		ļ		ļ	;	
6	Total. Add lines 1 through 5		 	 	 	 	
	Amounts included on lines 1, 2, and 3			 		 	
	received from disqualified persons .		1		}]]
b	Amounts included on lines 2 and 3			 	 		
	received from other than disqualified				}	İ	
	persons that exceed the greater of \$5,000		1				
	or 1% of the amount on line 13 for the year		1				
С	Add lines 7a and 7b				<u> </u>	<u> </u>	
8	Public support (Subtract line 7c from						
	line 6.)			[Ĺ
Secti	on B. Total Support						
Calen	dar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
9	Amounts from line 6						
10a	Gross income from interest, dividends,						
	payments received on securities loans, rents,		1				
	royalties and income from similar sources .						
b	Unrelated business taxable income (less					1	
	section 511 taxes) from businesses					1	
	acquired after June 30, 1975		ļ	_	 	ļ	
	Add lines 10a and 10b		_	ļ <u>.</u>	ļ	_	ļ
11	Net income from unrelated business						
	activities not included in line 10b, whether		1	}	1	l	1
	or not the business is regularly carned on	· · · · · · · · · · · · · · · · · · ·	 		-	-	
12	Other income. Do not include gain or						1
	loss from the sale of capital assets					1	1
42	(Explain in Part VI.)		 	 	 	 	
13	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First five years. If the Form 990 is for the	o organizatio	n'e first sees	nd third fourt	h or fifth toy w	ear as a soction	n 501(c)(3)
14	organization, check this box and stop he	_			n, or mun tax y		
Secti	on C. Computation of Public Suppor						· · · · <u>-</u>
15	Public support percentage for 2014 (line to			13. column (fi)		15	 %
16	Public support percentage for 2014 (inter-	. ,,	•				
	on D. Computation of Investment In			<u> </u>		1	
17	Investment income percentage for 2014 (oy line 13. colu	ımn (f))	17	%
18	Investment income percentage from 2013		* * *	-		———	%
19a	331/3% support tests—2014. If the organ						
	17 is not more than 331/3%, check this box						
b	331/3% support tests-2013. If the organiz	•	_	•			
_	line 18 is not more than 331/3%, check this						
20	Private foundation. If the organization de						

Part IV Supporting Organizations

(Complete only if you checked a box on line 11 of Part I. If you checked 11a of Part I, complete Sections A and B. If you checked 11b of Part I, complete Sections A and C. If you checked 11c of Part I, complete Sections A, D, and E. If you checked 11d of Part I, complete Sections A and D, and complete Part V.)

	Sections A, D, and E. If you checked 11d of Part I, complete Sections A and D, and complete P	art V	<u>.)</u>	
Secti	on A. All Supporting Organizations		1	
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.	1	Yes	No
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).	2		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.	3b		
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2) (B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.	3c		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked 11a or 11b in Part I, answer (b) and (c) below.	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.	4b		
c	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document).	5a		
b	designated in the organization's organizing document?	5b		
6 6	Substitutions only. Was the substitution the result of an event beyond the organization's control? Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations; (b) individuals that are part of the charitable class benefited by one or more of its supported organizations; or (c) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.	5c		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L. (Form 990).	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI .	9a		
b	Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI .	9b		
C	Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI .	9с		
10a	Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer (b) below.	10a		
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to			

determine whether the organization had excess business holdings.)

10b

Part	Supporting Organizations (continued)		v . 1	A1 -
			Yes	No
	'Has the organization accepted a gift or contribution from any of the following persons?		1	
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)	11a		
_	below, the governing body of a supported organization?	11b		
	A family member of a person described in (a) above? A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		
	on B. Type I Supporting Organizations	1.0	1	
5000	on b. Type I dupporting diguinzations		Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			}
	controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.			
		1		
2	Did the organization operate for the benefit of any supported organization other than the supported			1
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part			
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2	لــــــا	
Secti	on C. Type II Supporting Organizations		V	A! -
_			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			ĺ
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed			İ
	the supported organization(s).	1	 	لـــــــ
Sacti	on D. All Type III Supporting Organizations	•		
OCCLI	on b. All Type in Supporting Organizations		Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
•	organization's tax year, (1) a written notice describing the type and amount of support provided during the prior tax	1		ĺ
	year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.		<u> </u>	
		3	L	
Secti	on E. Type III Functionally-Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see	instru	ction	s):
а	☐ The organization satisfied the Activities Test. Complete line 2 below.			
b	☐ The organization is the parent of each of its supported organizations. Complete line 3 below.			
C	☐ The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see in:	structi	ons).
2	Activities Test. Answer (a) and (b) below.		Yes	No
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
u	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more			
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the	1		
	reasons for the organization's position that its supported organization(s) would have engaged in these		-	
	activities but for the organization's involvement.	2b	_	ļ
3	Parent of Supported Organizations. Answer (a) and (b) below.	1		
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	trustees of each of the supported organizations? Provide details in Part VI.	3a	\vdash	
þ	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	21	-	
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b	Ь	

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Org	anı	zations	
1 Check here if the organization satisfied the Integral Part Test as a qualifying other Type III non-functionally integrated supporting organizations must correct the control of the c			•
Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3	4		
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	8		
8 Adjusted Net Income (subtract lines 5, 6 and 7 from line 4) Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other factors (explain in detail in Part VI):			
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d	3		
4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by .035	6		
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8		
Section C - Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2 Enter 85% of line 1	2		
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4 Enter greater of line 2 or line 3	4		
5 Income tax imposed in prior year	5		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to			
emergency temporary reduction (see instructions)	6		
7 Check here if the current year is the organization's first as a non-functional instructions)	ly-in	tegrated Type III suppor	ting organization (see

Part	V Type III Non-Functionally Integrated 509(a)(3) Supporting Organi	zations (continued)	
Secti	on D - Distributions			Current Year
1	'Amounts paid to supported organizations to accomplish e			
2	Amounts paid to perform activity that directly furthers exe	rted		
	organizations, in excess of income from activity		- :	
	Administrative expenses paid to accomplish exempt purp	oses of supported orga	nizations	
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
<u>6</u>	Other distributions (describe in Part VI). See instructions.		i	
	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to which	h the organization is res	ponsive	
	(provide details in Part VI). See instructions. Distributable amount for 2014 from Section C, line 6			
9				
10	Line 8 amount divided by Line 9 amount		(ii)	(iii)
Se	ection E - Distribution Allocations (see instructions)	(i) Excess Distributions	Underdistributions Pre-2014	Distributable Amount for 2014
1	Distributable amount for 2014 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2014			
	(reasonable cause required-see instructions)			
3	Excess distributions carryover, if any, to 2014:			
<u>a</u>				
<u>b</u>				
<u>c</u>				!
<u>d</u>				
<u>e</u>	From 2013			
f	Total of lines 3a through e			
<u>g</u>	Applied to underdistributions of prior years Applied to 2014 distributable amount			
<u>h</u> i	Carryover from 2009 not applied (see instructions)			
	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
	Distributions for 2014 from Section			
4	D, line 7: \$			
а	Applied to underdistributions of prior years			
b	Applied to 2014 distributable amount			
c	Remainder, Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2014, if			
	any. Subtract lines 3g and 4a from line 2 (if amount			
	greater than zero, see instructions).			
6	Remaining underdistributions for 2014. Subtract lines 3h			
	and 4b from line 1 (if amount greater than zero, see			
	instructions).			
7	Excess distributions carryover to 2015. Add lines 3j and 4c.			
8	Breakdown of line 7:			
а				
b	1			
С				
<u>d</u>				
<u>e</u>	Excess from 2014	<u> </u>	<u> </u>	1

Schedule A (Form 990 or 990-EZ) 2014				
Part VI	Supplemental Information. 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.)			
•				

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.

► Attach to Form 990.

OMB No. 1545-0047

	ent of the Treasury	NI-4	► Attach to Form 990.	· · · · · · · · · · · · · · · · · · ·		Open to Public
	Revenue Service of the organization	▶ Information about Schedul	e D (Form 990) and its instructions is at w		er identification	•
	_			шпрюус		
Par	y Council of Alasi		r Advised Funds or Other Similar	r Funds or A	92-6010	<u>0100</u>
rai			ered "Yes" to Form 990, Part IV, lir		www.	
	Complet	e ii tile organization anow	(a) Donor advised funds		b) Funds and oth	ner accounts
1	Total number at	end of year			-	
2		ibutions to (dunng year) .				
3		s from (during year)		1		
4		at end of year				
5			donor advisors in writing that the ass			
		-	t to the organization's exclusive legal of			
6	Did the organiza	ation inform all grantees, dor	nors, and donor advisors in writing tha	it grant funds	can be used	d -
			benefit of the donor or donor advisor			
Dar		ration Easements.		· · · · ·		
i ai			ered "Yes" to Form 990, Part IV, lir	ne 7.		
1			by the organization (check all that apply			
•			recreation or education) Preservation		orically impo	rtant land area
	☐ Protection o		☐ Preservat			
	☐ Preservation					
2	•		tion held a qualified conservation conti	ribution in the		
		e last day of the tax year.				he End of the Tax Year
a				L	2a	
b			ements		2b 2c	
C d			tified historic structure included in (a) and in (c) acquired after 8/17/06, and		20	
u		e listed in the National Regis		ı	2d	
3			d, transferred, released, extinguished, o	L		nization during the
	tax year ►					
4	Number of state	es where property subject to	conservation easement is located ▶			
5	Does the organ	nization have a written pol	icy regarding the periodic monitoring	g, inspection	, handling o	of
	· ·		tion easements it holds?			
6	Staff and volunt	eer hours devoted to monito	ring, inspecting, and enforcing conser-	vation easem	ents dunng ti	ne year
_	>		increasing and enforcing concentration	n accoments	dunna tha va	125
7	Amount of expe	enses incurred in monitoring,	inspecting, and enforcing conservation	n easements	during the ye	;aı
8	•	 servation easement reported	on line 2(d) above satisfy the requirem	ents of section	on 170(h)(4)(E	3)
						☐ Yes ☐ No
9			ports conservation easements in its re			ment, and
	balance sheet,	and include, if applicable, the	text of the footnote to the organization	n's financial	statements th	nat describes the
		accounting for conservation e				
Par			ections of Art, Historical Treasure		'Similar As	sets.
			vered "Yes" to Form 990, Part IV, linder SFAS 116 (ASC 958), not to repor		uo etatamant	and balance sheet
1a	works of art h	ion elected, as permitted uni	similar assets held for public exhibiting	on, educatio	n. or researc	th in furtherance of
	public service.	provide, in Part XIII, the text	of the footnote to its financial statemen	nts that descr	ibes these ite	ems.
h			nder SFAS 116 (ASC 958), to report			
	works of art, h	istoncal treasures, or other	similar assets held for public exhibition	on, educatio	n, or researc	h in furtherance of
	public service,	provide the following amount	ts relating to these items:			
	(i) Revenues in	cluded in Form 990, Part VIII	, line 1		. > \$	
	(iii) Assets inclu-	ded in Form 990. Part X .			. ▶ \$	
2	If the organizat	tion received or held works	of art, historical treasures, or other	sımılar asseti	s for financia	al gain, provide the
	-		inder SFAS 116 (ASC 958) relating to the		. •	
a	Revenues inclu	ded in Form 990, Part VIII, lir	ne 1		. 🕨 🐧	
b	Accete included	t in Form 990. Part X			. 🕶 🕉	

 -	•
~aq€	•

Part							
3	Using the organization's acquisition, a collection items (check all that apply):	ccession, and oth		-			significant use of its
а	☐ Public exhibition		d 🗌 Loa	n or exchang	e progra	ms	
b	Scholarly research		e 🗌 Oth	er <u></u>			
С	Preservation for future generations						
4	Provide a description of the organization XIII.	on's collections a	nd explain how	they further	the orga	nization's exer	mpt purpose in Part
5	During the year, did the organization sassets to be sold to raise funds rather t						ar ☐ Yes ☐ No
Part	IV Escrow and Custodial Arrar					· · · · · · · · · · · · · · · · · · ·	
	Complete if the organization a	answered "Yes"	to Form 990,	Part IV, line	9, or re	ported an am	nount on Form
_	990, Part X, line 21.						
1a	Is the organization an agent, trustee, included on Form 990, Part X?						ot □ Yes □ No
b	If "Yes," explain the arrangement in Pai						
	ii 163, explain the arrangement iii ras	t Am and comple	te the lonewing	tubio.	[A	mount
С	Beginning balance				1c		
d	Additions during the year				1d		
е	Distributions during the year				1e		
f	Ending balance				1f		
2a	Did the organization include an amount						☐ Yes ☐ No
	If "Yes," explain the arrangement in Pa	rt XIII. Check here	if the explanati	on has been	provided	in Part XIII .	<u> </u>
Par	Endowment Funds.		t- F 000	Down N/ Line	10		
	Complete if the organization	(a) Current year	(b) Prior year	(c) Two year		d) Three years bac	k (e) Four years back
4.	Paginning of year balance						
1a b	Beginning of year balance	14,193 887	5,47		2,348 3,300	1,38	336 35 456
C	Net investment earnings, gains, and	887	7,86	<u> </u>	3,300	1,30	35 430
Ŭ	losses	2,891	85	3	174	16	39 18
d	Grants or scholarships	2,031		-			
-	Other expenditures for facilities and						
	programs			ļ			1
f	Administrative expenses						
g	End of year balance	17,971	14,19		5,474	2,34	48 <u>774</u>
2	Provide the estimated percentage of the		d balance (line 1	lg, column (a)) held a	s:	
а	Board designated or quasi-endowmen	t ▶100	<u>0</u> %				
b	Permanent endowment ▶	%					
С	Temporarily restricted endowment ▶	%	004				
20	The percentages in lines 2a, 2b, and 2c Are there endowment funds not in the			hat are held	and adn	nunistered for t	he
3 a	organization by:	possession or ur	e organization i	nat are neid	and adm	illinstered for t	Yes No
	(i) unrelated organizations						3a(i) ✓
	(ii) related organizations						3a(ii) ✓
b	If "Yes" to 3a(ii), are the related organization			dule R? .			3b ✓
4	Describe in Part XIII the intended uses						
Par	VI Land, Buildings, and Equip	ment.			•		
	Complete if the organization	answered "Yes"	' to Form 990,	Part IV, line	11a. S	ee Form 990,	, Part X, line 10.
	Description of property	(a) Cost or oth	, , ,	t or other basis		ccumulated preciation	(d) Book value
		(investme	5111)	(other)		preciation	
1a	Land				ļ		
b	Buildings	ļ		407.465	 	F4 445	EE 340
C	Leasehold improvements			107,192		51,443 8,636	55,749 3,978
d e	Equipment	<u> </u>		12,614 8,584		4,770	3,814
	Add lines 1a through 1e. (Column (d) m	ust equal Form 9	90. Part X. colui		_	>	63,541

Part VII	 Investments — Other Securities. Complete if the organization answ 	vered "Ves" to For	m QQQ Part IV line	11h See Form 9	200 Part Y line 12
•	(a) Description of security or category	vereu tes lo pon	(b) Book value		od of valuation
	(including name of security)		(b) book value		of-year market value
(1) Financial					
	eld equity interests				
(3) Other	•••••				
	ment Fund		17,971	End of Year Market	Value
(B)					
(C)					
(D)					
(E)					
(F) (G)				· · · · · · · · · · · · · · · · · · ·	
(H)					
	the second Ferragon Dark V and (D) first 121		47.074		
	b) must equal Form 990, Part X, col. (B) line 12.)		17,971		
Part VIII	Investments — Program Related Complete if the organization answ		m 000 Part IV line	a 11c See Form (000 Part Y line 13
	(a) Description of investment	vered les toloi	(b) Book value		nod of valuation
	(a) Description of investment		(b) Book value	1-,	of-year market value
(1)		·-····································			
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)				ļ. <u></u>	<u> </u>
(9)					
Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.)		<u> </u>		
Part IX	Other Assets.				
	Complete if the organization answ		m 990, Part IV, lin	e 11d. See Form	
	(a) Description	· · · · · · · · · · · · · · · · · · ·		(b) Book value
_(1)					
(2)					
_(3)					
_(4)					
_(5)					· ·
_(6)					
<u>(7)</u>					
(8)		 	·		
(9)	mn (b) must equal Form 990, Part X, co	ol (P) lino 15)		▶	
	Other Liabilities.	л. (B) III е 13.)	· · · · · · · ·		
Part X	Complete if the organization answers	wared "Vee" to For	m 000 Part IV lin	e 11e or 11f See	Form 990 Part X
	line 25.	Melen 169 IO I-OI	m 555, raitiv, iii	5 , 15 51 TH. 066	. J 555, . w //,
1.	(a) Description of liability	(b) Book value			
(1) Federal II		(2) 200			
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
	(b) must equal Form 990, Part X, col. (B) line 25.)				
2. Liability fo	r uncertain tax positions. In Part XIII, provi	de the text of the foot	note to the organization	on's financial stateme	ents that reports the
organization	's liability for uncertain tax positions under	FIN 48 (ASC 740). Ch	eck here if the text of	the footnote has bee	n provided in Part XIII

Part	Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.				
	Complete if the organization answered "Yes" to Form 990, F	Part IV, line 12a.			
1	'Total revenue, gains, and other support per audited financial statements		1		
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains on investments	2a	<u> </u>		
b	Donated services and use of facilities	2b]		
C	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII.)	2d]		
е	Add lines 2a through 2d		2e		
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 XIII.)	4b			
C	Add lines 4a and 4b		4c		
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line		5		
Part			er Return.		
	Complete if the organization answered "Yes" to Form 990, F				
1	Total expenses and losses per audited financial statements		1		
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		1		
а	Donated services and use of facilities	2a	4 1		
b	Prior year adjustments	2b	4 1		
С	Other losses	2c	4 1		
d	Other (Describe in Part XIII.)	2d	4		
е	Add lines 2a through 2d		2e		
3	Subtract line 2e from line 1		3		
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
a	Investment expenses not included on Form 990, Part VIII, line 7b		4 1		
Ь	Other (Describe in Part XIII.)		 		
С 5	Add lines 4a and 4b		4c 5		
	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, lin XIII Supplemental Information.	e 10.)	191		
	de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a an	d 4: Part IV lines 1h and 2h	Part V line 4: Part X line		
	t XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part				
	cumpart of programs	•			
<u> </u>	support of programs				
v1 v1	1 Financial Statements not audited for FY14 (2013)				
<u> </u>	1 I manual Statements not addited for 1 114 (2013)				

	rm 990) 2013	Page 5
Part XIII	Supplemental Information (continued)	·
	•••••••••••••••••••••••••••••••••••••••	
	•••••••••••••••••••••••••••••••••••••••	
		·····

SCHEDULE G (Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

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

▶ Attach to Form 990 or Form 990-EZ.

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

OMB No 1545-0047

2013

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

Name o	f the organization					Employer identific	cation number			
Litera	cy Council of Alaska					92-	6010100			
Part	Fundraising Activities.				vered "Yes" to Fo	rm 990, Part IV,	ine 17.			
	Form 990-EZ filers are r									
1	Indicate whether the organization	on raised funds			_					
а	Mail solicitations		e L		on of non-governm	•				
b	Internet and email solicitation	ns	f [on of government g	grants				
С	☐ Phone solicitations		g 🗹] Special f	fundraising events					
d	☐ In-person solicitations	- · · · · · · · · · · · · · · · · · · ·								
2a	Did the organization have a wn									
	or key employees listed in Form	n 990, Part VII) o	r entity in co	onnection v	with professional fur	ndraising services?	? 🔲 Yes 🗌 No			
b	If "Yes," list the ten highest paid compensated at least \$5,000 by			draisers) pi	ursuant to agreeme	nts under which th	ne fundraiser is to be			
	(i) Name and address of individual or entity (fundraiser)	(ii) Activity	custody o	draiser have r control of outions?	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col (i)	(vi) Amount paid to (or retained by) organization			
		<u> </u>	Yes	No	 					
1										
2										
3										
4	·		 	-						
5										
6										
7			 							
8			-							
9			+							
10		ļ			ļ	 				
			<u> </u>							
Total				▶						
3	List all states in which the organized registration or licensing.	anızation ıs regi	stered or lic	ensed to s	solicit contributions	or has been notifi	ed it is exempt from			
	*									
-										
										

Pa	rt II	Fundraising Events. Com than \$15,000 of fundraisin gross receipts greater than	g event contributions			
		gross rossipio groater tria	(a) Event #1 Spelling Bee (event type)	(b) Event #2	(c) Other events	(d) Total events (add col. (a) through col (c))
Revenue	1	Gross receipts	23,636			23,626
<u>.</u>	2 3	Less: Contributions Gross income (line 1 minus				
	4	line 2)	23,636			23,626
	5	Noncash prizes	2,500			2,500
nses	6	Rent/facility costs	1,500			1,500
Direct Expenses	7	Food and beverages				
Direc	8	Entertainment				
	9	Other direct expenses .	528			528
Pa	10 11 rt III		act line 10 from line 3, c organization answe	olumn (d)		5,028 18,608 eported more
enue		than \$15,000 on Form 99	90-EZ, line 6a. (a) Bıngo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total garning (add col. (a) through col (c))
Revenue	1	Gross revenue				
ses	2	Cash prizes				·
Expenses	3	Noncash prizes				
Direct	4	Rent/facility costs				
	5	Other direct expenses .	☐ Yes%	🖳		
	6	Volunteer labor	Mo	No No		
	7 8	Net gaming income summar	_			
9	Er a Is	nter the state(s) in which the or	ganization operates ga perate gaming activities	ming activities:		🗌 Yes 🗌 No
10		/ere any of the organization's g "Yes," explain:	gaming licenses revoked			. 🗌 Yes 🗌 No
					Schedule	G (Form 990 or 990-EZ) 2013

chedu	ule G (Form 990 or 990-EZ) 2013		Pa	age 3
11	Does the organization operate gaming activities with nonmembers?	☐ Ye	s 🗌	No
12	Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity	Ye:	s 🗆	No
13	Indicate the percentage of gaming activity operated in:			
а	The organization's facility			%
b	An outside facility			%
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records:			
	Name ►			
	Address ▶			
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?	☐ Ye:	s 🗌	No
b	amount of gaming revenue retained by the third party ▶ \$			
С	If "Yes," enter name and address of the third party:			
	Name ▶			
	Address ►			
16	Gaming manager information:			
	Name ▶			
	Gaming manager compensation ► \$			
	Description of services provided ►			
	□ Director/officer □ Employee □ Independent contractor			
17 a	Mandatory distributions: Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?	☐ Ye	s □	No
b	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$			
Part	Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) at Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provid additional information (see instructions).	nd (v), e any	and	
	•••••••••••••••••••••••••••••••••••••••		·	

SCHEDULE M (Form 990).

Department of the Treasury Internal Revenue Service **Noncash Contributions**

Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

► Attach to Form 990.

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

OMB No 1545-0047

2013

Open To Public Inspection

Name of the organization **Employer identification number** Literacy Council of Alaska Part I Types of Property (c) (a) (b) Noncash contribution Check if Number of contributions or Method of determining amounts reported on applicable noncash contribution amounts items contributed Form 990, Part VIII, line 1g 1 Art-Works of art 2 Art-Historical treasures . . . 3 Art-Fractional interests . . . 4 Books and publications . . 5 Clothing and household goods 6 Cars and other vehicles . . . 7 Boats and planes 8 Intellectual property 9 Securities-Publicly traded . . 10 Securities-Closely held stock . 11 Securities-Partnership, LLC, or trust interests 12 Securities-Miscellaneous . . 13 Qualified conservation contribution-Historic structures 14 Qualified conservation contribution-Other 15 Real estate-Residential . . . 16 Real estate-Commercial . . 17 Real estate-Other Collectibles 18 19 Food inventory 20 Drugs and medical supplies . . . 21 Taxidermy 22 Historical artifacts 23 Scientific specimens . . 24 Archeological artifacts . 25 Other ► (Computers) 70 26 Other ► (____) 27 Other ► (_____) Other ▶ (28 29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement Yes No During the year, did the organization receive by contribution any property reported in Part I, lines 1 - 28, that it must hold for at least three years from the date of the initial contribution, and which is not required to be 30a 1 **b** If "Yes," describe the arrangement in Part II. Does the organization have a gift acceptance policy that requires the review of any non-standard 31 31 Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash 32a If "Yes," describe in Part II. If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, 33

describe in Part II.

Schedule M (Form 990) (2013)							
Part II	Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.						
	·						

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

OMB No. 1545-0047

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization ► Attach to Form 990 or 990-EZ.

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

Open to Public Inspection

<u>Literac</u>	y Council of Alaska	92-6010100
Part V1		
#6	The Literacy Council of Alaska has members. Membership in the Literacy Council of Alaska	is open to all individuals interested in
	and supportive of the stated mission. Regular members are those who make a donation of \$	20 or more during the fiscal
	year or who are active volunteers during the year.	
#11a	The current 990 was completed and a copy given to each member of the Board of Directors of	during a regularly scheduled meeting.
<u> b</u>	The finance committee reviews the 990 before it is filed.	
#15 a	The Board of Directors, as independent persons, reviewed and approved the compensation	of the Executive Director using
	current comparable data from similar organizations as reflected in Board approved minute	s
#19	The governing documents of the Literacy Council of Alaska are available to the public. The	documents, including the bylaws, Board
	of Directors meeting minutes, conflict of interest policy and financial statements are retained	ed in a binder onsite at the Literacy
	Council of Alaska. The binder is available to the public upon request.	
Part X1	<u> 1 </u>	
#c	A Finance Committee was established for this purpose.	
		

Form **4562**

Department of the Treasury Internal Revenue Service (99)

Depreciation and Amortization (Including Information on Listed Property)

► See separate instructions.

► Attach to your tax return.

OMB No. 1545-0172

Attachment Sequence No 179

Name(s) shown on return Business or activity to which this form relates Identifying number Literacy Council of Alaska Non-profit Education Organization 92-6010100 **Election To Expense Certain Property Under Section 179** Part I Note: If you have any listed property, complete Part V before you complete Part I. 1 2 Total cost of section 179 property placed in service (see instructions) 2 Threshold cost of section 179 property before reduction in limitation (see instructions) . . . 3 Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0- 4 Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing 6 (a) Description of property (b) Cost (business use only) (c) Elected cost 8 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7 8 9 10 Carryover of disallowed deduction from line 13 of your 2012 Form 4562 10 11 11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instructions) 12 12 Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11 13 Carryover of disallowed deduction to 2014. Add lines 9 and 10, less line 12 Note: Do not use Part II or Part III below for listed property. Instead, use Part V. Special Depreciation Allowance and Other Depreciation (Do not include listed property.) (See instructions.) Special depreciation allowance for qualified property (other than listed property) placed in service 14 15 16 Other depreciation (including ACRS) 16 11.372 Part III MACRS Depreciation (Do not include listed property.) (See instructions.) Section A 17 MACRS deductions for assets placed in service in tax years beginning before 2013 17 18 If you are electing to group any assets placed in service during the tax year into one or more general Section B-Assets Placed in Service During 2013 Tax Year Using the General Depreciation System (b) Month and year (c) Basis for depreciation (d) Recovery (g) Depreciation deduction (a) Classification of property (business/investment use (e) Convention (f) Method placed in penod only-see instructions) service 19a 3-year property **b** 5-year property 7-year property d 10-year property e 15-year property f 20-year property S/L 25 yrs g 25-year property ММ S/L 27.5 yrs h Residential rental S/L property 275 yrs MM S/L 39 yrs ММ i Nonresidential real property MM S/L Section C-Assets Placed in Service During 2013 Tax Year Using the Alternative Depreciation System 20a Class life b 12-year 12 yrs S/L MM S/L c 40-vear 40 yrs Part IV Summary (See instructions.) 21 22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations—see instructions 22 23 For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs

	4562 (2013)						1.7.1								Page 2
Par	Listed Property (Incle entertainment, recreation				ain oti	ner ve	enicies	s, ce	main	con	nputer	s, and	prope	rty us	ea tor
	Note: For any vehicle for	-		,	standa	rd mile	age ra	te or	dedu	ıcting	lease e	expense	e, comp	lete on	ly 24a,
	24b, columns (a) through (<u> </u>		
	Section A—Depreciation and	d Other Inf	ormati	on (Ca	ution: 3	See the	e instru								
24a	Do you have evidence to support the b	usiness/inves	tment us	e claime		Yes] No	24b	If "Y	'es," is	the evi	dence w	ntten?	Yes	☐ No
	vehicles first) in service investment use Cost or other basis (business/investment) period Convention deduction								(i) cted section 179 cost						
25 Special depreciation allowance for qualified listed property placed in service during															
	the tax year and used more tha	-							_	25					
26	26 Property used more than 50% in a qualified business use:														
		%													
		%													
		%													
27	Property used 50% or less in a		siness	use:				16	 /L ~						
		% %							/L -						
		%		 			. .		/L -				_		
28	Add amounts in column (h), line	<u> </u>	h 27. E	nter he	re and o	on line	21, pa			28					
	Add amounts in column (i), line	_						_				$\overline{}$	29		
_					mation										
	plete this section for vehicles used														ehicles
io yo	ur employees, first answer the ques	stions in Sec	TION C t	o see n	you me	et an e	xcepuo T	11 10 0	ompi		_	ION ION	nose ve		
30	Total business/investment miles driven during the year (do not include commuting miles).			(a) (b) Vehicle 1 Vehicle 2			Ve				(d) (e) nicle 4 Vehicle 5			(f) Vehicle 6	
31	Total commuting miles driven durin	g the year													
32	Total other personal (nonco	mmuting)							•						
	miles driven				<u> </u>		<u> </u>		_						<u>_</u>
	Total miles driven during the slines 30 through 32							1 50			- N		B	V	
	Was the vehicle available for use during off-duty hours?		Yes	No	Yes	No	Yes	N	•	Yes	No	Yes	No	Yes	No
35	Was the vehicle used primarily I than 5% owner or related perso														
36	Is another vehicle available for pers				<u> </u>		<u> </u>	ل			L	<u> </u>			L
A	Section C—Que													who or	+
	ver these questions to determine than 5% owners or related pers				to com	ibietiri	y Secu	OHB	IOI VE	enicie	s useu	by emp	noyees	willo air	e not
	Do you maintain a written police				s all per	rsonal	use of	vehic	cles.	ınclud	ling co	mmutin	g, by	Yes	No
	your employees?	=							-,						
38	Do you maintain a written police employees? See the instruction														
39	Do you treat all use of vehicles														
40	Do you provide more than five					ain inf	ormati	on fro	om yo	our er	nploye	es abou	it the		
_	use of the vehicles, and retain the												• •		ļ
41	Do you meet the requirements of												• •		L
Par	Note: If your answer to 37, 38, t VI Amortization	აყ, 40, or 4	I IS "Y	es," do	not cor	npiete	Sectio	n B f	or the	COVE	rea vei	iicies.	_	<u> </u>	
ı al	Amortization						<u> </u>				(e)				
	(a) Description of costs	(b) Date amortiza begins	ation	Amo	(c) rtizable ar	mount		Code s	d) section		Amortiza period percent	or	Amortiza	(f) tion for this year	
42	Amortization of costs that begin	s during yo	ur 2013	3 tax ye	ear (see	instru	ctions):								
											_				
												T			
	Amortization of costs that bega	-		-				-	•		• •	43			
44	Total. Add amounts in column	υ). See the	HISTIUC	แบทร 10	wilere	s to te	JUIL					1 -4-4			

Amortization of costs that began before your 2013 tax year
 Total. Add amounts in column (f). See the instructions for where to report .