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Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

16

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

▶ 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 Inspection

	AF	or the 2016 calendar year, or tax year beginning $$	JUN 30, 2017	
	B C	neck if OPInicable C Name of organization	D Employer identific	ation number
		Address LAOS LITERACY PROJECT, INC		
		Name Change Doing business as	32-02	85330
		Initial Preturn Number and street (or P.O. box if mail is not delivered to street address) Room/s		
		Final 10 TREMONT STREET 200	·	227-8337
		terminated City or town, state or province, country, and ZIP or foreign postal code	G Gross receipts \$	96,508.
		Amended BOSTON, MA 02108	H(a) Is this a group ret	
		Applica. F Name and address of principal officer RAYMOND FAULKNER	for subordinates?	Yes X No
		pending 10 TREMONT ST., STE. 200, BOSTON, MA 0210	8 H(b) Are all subordinates inc	luded? Yes No
			<del></del> -	ist (see instructions)
		Vebsite: ► LAOSLITERACYPROJECT.ORG	H(c) Group exemption	
201,			rear of formation: 2009 M	State of legal domicile, MA
;;	Га	rt   Summary	VE TIMEDACY IN	I I AOC FOD
ලෙද	Governance	Briefly describe the organization's mission or most significant activities <u>TO IMPRO</u> CHILDREN AND ADULTS.	VE LITERACY IF	LAUS FUR
DUA CHANNEL AUG	rua	2 Check this box  if the organization discontinued its operations or disposed of r	nore than 25% of its net ass	sets
₹.	ove.	3 Number of voting members of the governing body (Part VI, line 1a)	3	<u> </u>
	න න	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	0
, J.	ctivities &	5 Total number of individuals employed in calendar year 2016 (Part V, line 2a)	5	0
1	tivil	6 Total number of volunteers (estimate if necessary)	6	0
( ) ( )	Ac	7 a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
1.13	, ——	b Net unrelated business taxable income from Form 990-T, line 34	7b	0.
		9 Contributions and greats (Dort VIII line 1h)	Prior Year 99, 990.	Current Year
	Revenue	8 Contributions and grants (Part VIII, line 1h) 9 Program service revenue (Part VIII, line 2g)	99,990. BIVED 0.	96,508.
	ver	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	76 0.	<u> </u>
	a.	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	20707 6 0.	0.
		12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	99,990.	96,508.
		13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	EN UT1751,000.	70,000.
	İ	14 Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
	ွှ	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	0.	0.,
	Expenses	16a Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
	xpe	b Total fundraising expenses (Part IX, column (D), line 25) ▶0.		
	ш	17 Other expenses (Part IX, column (A), lines 11a 11d, 11f-24e)	1,266.	581.
		18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	176,266.	<u>70,581.</u>
	_ v	19 Revenue less expenses Subtract line 18 from line 12	<76,276.	<u> 25,927.</u>
	tso		Beginning of Current Year	End of Year
	Bake	20 Total assets (Part X, line 16)	60,011.	85,938.
	Net Assets or Fund Balances	21 Total liabilities (Part X, line 26)	0.	0.
	Pa	22 Net assets or fund balances Subtract line 21 from line 20 ort II Signature Block	60,011.	85,938.
		er penalties of perjury, I declare that I have examined this repurn, including accompanying schedules and sta	atements, and to the hest of my	knowledge and helief it is
	true.	correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer	parer has any knowledge.	
		X frank March	X Q/	4//12
	Sign	Signature of officer (	Date	
	Here			
		Type or print name and title		
		Print/Type preparer's name Preparer's Seriative	Date Check Z	PTIN
	Paid	STEPHEN R. WLADYKA STEPHEN R. WLADYKA	OB//D//7 self-employer	P01302434
	Prep		Firm's EIN	43-2015387
	Use			
	NA =:	READING, MA 01867	Phone no. 781	L-942-9790
	wav	the IRS discuss this return with the preparer shown above? (see instructions)		Y Von Nie

632001 11-11 16 , LHA For Paperwork Reduction Act Notice, see the separate instructions.

orm	990 (2016) LAOS LITERACY PROJECT, INC	32-0285330 Page <b>2</b>
Par	t III Statement of Program Service Accomplishments	c
	Check if Schedule O contains a response or note to any line in this Part III	
1	Briefly describe the organization's mission TO IMPROVE LITERACY IN LAOS FOR CHILDREN AND ADULTS.	
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?	Yes X No
_	If "Yes," describe these new services on Schedule O  Did the organization cease conducting, or make significant changes in how it conducts, any program services?	Yes X No
3	If "Yes," describe these changes on Schedule O	
4	Describe the organization's program service accomplishments for each of its three largest program services, as	measured by expenses
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to other	
	revenue, if any, for each program service reported	
4a	(Code ) (Expenses \$ 70,581. including grants of \$ 70,000.) (Revenue)	ue\$)
4b	(Code) (Expenses \$	uue \$
		,
4c	(Code) (Expenses \$	
	/ (Neverlands)	)
4d	Other program services (Describe in Schedule O)	
4e	(Expenses \$ including grants of \$ ) (Revenue \$  Total program service expenses ► 70,581.	
76	10,301.	Form <b>990</b> (2016)
		1 01111 220 (2016)

Form 990 (2016) LAOS LITERACY PROJECT, INC
Part IV Checklist of Required Schedules

	,		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?  If "Yes,* complete Schedule A	1	х	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		Х
2	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
5	public office? If "Yes," complete Schedule C, Part I	3		x
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect	_ <u>-</u> -		
•	during the tax year? If "Yes," complete Schedule C, Part II	4		х
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	l. <b></b>	X
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		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			ļ
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		X
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 debt negotiation services?	_	}	- T
40	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	40		- V
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X	10		X
• •	as applicable			Į.
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		х
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		X
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		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	<del> </del>	X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			37
10-	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	<del> </del>	X
ıza	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	10-		x
h	Was the organization included in consolidated, independent audited financial statements for the tax year?	12a		<del>  ^-</del>
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		x
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	<del> </del>	X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000	1	}	{
	or more? If "Yes," complete Schedule F, Parts I and IV	14b	ļ	X
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	}	1	
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	X	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			ļ <u>.</u>
	_or_for_foreign=individuals?-If="Yes;"-complete-Schedule"F,"Parts III and IV	16	<u> </u>	X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,		1	
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17	<del> </del>	X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	1		
10	1c and 8a? If "Yes," complete Schedule G, Part II	18	<del> </del>	X
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			
	Complete Contours Of Fair III	19 Form	990	(2016)
		1 0111	1000	12010)

Form 990 (2016) LAOS LITERACY PROJECT, INC
Part IV Checklist of Required Schedules (continued)

	1		Yes	No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 19 If "Yes," complete Schedule I, Parts I and II	21		_X_
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		Х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		X
24a				
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No", go to line 25a	24a		X
b	Did the organization invest any proceeds of tax exempt bonds beyond a temporary period exception?	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		)
d		24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		Х
b				
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete	l		l
	Schedule L, Part I	25b		х
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or			
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes,"			l
	complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial	[		[
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member	{		ł
	of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV		}	l
	instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b	L	X
С	, , , , , , , , , , , , , , , , , , , ,	1		}
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation	1		}
	contributions? If "Yes," complete Schedule M	30	<u> </u>	X
31	Did the organization liquidate, terminate, or dissolve and cease operations?	ł		
	If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	} .		
20	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	}		.,
34	sections 301 7701-2 and 301 7701-37 If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			,,
25-	Part V, line 1	34	<del></del>	X
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?  If "Yes" to line 35a, did-the-organization-receive any payment from or engage in any transaction with a controlled entity	_35a_		_X_
0.			ĺ	ĺ
26	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	<del> </del>	<del> </del>
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	]		] ,,
27	If "Yes," complete Schedule R, Part V, line 2	36	<del> </del> -	X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
38	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	37		<u>X</u>
JJ	Note. All Form 990 filers are required to complete Schedule O		٦,	1
	Note. / I standood micro are required to complete scriedule O	38	X	(00:5:
		rorm	JJU	(2016)

Form 990 (2016) LAOS LITERACY PROJECT, INC

Part V Statements Regarding Other IRS Filings and Tax Compliance

T al	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter 0- if not applicable			
ь	Enter the number of Forms W-2G included in line 1a Enter O if not applicable 1b 0	į		l
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			1
	(gambling) winnings to prize winners?	1c		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return	1		}
ь	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)		! !	
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a		i	
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X
b	If "Yes," enter the name of the foreign country ▶	Ì		
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
С	If "Yes," to line 5a or 5b, did the organization file Form 8886 T?	_5c		<b> </b>
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?	<u>6a</u>		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	}	}	}
_	were not tax deductible?	6b		<del> </del>
7	Organizations that may receive deductible contributions under section 170(c).	_	1	
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		X
b	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 required	7b	<del> </del>	<del> </del>
С	to file Form 8282?	7-	1	x
d		7c	<del> </del>	_ <u>^</u>
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	}	}
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		<b> </b>
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		<del> </del>
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
	sponsoring organization have excess business holdings at any time during the year?	8		1
9	Sponsoring organizations maintaining donor advised funds.		1	
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a	1	
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter			
а	Initiation fees and capital contributions included on Part VIII, line 12			1
р	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities		Ì	
11	Section 501(c)(12) organizations. Enter	ļ		
а	Gross income from members or shareholders	}		}
b	Gross income from other sources (Do not net amounts due or paid to other sources against	}		
	amounts due or received from them )	4	}	{
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	-12a		
b	If "Yes," enter-the-amount of tax-exempt interest received or accrued during the year  12b	ļ		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		<u> </u>	<del> </del>
а	Is the organization licensed to issue qualified health plans in more than one state?	13a	<del> </del> -	<del> </del>
	Note. See the instructions for additional information the organization must report on Schedule O	}		
b	Enter the amount of reserves the organization is required to maintain by the states in which the		1	}
	organization is licensed to issue qualified health plans  13b	1	{	1
C	Enter the amount of reserves on hand	<del> </del>	<del> </del>	+
14a	, , , , , , , , , , , , , , , , , , ,	14a	┼	X
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		ــــــــــــــــــــــــــــــــــــــ

LAOS LITERACY PROJECT, INC

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions X Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management Yes No 1a Enter the number of voting members of the governing body at the end of the tax year 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 0 0 b Enter the number of voting members included in line 1a, above, who are independent 1b Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other Х officer, director, trustee, or key employee? 2 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 Х Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 Did the organization become aware during the year of a significant diversion of the organization's assets? X 5 X 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? X 7a b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? Х 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: The governing body? X 8a X Each committee with authority to act on behalf of the governing body? 8b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O X a Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code) Yes No 10a Did the organization have local chapters, branches, or affiliates? 10a Х b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b Х 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a b Describe in Schedule O the process, if any, used by the organization to review this Form 990 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 X 12a b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done 12c X Did the organization have a written whistleblower policy? 13 13 Х Did the organization have a written document retention and destruction policy? 14 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? The organization's CEO, Executive Director, or top management official 15a X X Other officers or key employees of the organization 15b If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? X 16a b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps\_to\_safeguard\_the=organization's= exempt\_status\_with-respect-to-such arrangements? 16b Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed ►MA Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply Own website Another's website X Upon request Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. State the name, address, and telephone number of the person who possesses the organization's books and records. RAYMOND FAULKNER - 617-227-8337 10 TREMONT STREET, SUITE 200, BOSTON, 02108

orm 990 (2016)	LAOS LITERACY	PROJECT,	INC	32-0285330	Page
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# Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid
  - List all of the organization's current key employees, if any See instructions for definition of "key employee"
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received report able 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

week (list any hours for related organizations below line)  1) SASHA ALYSON PRESIDENT  (2) RAYMOND FAULKNER TREASURER  (3) LEAH CAMHI DIRECTOR  TOM Trom re organization (W-2/1099-MISC)  (Inst any hours for related organization (W-2/1099-MISC)  (W-2/1099-MISC)  (W-2/1099-MISC)  (W-2/1099-MISC)  (O. O. O	ations	other compensation from the organization and related organizations
(1) SASHA ALYSON 40.00 0.  PRESIDENT 0.  (2) RAYMOND FAULKNER 1.00 0.  TREASURER 0.00 0.00	0.	
(2) RAYMOND FAULKNER	0.	
TREASURER  (3) LEAH CAMHI  0.00		1
	0	0
DIRECTOR 0.	0	
	<u>.</u>	0
	•	}
<del></del>		
	·	
		1
		1
	<del></del> ,	

Par	t VII Section A. Officers, Directors, Trus	tees, Key Em	ploy	ees	, and	d Hi	ghe	st C	ompensated Employe	es (continued)				
	(A) (B)				(0	C)			(D)	(E)	1		(F)	
	Name and title	Average	(do		Pos			one	Reportable	Reportable		Es	tımate	·d
		hours per	box	(do not check more than one box, unless person is both an officer and a director/trustee)				n an	compensation compensati				nount o	of .
		week	·	Cer ar	T a a	recic	T	T ee	from	from related	1		other	
		(list any hours for	rect					1	the	organizations			pensa	
		related	6 Or d	ig g	1	1	sated	1	organization (W-2/1099-MISC)	(W-2/1099-MIS	ا (د		om the anızatı	
		organizations	ruste	trus		£	mpeu	1	(W-2/1099-WIISO)	·	- 1	_	d relate	
		below	Individual trustee or director	Institutional trustee		mploy	oyee	, <sub>5</sub>		1			anizatio	
		line)	휼	Insti	Officer	Key employee	Highest compensated employee	Former	ļ					
			]	<u> </u>										
	,			}	1						ł	ı		
		ļ		_	L	<u> </u>	\							
			}	ŀ	}				1		}			
						<u> </u>	<u> </u>	_				ļ		
			1		}	}	1							
			<u> </u>	<u> </u>	ļ	<u> </u>								
			1	Ì		}	}	ĺ			1			
		<del> </del>	<b> </b>	<u> </u>	-	<u> </u>	<u> </u>	<u> </u>	<u> </u>			<b></b>		
		<u></u>	ļ	}						}	Ì	ĺ		
		<b></b>	<b> </b>	<u> </u>	<b> </b>	-	ļ_	↓_	<u> </u>			<b></b>		
			}	}							}			
		<del> </del>				}		<b>↓</b>	<del> </del>			ļ		
		<b></b>	1	1				Ì			ĺ			
		<del> </del>	├	┼-	├	┼—		┼						
	ı.		$\left\{ \right.$	ĺ							1	i		
41-	Cole total	<del></del>	<u> </u>	1	1	<u> </u>	1	<u> </u>	ļ		$\overline{}$	<del> </del>		
	Sub-total	vi. 04 4							0.		0.	<del> </del>		0.
	Total from continuation sheets to Part V	II, Section A							0.		0.	<b></b>		0.
2	Total (add lines 1b and 1c)  Total number of individuals (including but i	and lumpioned to the						<u> </u>	<del></del>	1		<u> </u>		0.
2	compensation from the organization	ioi iimitea to ti	1056	11516	eo a	DOV	e) Wi	110 11	eceived more than \$100	,000 of reportable	,			_
	compensation from the organization												Yes	No
3	Did the organization list any former officer	director or tri	iste	e ke	av er	mnla	N/A0	or	highest compensated o	mployee on	ſ			
Ŭ	line 1a? If "Yes," complete Schedule J for		2010	o, ne	, y Cı	mpic	усс	, 01	riigilest compensated e	Inployee on		3		X
4	For any individual listed on line 1a, is the s		le co	റന്നറ	ensa	ation	า ลกเ	d atl	her compensation from	the organization	ł			
•	and related organizations greater than \$15									the organization		4	i 1	Х
5	Did any person listed on line 1a receive or									idual for services	}		[	
	rendered to the organization? If "Yes," con								oo organization of more	100001100		5	1 1	X
Sec	tion B. Independent Contractors					<i>p</i> 0.0		_	<del></del>					
1	Complete this table for your five highest co	ompensated in	depe	ende	ent c	ont	racto	ors t	that received more than	\$100,000 of com	pens	ation 1	rom	
	the organization Report compensation for												-	
	(A)	,							(B)			((	 C)	
	Name and business	address	N	<u>INC</u>	E				Description of s	services	С	ompe	nsatio	n
	'							-						
								ł			_			
									 <del></del>					_
								1	] 					
								1						
	·							]	·					
2	Total number of independent contractors (		ot li	mite	d to	tho	se li	stec	d above) who received n	nore than				
	\$100,000 of compensation from the organ	ization 🕨					0			<u></u>				

	•	Check if Schedule O conti	ains a résponse	or note to any lin	e in this Part VIII			
	-		<del></del>		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
ts	1 a	Federated campaigns	1a				<del>,</del>	
흔등	b		16					
S E	С	Fundraising events	1c					
# #	d	Related organizations	1d					}
S E		0	<del></del>	-				
ë v	f	All other contributions, gifts, gran	[					1
in the	•	similar amounts not included abo	l l	96,508.				
ĒŎ	а	Noncash contributions included in lines						
Contributions, Gifts, Grants and Other Similar Amounts		Total. Add lines 1a-1f		<b>&gt;</b>	96,508.			
				Business Code				T
e l	2 a							
ه ێٙ	b							
S S	С							
e ve	d							
Program Service Revenue	е							
<u>a</u>	f	All other program service reve	enue					
	9	Total. Add lines 2a-2f					<u> </u>	
	3	Investment income (including	dividends, intere	est, and				
1		other similar amounts)		<b>&gt;</b>				<u> </u>
-	4	Income from investment of ta	x-exempt bond p	roceeds				
	5	Royalties		<u> </u>				<u> </u>
			(ı) Real	(ii) Personal				
Ì		Gross rents				]		
1		Less rental expenses				Ì		
	С	Rental income or (loss)	L	L				
į		Net rental income or (loss)		, <u> </u>	<del> </del>			<del> </del>
1	7 a	Gross amount from sales of	(i) Securities	(II) Other		[		
		assets other than inventory						
	b	Less cost or other basis				]		
		and sales expenses				Ì		
		Gain or (loss)		l		ĺ		
1		Net gain or (loss)		<u> </u>				<del> </del>
nue	8 a	Gross income from fundraisin			•			
l ke		including \$	of					
Other Reve		contributions reported on line						
je		Part IV, line 18	a			ļ		
ᅙ		Less direct expenses	b	L	,	ĺ		
ł		Net income or (loss) from fund Gross income from gaming ad				-		<del> </del>
}	9 а	Part IV, line 19			!			
]	h	Less direct expenses	a b		•	1		
		Net income or (loss) from gam		<b></b>		Ì		
)		Gross sales of inventory, less	-					-
		and allowances	а					
{	b	Less cost of goods sold	b					
ĺ		Net income or (loss) from sale		<b>-</b>		ļ		
	<u>·</u>	Miscellaneous Revenu		Business Code				<del> </del>
Ī	11 a							
	b							<b>†</b>
	С							T
	ď	All other revenue						<u> </u>
)	е	Total. Add lines 11a-11d		<b>&gt;</b>				
	12_	Total revenue See instructions		<b>&gt;</b>	96,508.	0.	0	0.

Secti	on 501(c)(3) and 501(c)(4) organizations must comp Check if Schedule O contains a respon-			implete column (A)	
Dor	not include amounts reported on lines 6b,	(A)	(B) Program service	(C) Management and	(D) Fundraising
	8b, 9b, and 10b of Part VIII.	Total expenses	expenses	general expenses	expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
	individuals See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign	İ			
	individuals See Part IV, lines 15 and 16	70,000.	70,000.		
4	Benefits paid to or for members				
5	Compensation of current officers, directors,		ļ		
	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	Other salaries and wages				
8	Pension plan accruals and contributions (include	ļ			
	section 401(k) and 403(b) employer contributions)				·
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees)				
а	Management				
b	Legal				
c	Accounting				
d	, ,			<u> </u>	
e	Professional fundraising services See Part IV, line 17		· <del></del>		
f	Investment management fees Other (If line 11a amount expends 10% of line 25				
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch 0)	581.	581.		
10	Advertising and promotion		201.		
12	Office expenses				
13	Information technology				
14 15	Royalties				
16	Occupancy				
17	Travel				
18	Payments of travel or entertainment expenses				<del></del>
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings			<del></del>	
20	Interest				
21	Payments to affiliates			<del> </del>	
22	Depreciation, depletion, and amortization		· · · · · · · · · · · · · · · · · · ·	<del></del>	
23	Insurance				<del></del>
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					
b					
С					
d					
е	All other expenses				
25	Total functional expenses Add lines 1 through 24e	70,581.	70,581.	0.	0.
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)		<del></del>		

	<del>,</del>	Check if Schedule O contains a response or not	e to any line in this Part X			
				(A) Beginning of year		(B) End of year
	1	Cash - non interest-bearing		60,011.	1	85,938.
	2	Savings and temporary cash investments			2	
	3	Pledges and grants receivable, net			3	
	4	Accounts receivable, net		4		
	5	Loans and other receivables from current and fo	ormer officers, directors,			
	l	trustees, key employees, and highest compensa				
		Part II of Schedule L		5		
	6	Loans and other receivables from other disqualr	fied persons (as defined under			
		section 4958(f)(1)), persons described in section	' '			
	}	employers and sponsoring organizations of sect			] ]	
ι		employees' beneficiary organizations (see instr)			6	
Assets	7	Notes and loans receivable, net			7	
Ä	8	Inventories for sale or use			8	
	9	Prepaid expenses and deferred charges			9	
	10a	Land, buildings, and equipment cost or other	1 1			
		basis Complete Part VI of Schedule D	10a		1 1	
	ь		10b		10c	
	11	Investments publicly traded securities			11	
	12	Investments - other securities. See Part IV, line		12		
	13	Investments - program related See Part IV, line		13		
	14	Intangible assets		14		
	15	Other assets See Part IV, line 11	Ì		15	
	16	Total assets. Add lines 1 through 15 (must equ	al line 34)	60,011.	16	85,938.
	17	Accounts payable and accrued expenses		17		
	18	Grants payable		18		
	19	Deferred revenue	ĺ		19	
	20	Tax exempt bond liabilities		20		
	21	Escrow or custodial account liability. Complete I	Part IV of Schedule D		21	
S	22	Loans and other payables to current and former	officers, directors, trustees,			
Lrabilities	1	key employees, highest compensated employee	es, and disqualified persons		1 1	
api		Complete Part II of Schedule L			22	
ت.	23	Secured mortgages and notes payable to unrela	ated third parties		23	
	24	Unsecured notes and loans payable to unrelate	d third parties		24	
	25	Other liabilities (including federal income tax, pa	yables to related third			
		parties, and other liabilities not included on lines	17-24) Complete Part X of			
		Schedule D			25	
	26	Total liabilities. Add lines 17 through 25		0.	26	0.
		Organizations that follow SFAS 117 (ASC 958	i), check here  and			
es	1	complete lines 27 through 29, and lines 33 an	d 34.		} {	
2	27	Unrestricted net assets	ĺ		27	
3ak	28	Temporarily restricted net assets	į		28	
ρĘ	29	Permanently restricted net assets			29	
Ξ		Organizations that do not follow SFAS 117 (A	SC 958), check here ▶ 🏻			
Net Assets or Fund Balances		and complete lines 30 through 34.		<del></del>		
ets	30	Capital stock or trust principal, or current funds	ļ	60,011.	30	85,938.
Ass	31	Paid-in or capital surplus, or land, building, or ed	uipment fund	0.	31	0.
let,	32	Retained earnings, endowment, accumulated in	come, or other funds	0.	32	0.
Z	33	Total net assets or fund balances	į	60,011.	33	85,938.
	34	Total liabilities and net assets/fund balances		60,011.	34	85,938.

orm	990 (2016) LAOS LITERACY PROJECT, INC	<u> 32-(</u>	<u>)285330                                   </u>	Page 12
Pai	t XI Reconciliation of Net Assets		_	
	Check if Schedule O contains a response or note to any line in this Part XI			
1	Total revenue (must equal Part VIII, column (A), line 12)	1	96	<u>5,508.</u>
2	Total expenses (must equal Part IX, column (A), line 25)	2	70	),581.
3	Revenue less expenses Subtract line 2 from line 1	3	25	<u>5,927.</u>
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	60	0,011.
5	Net unrealized gains (losses) on investments	5	<u>-</u> .	
6	Donated services and use of facilities	6		
7	Investiment expenses	7		
8	Prior period adjustments	8		
9	Other changes in net assets or fund balances (explain in Schedule O)	9	·	0.
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33,	\		
	column (B))	10	85	<u>5,938.</u>
Pa	t XII Financial Statements and Reporting			
	Check if Schedule O contains a response or note to any line in this Part XII		<del></del>	
				Yes No
1	Accounting method used to prepare the Form 990 X Cash Accrual Other			
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	0	} }	Ì
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewe	d on a	Ì	Ì
	separate basis, consolidated basis, or both			
	Separate basis Consolidated basis Both consolidated and separate basis		ii	
b	Were the organization's financial statements audited by an independent accountant?		2b	<u>X</u>
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separa	te basıs,		
	consolidated basis, or both		( {	
	Separate basis		ĺĺ	
С	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	ne audit,	, ,	ļ
	review, or compilation of its financial statements and selection of an independent accountant?		2c	
_	If the organization changed either its oversight process or selection process during the tax year, explain in Sch			
за	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	ngle Aud		
	Act and OMB Circular A-133?		3a	X_
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits? If the organization did not undergo the required audit or audits? If the organization did not undergo the required audit or audits? If the organization did not undergo the required audit or audits? If the organization did not undergo the required audit or audits? If the organization did not undergo the required audit or audits? If the organization did not undergo the required audit or audits?	ııred audı	1 1	
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b	000
			Form	<b>990</b> (2016)

### SCHEDULE A

Department of the Treasury

Internal Revenue Service

(Form 990 or 990-EZ)

Name of the organization

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.

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

OMB No. 1545-0047

Open to Public Inspection

32-0285330 LAOS LITERACY PROJECT, INC Reason for Public Charity Status (All organizations must complete this part ) See instructions Part I The organization is not a private foundation because it is (For lines 1 through 12, check only one box) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ)) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, 4 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in 5 section 170(b)(1)(A)(IV), (Complete Part II) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 6 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi), (Complete Part II) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or 10 X An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III ) 11 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or 12 more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization You must complete Part IV. Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s) You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions) You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions) You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization f Enter the number of supported organizations g Provide the following information about the supported organization(s) (iv) is the organization listed (II) EIN (i) Name of supported (III) Type of organization (v) Amount of monetary (vi) Amount of other in your governing document? (described on lines 1 10 organization support (see instructions) support (see instructions) above (see instructions))

Schedule A (Form 990 or 990-EZ) 2016 LAOS LITERACY PROJECT, INC 32-0285330 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)

Sec	ction A. Public Support							
Cale	ndar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total	
	Gifts, grants, contributions, and						-	
	membership fees received (Do not					ļ		
	include any "unusual grants ")							
2	Tax revenues levied for the organ-							
	ization's benefit and either paid to							
	or expended on its behalf							
3	The value of services or facilities							
	furnished by a governmental unit to							
	the organization without charge							
4	Total. Add lines 1 through 3							
5	The portion of total contributions							
	by each person (other than a							
	governmental unit or publicly	,				1		
	supported organization) included	, ,				}		
	on line 1 that exceeds 2% of the							
	amount shown on line 11,							
	column (f)							
6	Public support. Subtract line 5 from line 4							
Sec	ction B. Total Support	<b>,</b>						
Cale	ndar year (or fiscal year beginning in) ►	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total	
7	Amounts from line 4							
8	Gross income from interest,						}	
	dividends, payments received on	}						
	securities loans, rents, royalties	[					į	
	and income from similar sources				<u> </u>	l		
9	Net income from unrelated business							
	activities, whether or not the							
	business is regularly carried on					<u> </u>		
10	Other income Do not include gain							
	or loss from the sale of capital					}		
	assets (Explain in Part VI)	l						
11	Total support. Add lines 7 through 10		<u></u>					
12	Gross receipts from related activities,	etc (see instructi	ons)			12		
13	First five years. If the Form 990 is fo	r the organization'	s first, second, thii	d, fourth, or fifth t	ax year as a section	on 501(c)(3)		
	organization, check this box and stor	here					▶□	
	ction C. Computation of Publ							
	Public support percentage for 2016 (	* *	•	column (f))		14	%	
	Public support percentage from 2015					15	%	
16a	33 1/3% support test - 2016. If the				14 is 33 1/3% or r	more, check this bo	ox and	
	stop here. The organization qualifies as a publicly supported organization							
t	b 33 1/3% support test - 2015. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box							
	and stop here. The organization qua							
-17a	=10%=-facts=and=circumstances tes							
	and if the organization meets the "fac					irt VI how the orga	nization	
	meets the "facts and-circumstances"				_		▶□	
t	10% -facts-and-circumstances tes	t - 2015. If the org	janization did not e	check a box on lin	e 13, 16a, 16b, or	17a, and line 15 is	10% or	
	more, and if the organization meets the						е	
	organization meets the "facts-and-cire	cumstances" test	The organization	qualifies as a publ	licly supported org	anızatıon	▶□	
18	Private foundation. If the organization	on did not check a	box on line 13, 16	a, 16b, 17a, or 17	b, check this box	and see instruction	ns 🕨	
						edule A (Form 990		

;

Schedule A (Form 990 or 990 EZ) 2016 LAOS LITERACY PROJECT, INC Part III | Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II)

Sec	ction A. Public Support								
Cale	ndar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total		
1	Gifts, grants, contributions, and					•			
	membership fees received (Do not								
	ınclude any "unusual grants ")	355,140.	190,470.	261,800.	99,990.	96,508.	1,003,908,		
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose								
3	Gross receipts from activities that								
	are not an unrelated trade or bus- iness under section 513								
4	Tax revenues levied for the organ- ization; benefit and either paid to or expended on its behalf	-							
_		17.1							
5	The value of services or facilities furnished by a governmental unit to the organization without charge								
6	Total. Add lines 1 through 5	355,140.	190,470.	261,800.	99,990.	96,508.	1,003,908,		
72	Amounts included on lines 1, 2, and 3 received from disqualified persons	123,000.	74,000.	31,600.	31,000.	35,518.	295,118.		
t	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						0.		
	Add lines 7a and 7b	123,000.	74,000.	31,600.	31,000.	35,518.	295,118.		
	Public support. (Subtract line 7c from line 6)	123,000.	7 = 7 0 0 0 •	31,000.	31,000.		708,790.		
	ction B. Total Support	<del></del>		·		·	100,130.		
	ndar year (or fiscal year beginning in)	(a) 2012	<b>(b)</b> 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total		
	Amounts from line 6	355,140.	190,470.	261,800.	99,990.	96,508.	1,003,908,		
-	a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	333,140.	2507170.	2017000.	33,330.	30,300.	1,003,908.		
t	Unrelated business taxable income		-						
	(less section 511 taxes) from businesses	ļ							
	acquired after June 30, 1975								
11	Add lines 10a and 10b  Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on								
12	Other income Do not include gain or loss-from the sale of capital assets (Explain in Part VI)								
13	Total support (Add lines 9 10c 11, and 12)	355,140.	190,470.	261,800.	99,990.	96,508.	1,003,908,		
	First five years. If the Form 990 is for						ation		
	check this box and stop here	J	, ,	.,,	,	, , , , , , , , , , , , , , , , , , ,	<b>▶</b> □		
Se	ction C. Computation of Publ	ic₌Support-Pe	rcentage						
	Public support percentage for 2016 (			olumn (f))	<del></del>	15	70.60 %		
16	Public support percentage from 2015					16	72.40 %		
Se	Section D. Computation of Investment Income Percentage								
17				e 13. column (fl)		17	.00 %		
18	Investment income percentage from		=	(.,,		18	<del>*************************************</del>		
198	a 33 1/3% support tests - 2016. If the		•	on line 14, and line	15 is more than 3				
	more than 33 1/3%, check this box a	nd stop here. The	organization quali	fies as a publicly s	upported organiz	ation	<b>→</b> X		
ł	33 1/3% support tests - 2015. If the	organization did n	ot check a box on	line 14 or line 19a	, and line 16 is mo	ore than 33 1/3%, a	and		
20	line 18 is not more than 33 1/3%, che	CK This box and st	top here. The orga	inization qualifies a	is a publicly supp	orted organization	▶∟		
20	20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions								

## Part IV | Supporting Organizations

...(Complete only if you checked a box in line 12 on Part I If you checked 12a of Part I, complete Sections A and B If you checked 12b of Part I, complete Sections A and C If you checked 12c of Part I, complete Sections A. D. and E. If you checked 12d of Part I, complete Sections A and D. and complete Part V.)

sec	tion A. All Supporting Organizations			
		۲	Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing	ļ		
	documents? If "No," describe in Part VI how the supported organizations are designated. If designated by			
_	class or purpose, describe the designation If historic and continuing relationship, explain	1		
2	Did the organization have any supported organization that does not have an IRS determination of status	-	ļi	
	under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported	_	ļi	
	organization was described in section 509(a)(1) or (2)	2	ļ	
3а	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer	l	( )	
	(b) and (c) below	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and			ĺ
	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	ļ	
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	ļ	
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If		ļ	ĺ
	"Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below	4a	<b> </b>	ļ
b	; ,	ĺ		{
	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	<del> </del>	ļ
С	Did the organization support any foreign supported organization that does not have an IRS determination			ļ
	under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used	ļ		
	to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B)			
	purposes	4c	ļ	ļ
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes,"		<u> </u>	
	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,	- 1		
	(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	ļ	
b	Type I or Type II only. Was any added or substituted supported organization part of a class already	ļ	( )	Į
	designated in the organization's organizing document?	5b	ļ	
С	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c	ļ	L
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to			
	anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class	ĺ		
	benefited by one or more of its supported organizations, or (iii) other supporting organizations that also			
	support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in			{
	Part VI.	_ 6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor	1		{
	(defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with	1		
	regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)	7_	ļi	
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7?			
	If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)	8		Ĺ
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more		ļ	
	_disqualified_persons.as.defined-in-section-4946 (other than foundation managers and organizations described			
	ın section 509(a)(1) or (2))? If "Yes," provide detail in <b>Part VI.</b>	9a	1	{
b	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which			
	the supporting organization had an interest? If "Yes," provide detail in Part VI.	9ь		ĺ
С	Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit			
	from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.	9c		Į
10a	Was the organization subject to the excess business holdings rules of section 4943 because of section			
	4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated	İ		
	supporting organizations)? If "Yes," answer 10b below	10a		ļ
b	Did the organization have any excess business holdings in the tax year? (I to Schodulo C. Farm 4700 to	1.00	<del> </del>	<del> </del>

determine whether the organization had excess business holdings)

Parent of Supported Organizations Answer (a) and (b) below.

trustees of each of the supported organizations? Provide details in Part VI.

a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or

b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard

За

Schedule A (Form 990 or 990 EZ) 2016 LAOS LITERACY PROJECT, Part V "Type III Non-Functionally Integrated 509(a)(3) Support	INC		32-0285330 Page 6
Check here if the organization satisfied the Integral Part Test as a qualify			Part VI \ Con instructions Al
other Type III non functionally integrated supporting organizations must			rait vi ) See mstructions. Ai
Section A - Adjusted Net Income	(A) Prior Year	(B) Current Year (optional)	
1 Net short term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3	4		
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or			
collection of gross income or for management, conservation, or			
maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8	<del></del>	
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
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	······································	<u> </u>
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-function		ed Type III supporting or	ganization (see
instructions)	, -5	), - "Fir- " <b>3 -</b> "	

Schedule A (Form 990 or 990-EZ) 2016

Sche <b>Par</b>	t V Type II Non Experience II Integrated 509			2-0285330 Page 7
		(a)(s) Supporting Orga	anizations (continued)	Current Vees
	on D - Distributions  Amounts paid to supported organizations to accomplish exe	Current Year		
1	Amounts paid to supported organizations to accomplish exemples and to perform activity that directly furthers exemple to the supported organizations to accomplish exemples and the supported organizations to accomplish exemples and the supported organizations to accomplish exemples and the supported organizations to accomplish exemples and the supported organizations to accomplish exemples and the supported organizations to accomplish exemples and the supported organizations to accomplish exemples and the supported organizations to accomplish exemples and the supported organizations to accomplish exemples and the supported organizations are supported organizations.	<del> </del>		
2	organizations, in excess of income from activity			
	Administrative expenses paid to accomplish exempt purpose	as of supported organization	e	<del></del>
3_	Amounts paid to acquire exempt use assets	es or supported organization	3	
4	Qualified set-aside amounts (prior IRS approval required)			<del> </del>
5	Other distributions (describe in Part VI) See instructions	<del></del>		<del> </del>
<u>6</u> 7	Total annual distributions. Add lines 1 through 6	<del></del>		
8	Distributions to attentive supported organizations to which the	he organization is responsive	· _ · · · · · · · · · · · · · · · · · ·	<del> </del>
0	(provide details in Part VI) See instructions	no organization is responsive	•	
9	Distributable amount for 2016 from Section C, line 6	<del></del>		
10	Line 8 amount divided by Line 9 amount			
	'	(1)	(ii)	(ni)
	<i>( '</i>	Excess Distributions	Underdistributions	Distributable
Secti	on E - Distribution Allocations (see instructions)		Pre-2016	Amount for 2016
1	Distributable amount for 2016 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2016 (reason-			
	able cause required- explain in Part VI) See instructions			Ì
3	Excess distributions carryover, if any, to 2016			
а				
b				
С	From 2013			
d	From 2014			
e	From 2015			<u> </u>
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2016 distributable amount			
	Carryover from 2011 not applied (see instructions)			<del> </del>
	Remainder Subtract lines 3g, 3h, and 3i from 3f			ļ — — — — — — — — — — — — — — — — — — —
4	Distributions for 2016 from Section D,			
	line 7 \$	 		ļ
	Applied to underdistributions of prior years			<u></u>
	Applied to 2016 distributable amount			ļ
	Remainder Subtract lines 4a and 4b from 4			
5	Remaining underdistributions for years prior to 2016, if			
	any Subtract lines 3g and 4a from line 2 For result greater			
	than zero, explain in Part VI See instructions			
6	Remaining underdistributions for 2016 Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in			
	Part VI See instructions		<del> </del>	<del> </del>
7	Excess distributions carryover to 2017. Add lines 3			
	and 4c		<del> </del>	<u> </u>
8	Breakdown of line 7		<del> </del>	<del> </del>
a	Excess from 2013		<del> </del>	<del> </del>
	Excess from 2014			
	Excess from 2015		<del></del>	<del> </del>
U	EVARAGE HALLI EALS	i	ı	1

Schedule A (Form 990 or 990-EZ) 2016

e Excess from 2016

Scriedule A	(Form ago of ago EZ) 2016 LAOS LITERACT PROJECT, INC 32-0263330 Page 8
Part VI	Supplemental Information. Provide the explanations required by Part II, line 10, Part II, line 17a or 17b, Part III, line 12, Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2, Part IV, Section C, line 1, Part IV, Section D, lines 2 and 3, Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b, Part V, line 1, Part V, Section B, line 1e, Part V, Section D, lines 5, 6, and 8, and Part V, Section E, lines 2, 5, and 6 Also complete this part for any additional information (See instructions)
<del></del>	

# SCHEDULE F (Form 990)

Statement of Activities Outside the United States

► Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16.

Attach to Form 990.

Open to Public

OMB No 1545-0047

Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

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

Employer identification number

LAC	OS LITERACY P	ROJECT,	INC			32-02853	
Pa		mation on A	ctivities Ou	tside the United States. Complet	te if the organ	ization answered "	Yes" on
	Form 990, Part IV	/, line 14b					
1				ds to substantiate the amount of its gra			
	the grantees' eligibility for	or the grants or a	assistance, and	the selection criteria used to award the	grants or ass	istance? X	Yes No
2	For grantmakers. Desc United States	ribe in Part V the	organization's	procedures for monitoring the use of its	grants and o	ther assistance out	tside the
3	Activities per Region (Ti	ne following Part	I, line 3 table ca	an be duplicated if additional space is n	eeded)		
	(a) Region	(b) Number of offices in the region	employees,	(d) Activities conducted in the region (by type) (such as, fundraising, pro- gram services, investments, grants to recipients located in the region)	is a pro describe	vity listed in (d) gram service, e specific type e(s) in the region	(f) Total expenditures for and investments in the region
	Sub total Total from continuation	0	0				0
	sheets to Part I  Totals (add lines 3a and 3b)	0	0				0.
∟HA	For Paperwork Reduct	ion Act Notice.	see the Instruc	tions for Form 990		Schadula E	(Form 990) 2016

LAOS LITERACY PROJECT,

Schedule F (Form 990) 2016

Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000 Part II can be duplicated if additional space is needed 32-0285330

ription (I) Method of cash valuation (book, FMV, ance appraisal, other)						
unt of (h) Description ash of noncash ance assistance	0					
sement (g) Amount of noncash assistance	FER					-
nt (f) Manner of ant cash disbursement	00.WIRE TRANSFER					
(e) Amount of cash grant	N:					
(d) Purpose of grant	TO IMPROVE LITERACY IN LAOS FOR CHILDREN AND ADULTS					
(c) Region	SOUTHEAST ASIA					
(b) IRS code section and EIN (if applicable)						
		·				
1 (a) Name of organization						

Schedule F (Form 990) 2016

Enter total number of other organizations or entities

ဗ

Page 3		(h) Method of , valuation (book, FMV, appraisal, other)					Schedule F (Form 990) 2016
	IV, line 16	(g) Description of noncash assistance					Schedul
32-0285330	ın Form 990, Part	(f) Amount of noncash assistance					
32	Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16 Part III can be duplicated if additional space is needed	(e) Manner of cash disbursement					
INC	tes. Complete ıf	(d) Amount of cash grant					
PROJECT	the United Sta	(c) Number of recipients					
LAOS LITERACY PROJECT,	e to Individuals Outside	(b) Region					
Schedule F (Form 990) 2016	Part III Grants and Other Assistance to Individuals Outside Part III can be duplicated if additional space is needed	(a) Type of grant or assistance					

Schedule F (Form 990) 2016

Yes X No

Instructions for Form 5713, do not file with Form 990)

Part V	(Form 990) 2016 LAOS LITERACY PROJECT, INC 32-0285330 Page Supplemental Information
•	Provide the information required by Part I, line 2 (monitoring of funds), Part I, line 3, column (f) (accounting method, amounts of investments vs. expenditures per region), Part II, line 1 (accounting method), Part III (accounting method), and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions
	(estimated humber of recipients), as applicable. Also complete this part to provide any additional information. See instructions
~ <del></del>	

## **SCHEDULE 0**

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/torm990.

OMB No 1545-0047 16

Inspection

Name of the organization  LAOS LITERACY PROJECT, INC	Employer identification number 32-0285330
FORM 990, PART VI, SECTION B, LINE 11B:	
FORM 990 HAS BEEN PREPARED BY A THIRD-PARTY CPA AND FORWA	RDED TO THE
TREASURER FOR REVIEW BEFORE FILING.	
FORM 990, PART VI, SECTION C, LINE 19:	
AVAILABLE UPON REQUEST AT 10 TREMONT STREET, SUITE 200, E	OSTON, MA 02108
,	