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Return of Organization Exempt From Income Tax

OMB No. 1545-0047

2016

Department of the Treasury Internal Revenue Service

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

▶ Do not enter social security numbers on this form as it may be made public.

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

Open to Public Inspection

A	For the	2016 cale	endar year, or tax year beginning July 1 , 2016, and ending J	une 30	0	, 20 17		
В	Check if	applicable.	C Name of organization Literacy Council of Alaska	DE	mploy	er identification nu	ımber	
	Address	change	Doing business as			92-6010100		
	Name ch	ange	Number and street (or P.O. box if mail is not delivered to street address) Room/suite	£Τ	elepho	ne number		
	Initial retu	ım	517 Gaffney Road	Ĭ		(907) 456-6212		
	Final retun	vterminated	City or town, state or province, country, and ZIP or foreign postal code					
	Amended	return	Fairbanks, AK 99701	GG	iross re	eceipts \$	488,837	
	Application	n pending	F Name and address of principal officer: H(a) is this	a group n	eturn for	subordinates? 🗌 Yes	✓ No	
				all subo	rdinates	s included? 🔲 Yes	☐ No	
ī	Tax-exen	npt status		"No," a	ttach a	a list. (see instruction	ns)	
J	Website:	► www		up exer	mption	number ▶		
K	Form of o		✓ Corporation Trust Association Other ► L. Year of formation: 19	74 N	State	of legal domicile.	AK	
Р	art I	Summ	nary					
	1	Briefly de	escribe the organization's mission or most significant activities:					
æ	l .	-	ion is to promote literacy for people of all ages in Fairbanks and the interior of Alaska	. Signi	ificant	t activities inclu	de adult.	
Governance	1		ge and computer literacy as well as book and computer recycling.					
E			is box $ ightharpoonup \Box$ if the organization discontinued its operations or disposed of more th	an 25	% of	its net assets.		
Š			of voting members of the governing body (Part VI, line 1a)	. 1	3		6	
8			of independent voting members of the governing body (Part VI, line 1b)	. 1	4		0	
Activities &			mber of individuals employed in calendar year 2016 (Part V, line 2a)		5		20	
Ĭ	1		mber of volunteers (estimate if necessary)		6		189	
Act			elated business revenue from PartíVIII, column-(C), line-12		7a		0	
			lated business taxable income from Form 990-(T, line 34 1.)		7b		0	
	 	101 0111		Year		Current Ye	ar	
_	8	Contribut	tions and grants (Part VIII, line 1h) 👸 - NAV 🐠 🖰 - SHAS - 🚫 .	310	9,812		338,676	
Revenue			service revenue (Part VIII, line 2g)		B,813		35,284	
ķ		_	ont income (Part VIII, column (A), lines 3, 4, and 7d)		2,159	· · · · · · · · · · · · · · · · · · ·	4,338	
æ			venue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		6,210		110,539	
			enue – add lines 8 through 11 (must equal Part-VIII, column (A), line 12)		6,994		488,837	
			nd símilar amounts paid (Part IX, column (A), lines 1–3)	470	3,334		400,037	
			paid to or for members (Part IX, column (A), line 4)					
		-	other compensation, employee benefits (Part IX, column (A), lines 5–10)	271	5,870		385,881	
Expenses			onal fundraising fees (Part IX, column (A), line 11e)	3/3	3,070		303,001	
ē	•		draising expenses (Part IX, column (D), line 25) ▶					
Ω	1		penses (Part IX, column (A), lines 11a-11d, 11f-24e)	116	2 755		110 417	
			penses. Add lines 13–17 (must equal Part IX, column (A), line 25)		6,755		119,417 505,298	
	l		less expenses. Subtract line 18 from line 12		2, <u>625</u> 5,631		-16,461	
- 2		TOVETTUE	Beginning of			End of Yes		
ances	20	Fotal ace	ets (Part X, line 16)				350,630	
Net Asser Fund Bala	21		olities (Part X, line 26)		7,119		13,107	
E S	22		ts or fund balances. Subtract line 21 from line 20		3,134 3,985			
	rt II –		ture Block	35.	3,303	=-=-	337,523	
				- 45 - 5			haliat it is	
			ry, I declare that I have examined this return, including accompanying schedules and statements, and t lete. Declaration of preparal (other han officer) is based on all information of which preparer has any kno			ny knowledge and	beller, it is	
				г <u> </u>				
Sig	ın İ	Siens	eture of officer	L Date				
He		/	isa Baker Prosident	11	11	0/1/		
	.	Type	or print name and title	ш-/	, , ,	///		
			pe preparer's name Preparer's signature Date			- PIN		
Pai		} "	part of order of order of order of order o		heck [elf-emp	if [
	eparer					,		
Use Only Firm's name ► Firm's EIN ►								
Mar	the IR		ddress ► Figure 1 Figure 2 Figure 2 Figure 3 F	Phone n	0.	· · Yes	No	
					<u> </u>		90 (2016)	
rui	raperwi)טטטא אונ	ction Act Notice, see the separate instructions. Cat. No. 11282Y			ronti a	~~ (2010)	

Part 1 2 3	• Brief Our I scho	Statement of Program Service Accomplishments Check if Schedule O contains a response or note to any line in this Part III fly describe the organization's mission: mission is to promote literacy for people of all ages in Fairbanks and the interior of Alaska. Signific col-age and computer literacy as well as book and computer recycling. the organization undertake any significant program services during the year which were not list reform 990 or 990-EZ?	ant activities include	adult,
3	Our i	fly describe the organization's mission: mission is to promote literacy for people of all ages in Fairbanks and the interior of Alaska. Signific pol-age and computer literacy as well as book and computer recycling. the organization undertake any significant program services during the year which were not lis r Form 990 or 990-EZ?	ant activities include	adult,
3	Our i	mission is to promote literacy for people of all ages in Fairbanks and the interior of Alaska. Signific pol-age and computer literacy as well as book and computer recycling. the organization undertake any significant program services during the year which were not list Form 990 or 990-EZ?		
3	Scho Did 1	the organization undertake any significant program services during the year which were not list Form 990 or 990-EZ?		
3	Did 1	the organization undertake any significant program services during the year which were not lis r Form 990 or 990-EZ?		
3		r Form 990 or 990-EZ?	etad on the	
3		r Form 990 or 990-EZ?	eted on the	
	prior			
			· · · 🔲 Yes	✓ No
		'es," describe these new services on Schedule O.		
4		the organization cease conducting, or make significant changes in how it conducts, an rices?		
4			· · · L Yes	✓ No
7		es," describe these changes on Schedule O. cribe the organization's program service accomplishments for each of its three largest progra		saurad by
	expe	enses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grantotal expenses, and revenue, if any, for each program service reported.		
4a	(Cod	de:) (Expenses \$ 181,223 including grants of \$ 154,000) (Revenue		
	Achel	It Literacy Program		
		R Literacy Program ided classroom instruction and tutoring for adults.		
	111011	issed classification and tatoring for Boards.		
	208 s	students		
	52 V	olunteer tutors		
	5 Vol	lunteer instructors		
4b	(Cod	de:) (Expenses \$ 99,120 including grants of \$ 71,497) (Revenue	÷\$ 96,6	37)
				··
	Scho	pol-age Literacy Program		
		ided tutoring and instruction for school-age children that builds strong educational foundations and		ve of
	learn	ning.		
	C	n Dood E4E bids 9E valuations		
	Guys	s Read - 515 kids, 25 volunteers Read - 500 kids, 20 volunteers		
		s ago Tidoring 27 kids Quoluntous		
		1 Park After School Program - 183 kids, 4 volunteers		
4c	(Cod	le:) (Expenses \$ 137,290 including grants of \$ 0) (Revenue	\$ 118,9	49)
. –	 Dazi	Annual Description		
	DOOK	and Computer Recycling		
	Free I	Books Provided - 22,696		
		nutary Drovided 50		
		puters Provided - 36 puter Literacy Students - 23		
		nteers - 3		
		place Literacy Students - 11		
<u></u>	Other	y program continue (Deposible in Sehedule O.)		
4d		er program services (Describe in Schedule O.) enses \$ including grants of \$) (Revenue \$)		
4e		program service expenses ► 417,633		

Part	V 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	1	
2 3	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	✓	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		1
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		1
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	_		→
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	5 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		1
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		1
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? If "Yes," complete Schedule D, Part IV	9		✓
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	1	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	√	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		1
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
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		1
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 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.	11e		√
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		1
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		√
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		1
14 a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		1
	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 or more? If "Yes," complete Schedule F, Parts I and IV	14b	_	
	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		1
	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		1
	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		1
	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	1	
	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		1
		Form	n 99 0	(2016)

Part	Checklist of Required Schedules (continued)			
			Yes	No
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		✓_
21	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
	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 1? If "Yes," complete Schedule I, Parts I and II	21		✓
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		✓
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		1
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			<u> </u>
	\$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		✓
_	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		✓
C	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		1
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		1
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		1
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior			<u> </u>
	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		1
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any	230		<u> </u>
	current or former officers, directors, trustees, key employees, highest compensated employees, or			
	disqualified persons? If "Yes," complete Schedule L, Part II	26		✓
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III			1
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,	27		
	Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		✓
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		✓
C	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		1
29	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			
04	conservation contributions? If "Yes," complete Schedule M	30		✓
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		✓
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"			
20	complete Schedule N, Part II	32		✓
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33.	_	✓_
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		√
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		1
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		✓_
	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		✓
	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		✓
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.			
	107 HOLDER 7 to 1711 000 meta are required to complete obligation.	38 Form	900	(2016)
		i Oil		(C010)

Form **990** (2016)

Part	Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable]
С	Did the organization comply with backup withholding rules for reportable payments to vendors and 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>'C</u>		
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 20	ĺ		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b	1	l
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)		Ť	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		1
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		1
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial	1		١,
_	account)?	4a		/
b	If "Yes," enter the name of the foreign country:			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		1
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		1
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		✓
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b		<u> </u>
7	Organizations that may receive deductible contributions under section 170(c).	1		
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		1
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		-
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	 		 -
	required to file Form 8282?	7c		✓
d	If "Yes," indicate the number of Forms 8282 filed during the year			
ө	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		1
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? .	7f		✓
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		ļ
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			<u> </u>
9	sponsoring organization have excess business holdings at any time during the year?	8_		-
a	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
_	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		<u> </u>
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . [10b]	ļ		
11	Section 501(c)(12) organizations. Enter:	ŀ		ŀ
	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.)	ļ		Į
12a	against amounts due or received from them.)	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b	120		
	Section 501(c)(29) qualified nonprofit health insurance issuers.	1	1	
	Is the organization licensed to issue qualified health plans in more than one state?	13a	<u> </u>	
	Note. See the instructions for additional information the organization must report on Schedule O.			Γ
b	Enter the amount of reserves the organization is required to maintain by the states in which	1		
	the organization is licensed to issue qualified health plans	1	1	1
	Enter the amount of reserves on hand	<u> </u>	<u> </u>	<u> </u>
	Did the organization receive any payments for indoor tanning services during the tax year?	14a	<u> </u>	/
b	If "Yes" has it filed a Form 720 to report these payments? If "No " provide an explanation in Schedule O	14b	l .	I

Part				
	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. S. Check if Schedule O contains a response or note to any line in this Part VI			
Sect	ion A. Governing Body and Management	····	•	· <u>V</u>
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 6			
	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	·			1
2	Enter the number of voting members included in line 1a, above, who are independent . 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	_		Ť
	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		1
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		1
6	Did the organization have members or stockholders?	6	√	ļ
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?			
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,	7a		-
-	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:			<u> </u>
а	The governing body?	8a	✓	
Ъ	Each committee with authority to act on behalf of the governing body?	8b	✓	ļ
9	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			
Secti	on B. Policies (This Section B requests information about policies not required by the Internal Reven	9	ade l	
00011	on b. Folicies (This dection b requests information about policies not required by the internal neven	DE C	Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		1
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,			1
	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	✓	L.,
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	40:		
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		
_	describe in Schedule O how this was done	12c	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?	45-		ļ
a b	The organization's CEO, Executive Director, or top management official	15a 15b	<u> </u>	1
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).	130		-
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			
	with a taxable entity during the year?	16a		1
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its			
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the			J
Soction	organization's exempt status with respect to such arrangements?	16b		L
17	List the states with which a copy of this Form 990 is required to be filed ► Alaska			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section	5010	c)(3)s	only)
	available for public inspection. Indicate how you made these available. Check all that apply.	•	,,-,-	,,
	☐ Own website ☐ Another's website ☑ Upon request ☐ Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of int	erest	policy	, and
00	financial statements available to the public during the tax year.			
20	State the name, address, and telephone number of the person who possesses the organization's books and re	cords	•	
	Rebecca Magowan, 517 Gaffney Road, Fairbanks, AK 99701 (907) 456-6212			

Page	7
rage	

Form	aan	/201	6
COLLI	330	IZU I	Ю.

	· · · · · · · · · · · · · · · · · · ·						
Part VII	Companyation of Officers Direct	tore Truetone	Koy Employees	Highaet (hateananna'	Employees	and
I CIIL VII	Compensation of Officers, Direct	ituis, ilustees,	rey Employees,	mignest c	2011/bengarea	Lilipioyees,	and
		-		-	-		
	Independent Contractors						
	macpenaent contactors						

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

☐ Check this box if neither the organization	nor any related	d orga	aniz	atio	n co	ompe	nsa	ited any currer	t officer, director	, or trustee.
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	do x, office individua	ot ch unles	Posi eck s pe	ition more	than of the state	ne an	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated
(1) Lisa Baker	1					8.				
President		/	-	1	_		 —	<u> </u>	0	
(2) Bradley McGinnity	 <u>1</u>	1		1						
Vice-President, Treasurer		-	\vdash	-	-	 	├	<u> </u>	 	
(3) Kelly McNabb	1	/		1	1]		0	
Secretary (4) Jennifer Lu	1	 	t^-	Ť	t^-	-	\vdash	† ·· · · · · · · · · · · · · · · · · ·		
Member	-	1		1		1			0	<u> </u>
(5) Michael McConahy	1	<u> </u>		T	\vdash		†	<u>-</u>		
Member		1						<u> </u>	0	
(6) Elena Savastianova	1				Γ					
Member		1		_				C	0	
(7)										
(8)						-				
(9)				-	-					
(10)		-			T					
(11)			\dagger	-						
(12)					 		+			
(13)		-								
(14)		-		T	 					

Par	Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)												
	(A) Name and title	(B) Average hours per week (list any	(B) Position (do not check more than o box, unless person is both officer and a director/trust of the control o			an tee)	(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other				
		hours for related organizations below dotted line)	Individua or directo	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	on ar	npensa from the ganizati ad relate anizatio	e on ed
(15)			<u>-</u>										
(16)								-					
(17)								<u> </u>					
(18)				ļ				-					
(19)					-			\vdash					
(20)				_		_		<u> </u>					
(21)				_									·
(22)													
(23)								_					
(24)								<u> </u>					·
(25)			<u> </u>										
1b	Sub-total		<u> </u>	<u> </u>	_			<u> </u>					0
c d	Total from continuation sheets to Part Total (add lines 1b and 1c)	VII, Sectio					•	>					0
2	Total number of individuals (including but reportable compensation from the organi	not limited				ed a	above	e) w	ho received m	ore than \$100,00	00 of		<u>~</u>
3	Did the organization list any former of employee on line 1a? If "Yes," complete:	ficer, dırec						emp	oloyee, or high	est compensate	ed 3	Ye	No No
4	For any individual listed on line 1a, is the organization and related organizations individual	sum of rep	portal	ble (com	per	nsatio				ne 🗀		
5	Did any person listed on line 1a receive of for services rendered to the organization									ation or individu	al		1
Section	on B. Independent Contractors	: 11 163, C	.Ompi				116 0 1			· · · · ·	5		1 🗸
1	Complete this table for your five highest compensation from the organization. Repyear.												tax
	(A) Name and business add	ress					_		(B) Description of s	ervices	(Compe	C) insation	
							-						
2	Total number of independent contractor received more than \$100,000 of compens							th	ose listed abo	ove) who			
											F	orm 9 9	O (2016)

Par	t VIII	Statement of Revenue		anu lina in thia	O \ //!!		
	-,	Check if Schedule O contains	a response or note to	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
इंद्र	1a	Federated campaigns	1a				
Contributions, Giffs, Grants and Other Similar Amounts	b	Membership dues	1b	•			
S, e	С	Fundraising events	1c 24,376				
ar Jar	d	Related organizations	1d				
ĬĬ,	9	Government grants (contributions)	1e 185,497				
tion S	f	All other contributions, gifts, grants,					
혈		and similar amounts not included above	1f 128,803				
a de	g	Noncash contributions included in lines 1a	-1f: \$				
	h	Total. Add lines 1a-1f	<u> ▶</u>	338,676			
Program Service Revenue	ļ		Business Code				
Š	2a	Classes & Tutoring Fees	n/a	7,689	7,689		
æ	b	Cross-age Tutoring	n/a	10,000	10,000		<u> </u>
₹.	C	EL Civics Program	n/a	9,000	9,000		<u> </u>
ℬ	d	Computer Refurbishing	n/a	8,120	8,120		
뎚	е	Gals Read	n/a	475	475		<u> </u>
ğ	f	All other program service revenue	Je.				<u> </u>
<u>~</u>	g		<u> </u>	35,284			7
	3	Investment income (including					
				4,338	4,338		
	4	Income from investment of tax-exe					
	5	Royalties				·	<u> </u>
	6a	<u> </u>	(1) 1 0130114				
	b	Gross rents Less: rental expenses			ļ		
	C	Rental income or (loss)					
	ď	Net rental income or (loss) .					
İ	7a	Gross amount from sales of (i) Securit	nes (ii) Other		-		
		assets other than inventory		1			
	b	Less: cost or other basis and sales expenses .					
		·			ļ		
	6	Gain or (loss)					
	d	Net gain or (loss)	· · · · · · •				
venue	8a	Gross income from fundraising events (not including \$					
Other Rever		of contributions reported on line 1 See Part IV, line 18					
동	b	Less: direct expenses	. b		}		
	С	Net income or (loss) from fundra	aising events . >				
i	9a	Gross income from gaming activities See Part IV, line 19					
	b	Less: direct expenses	. b				l
	C	Net income or (loss) from gamin	g activities >				
	10a	Gross sales of inventory, returns and allowances					
	b	Less: cost of goods sold			1		
į	С	Net income or (loss) from sales					
1		Miscellaneous Revenue	Business Code				
1	11a	Sale of Used Books	n/a	110,252	110,252		
	b	Other		287	287		
}	С						
	d	All other revenue					
	е	Total. Add lines 11a-11d		110,539			
	12	Total revenue. See instructions	▶	488.837	150,161		
							Form 990 (2016)

Par	Statement of Functional Expenses				, ago 10
Section	on 501(c)(3) and 501(c)(4) organizations must con				
	Check if Schedule O contains a respon-	se or note to any lin	ne in this Part IX .		
	ot include amounts reported on lines 6b, 7b, b, 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 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 individuals. See Part IV, lines 15 and 16				
4 5	Benefits paid to or for members				
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 salaries and wages	345,849	282,360	63,489	
9	section 401(k) and 403(b) employer contributions) Other employee benefits	5,876	4,919	957	
10	Payroll taxes	34,156	28,445	5,711	
11	Fees for services (non-employees):	04,100	20,110		
а	Management				
b	Legal				
c d	Accounting	3,950		3,950	
e	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)				
12	Advertising and promotion	4,907	4,103	277	527
13	Office expenses	11,373	9,140	1,615	618
14 15	Information technology				····
16	Occupancy	51,204	49,724	1,480	
17	Travel	3,375	3,375	1,100	
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings .				
20	Interest				
21 22	Payments to affiliates				
22 23	Depreciation, depletion, and amortization . Insurance	12,097 7.018	10,088 6,067	2,009 951	
24	Other expenses. Itemize expenses not covered	7,010	0,007	331	
	above (List miscellaneous expenses in line 24e. If	ļ		}	i I
	line 24e amount exceeds 10% of line 25, column				
_	(A) amount, list line 24e expenses on Schedule O.)				
a b	Supplies Equipment and Loss on Assets	16,709 530	14,324 20	1,729 510	656
C	Dues Fees	3,734	1,864	1,310	560
d	Other	4,520	3,204	561	755
е	All other expenses				
25	Total functional expenses. Add lines 1 through 24e Joint costs. Complete this line only if the	505,298	417,633	84,849	3,116
26	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)		:		

P	art X						
		Check if Schedule O contains a response or	r note to	o any line in this Par			
	· ·				(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing		[134,415	1	106,753
	2	Savings and temporary cash investments		[58,000	2	58,105
	3	Pledges and grants receivable, net	[72,345	3	84,922	
	4	Accounts receivable, net		4			
	5	Loans and other receivables from current and former officers, directors,]]	
		trustees, key employees, and highest co Complete Part II of Schedule L		5			
	6	Loans and other receivables from other disqualified pers 4958(f)(1)), persons described in section 4958(c)(3)(B), ar					
		sponsoring organizations of section 501(c)(9) volum				<u>-</u> -	
Assets	۱ _	organizations (see instructions). Complete Part II of Sche		L.		6	
SS	7	Notes and loans receivable, net				7	
•	8	Inventories for sale or use		<u> </u>	276	8	290
	9				9,462	9	8,746
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	1	į			
		·	10a	147,379		-	
		Less: accumulated depreciation	10b	93,978	64,120	$\overline{}$	53,401
	11			· · · · · }		11	
	12	Investments—other securities. See Part IV, line	28,501	12	38,413		
	13 14	Investments—program-related. See Part IV, line		13			
	15	Intangible assets				15	
	16	Total assets. Add lines 1 through 15 (must equa		L	207.440	16	250 620
	17	Accounts payable and accrued expenses			367,119		350,630
	18	Grants payable		-	13,134	18	13,107
	19	Deferred revenue		L.		19	
	20	Tax-exempt bond liabilities			20	<u> </u>	
	21	Escrow or custodial account liability. Complete				21	
Ø	22	· · · · · · · · · · · · · · · · · · ·) -				
Liabilities		Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and					
įį	-	disqualified persons. Complete Part II of Schedu				22	
_	23 24	Secured mortgages and notes payable to unrela		· -		23	
		Unsecured notes and loans payable to unrelated				24	
	25	Other liabilities (including federal income tax, parties, and other liabilities not included on lines of Schedule D	s 17-24	. Complete Part X		0.5	
	26	Total liabilities. Add lines 17 through 25		<u> </u>	40.404	25 26	40.407
	20	Organizations that follow SFAS 117 (ASC 958) chac	k here ▶ □ and	13,134	20	13,107
ces		complete lines 27 through 29, and lines 33 and	d 34.	_			
a	27	Unrestricted net assets			246,865	27	249,122
Ba	28	Temporarily restricted net assets			43,000		35,000
Net Assets or Fund Balances	29	Permanently restricted net assets			64,120	29	53,401
6		complete lines 30 through 34.		<u> </u>		-	
sts	30	Capital stock or trust principal, or current funds				30	
SS	31	Paid-in or capital surplus, or land, building, or ed				31	
Ž.	32	Retained earnings, endowment, accumulated in				32	
ž	33	Total net assets or fund balances			353,985		337,523
	34	Total liabilities and net assets/fund balances .		<u> </u>	367,119	34	350,630
							Form 990 (2016)

Form 9	90 (2016)				Pa	ge 12
Par	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				18.837
2	Total expenses (must equal Part IX, column (A), line 25)	2			50	5,298
3	Revenue less expenses. Subtract line 2 from line 1	3			-1	6,461
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			35	3,985
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					
	33, column (B))	10			33	37,524
Part	XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII					
					Yes	No
1	Accounting method used to prepare the Form 990: Cash Accrual Other		_ [
	If the organization changed its method of accounting from a prior year or checked "Other," ex	plain i	n			
	Schedule O.					
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		. {	2a	✓	
	If "Yes," check a box below to indicate whether the financial statements for the year were com-	piled o	or			
	reviewed on a separate basis, consolidated basis, or both:		- 1			Ì
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis		1			
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	1	. 1	
	separate basis, consolidated basis, or both:		- 1		1	
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis		1.			
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for or					
	of the audit, review, or compilation of its financial statements and selection of an independent accou		L	2c	✓	
	If the organization changed either its oversight process or selection process during the tax year, ex	plain i	n [

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.

За

Form **990** (2016)

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust. Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

► Attach to Form 990 or Form 990-EZ.

OMB No. 1545-0047

Open to Public Inspection

Name of the organization **Employer identification number** Literacy Council of Alaska Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) ☐ A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: An organization that normally receives: (1) more than 331/25% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 331/8% 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.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. 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. d 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 I, Type III, Type III functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations Provide the following information about the supported organization(s). (i) Name of supported organization 60 FIN (iii) Type of organization (iv) is the organization (v) Amount of monetary (vi) Amount of (described on lines 1-10 listed in your governing support (see other support (see document? above (see instructions)) instructions) instructions) Yes No (A) (B) (C) (D) (E)

Sched	ule A (Form 990 or 990-EZ) 2016						Page 2
Par		ations Descri	ibed in Secti	ons 170(b)(1)	(A)(iv) and 1	70(b)(1)(A)(vi	
	(Complete only if you checked the	ne box on line	5, 7, or 8 of	Part I or if the	e organizatio	n failed to qua	alify under
Card	Part III. If the organization fails to	o qualify unde	r the tests lis	ted below, pl	ease comple	te Part III.)	
	tion A. Public Support	· · · · · · · · · · · · · · · · · · ·				,	
	ndar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not						
	include any "unusual grants.")						
2		299,402	311,924	318,268	319,812	338,676	1,588,082
~	Tax revenues levied for the organization's benefit and either paid						
	to or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to the						
	organization without charge						
4	Total. Add lines 1 through 3	299,402	311,924	318,268	319,812	338,676	1,588,082
5	The portion of total contributions by	250,102	011,024	310,200	313,012	330,070	1,300,002
	each person (other than a			i			
	governmental unit or publicly						
	supported organization) included on						
	line 1 that exceeds 2% of the amount						
	shown on line 11, column (f)						
6	Public support. Subtract line 5 from line 4						1,588,082
	ion B. Total Support						
	ndar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
7	Amounts from line 4	299,402	311,924	318,268	319,812	338,676	1,588,082
8	Gross income from interest, dividends,						
	payments received on securities loans, rents, royalties and income from similar						
	sources			2 222	0.450	4 000	
9	Net income from unrelated business	206		2,986	2,159	4,338	9,689
	activities, whether or not the business			ļ			
	is regularly carried on			ľ			
10	Other income. Do not include gain or						
	loss from the sale of capital assets			ı.			
	(Explain in Part VI.)	204,202	211,244	194,653	116,210	145,823	922,132
11	Total support. Add lines 7 through 10						2,519,903
12	Gross receipts from related activities, etc.	•	•			12	922,132
13	First five years. If the Form 990 is for the	ne organization	's first, second	d, third, fourth,	or fifth tax ye	ear as a section	1 501(c)(3)
	organization, check this box and stop he	re					▶ □
	on C. Computation of Public Suppor						
14	Public support percentage for 2016 (line 6					14	63 %
15 16a	Public support percentage from 2015 Sch 331/3% support test—2016. If the organi					15	66.8 %
IVa	box and stop here. The organization qual						
b	331/3% support test—2015. If the organization						
-	this box and stop here. The organization						
17a	10%-facts-and-circumstances test—20			•			_
174	10% or more, and if the organization me	ets the "facts-	and-circumsta	nces" test ch	eck this hoy a	oa, or rob, and and ston here	Fyplain in
	Part VI how the organization meets the "						
	organization			_	•		· · > 🗀
b	10%-facts-and-circumstances test—20						
_	15 is 10% or more, and if the organiza						
	Explain in Part VI how the organization in	neets the "fact	s-and-circums	tances" test. 1	The organization	on qualifies as	a publicly
	supported organization						▶ □

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

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 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.)

Secti	on A. Public Support						
Calen	dar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
1	Gifts, grants, contributions, and membership fees						
_	received. (Do not include any "unusual grants.")						
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 business under section 513						
4	Tax revenues levied for the						
	organization's benefit and either paid						
	to or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to the						
_	organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons .						
	· · · · · · · · · · · · · · · · · · ·				-		
b	Amounts included on lines 2 and 3 received from other than disgualified						
	persons that exceed the greater of \$5,000				,		
	or 1% of the amount on line 13 for the year				!		
С	Add lines 7a and 7b		 				
8	Public support. (Subtract line 7c from						
	line 6.)						
Secti	on B. Total Support						
Calen	dar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
9	Amounts from line 6						
10a	- · · · · · · · · · · · · · · · · · · ·				ļ		
	payments received on securities loans, rents,		4				
	royalties and income from similar sources .			******		}	
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses acquired after June 30, 1975]	ļ		
	•	·	 				
C	Add lines 10a and 10b		<u> </u>				
11	Net income from unrelated business activities not included in line 10b, whether		1	ŀ			
	or not the business is regularly carried on	ĺ					
10	Other income. Do not include gain or		<u> </u>		<u> </u>		
12	loss from the sale of capital assets	1		1	1	1	
	(Explain in Part VI.)				İ		
13	Total support. (Add lines 9, 10c, 11,	·	1				
	and 12.)						
14	First five years. If the Form 990 is for the	he organizatio	n's first, secor	nd, third, fourth	, or fifth tax y	ear as a section	on 501(c)(3)
	organization, check this box and stop he	re		<u>.</u>			🕨 📋
Secti	on C. Computation of Public Suppo			=			
15	Public support percentage for 2016 (line						<u>%</u>
16	Public support percentage from 2015 Sc			<u></u>	<u></u>	16	%
	on D. Computation of Investment In				(0)	14-1	
17	Investment income percentage for 2016						<u>%</u>
18	Investment income percentage from 2019 331/3% support tests—2016. If the organ	o Schedule A,	ram III, IIne 1/		 nd line 15 is s	18	% and line
19a	17 is not more than 331/2%, check this box	and stop here	t check the bo	ion qualifies es	a uniplich envo	orted organizat	son . ► □
L	331/a% support tests—2015. If the organization						
b	line 18 is not more than 3312%, check this	hox and ston	here. The organ	nization qualifies	s as a publiches	supported organ	nization
20	Private foundation. If the organization d						
			·				

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.)

Secu	on A. All Supporting Organizations			
			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by			
	class or purpose, describe the designation. If historic and continuing relationship, explain.	1	ļ	L
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).			
20		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)	30	 	
·	purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.	3c	<u></u>	
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.	4a		
b		44	_	
	the organization have ultimate control and discretion in deciding whether to make grants to the foreign ported organization? If "Yes," describe in Part VI how the organization had such control and discretion pite being controlled or supervised by or in connection with its supported organizations.			
		4b	<u> </u>	ļ
С	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B)			
	to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.			
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).	5a		
b	Type I or Type II only. Was any added or substituted supported organization part of a class already			
	designated in the organization's organizing document?	5b		
C	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or			
	benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.	6	ļ	↓
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with			

If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
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.

Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7?

regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).

- **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.**
- c 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.
- Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below.
 - **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.)

8

9a

9c

10a

Part	V Supporting Organizations (continued)		<u></u>	age
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			<u> </u>
_	below, the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b 11c		
	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.	110	نــــا	
	- Type I supporting organizations		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 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		
Sect	on C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors 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 the supported organization(s).	1		
Secti	on D. All Type III 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, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		L.,
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.	3		
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 i	nstru	ction	s).
а	☐ The organization satisfied the Activities Test. Complete line 2 below.			,
þ	☐ 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	struct	ions).
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			
_	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 reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.	2b		
3 a	Parent of Supported Organizations. <i>Answer (a) and (b) below</i> . 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? <i>Provide details in Part VI</i> .	3a		
ь	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each		<u> </u>	
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Org	ani	zations				
1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E.						
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		<u> </u>			
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					
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):	1					
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-functionall instructions).	y int	tegrated Type III supporti	ng organization (see			

1 / 2	Amounts paid to perform activity that directly furthers are	exempt purposes		Current Year				
2 /								
		2 Amounts paid to perform activity that directly furthers exempt purposes of supported						
	organizations, in excess of income from activity	mpt putposes of suppo	rtea					
	Administrative expenses paid to accomplish exempt purp	nizations						
	Amounts paid to acquire exempt-use assets	oses of supported orga	THEUTION					
	Qualified set-aside amounts (prior IRS approval required)							
	Other distributions (describe in Part VI). See instructions.	- · · · · · · · · · · · · · · · · · · ·						
	Total annual distributions. Add lines 1 through 6.	·						
	Distributions to attentive supported organizations to which	h the organization is res	ponsive					
	(provide details in Part VI). See instructions.	. .	•					
9 [Distributable amount for 2016 from Section C, line 6							
10 L	Line 8 amount divided by Line 9 amount							
Sec	ction E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2016	(iii) Distributable Amount for 2016				
1 [Distributable amount for 2016 from Section C, line 6							
2 (Underdistributions, if any, for years prior to 2016 (reasonable cause required—explain in Part VI). See instructions.							
_ 3 E	Excess distributions carryover, if any, to 2016:							
a								
<u>b</u>								
	From 2013							
	From 2014							
	From 2015							
	Total of lines 3a through e							
	Applied to underdistributions of prior years			7				
	Applied to 2016 distributable amount Carryover from 2011 not applied (see instructions)							
	Remainder. Subtract lines 3g, 3h, and 3i from 3f.							
	Distributions for 2016 from			<u> </u>				
	Section D, line 7:			,				
	Applied to underdistributions of prior years			<u> </u>				
	Applied to 2016 distributable amount							
	Remainder. Subtract lines 4a and 4b from 4.							
	Remaining underdistributions for years prior to 2016, if							
	any. Subtract lines 3g and 4a from line 2. For result							
g	greater than zero, explain in Part VI. See instructions.							
а	Remaining underdistributions for 2016. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.							
a	Excess distributions carryover to 2017. Add lines 3							
8 E	Breakdown of line 7:							
а								
	Excess from 2013							
	Excess from 2014							
	Excess from 2015							
е Е	Excess from 2016			A (Form 990 or 990 F7) 2016				

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.)

SCHEDULE D (Form 990)

Supplemental Financial Statements

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

► Attach to Form 990.

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

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Open to Public Inspection

Name of	the organization		Employer identification number			
Literacy	Council of Alaska	92-6010100				
Part						
	Complete if the organization answered '					
		(a) Donor advised funds	(b) Funds and other accounts			
	Total number at end of year					
	Aggregate value of contributions to (during year)					
3 /	Aggregate value of grants from (during year) .					
	Aggregate value at end of year					
	Did the organization inform all donors and donor					
	unds are the organization's property, subject to th	_				
(Old the organization inform all grantees, donors, a only for charitable purposes and not for the benefication important to private heartiful.	fit of the donor or donor advisor, or f	or any other purpose			
		····	· · · · · · · L Yes L No			
Part		"You" on Form 000 Dort IV line 7				
4 ,	Complete if the organization answered '					
	Purpose(s) of conservation easements held by the Preservation of land for public use (e.g., recreating the control of the con	• • • • • • • • • • • • • • • • • • • •	f a historically important land area			
_	Protection of natural habitat		f a certified historic structure			
	Preservation of open space	reservation o	a certifica riistorio structuro			
	Complete lines 2a through 2d if the organization he	eld a qualified conservation contribution	on in the form of a conservation			
	easement on the last day of the tax year.		Held at the End of the Tax Year			
			2a			
	otal acreage restricted by conservation easement					
	Number of conservation easements on a certified h					
	Number of conservation easements included in	• •				
			· · 2d			
3 1	lumber of conservation easements modified, trans	sferred, released, extinguished, or terr	minated by the organization during the			
t	ax year ▶					
4 1	lumber of states where property subject to conse	rvation easement is located ▶				
	Does the organization have a written policy re					
	iolations, and enforcement of the conservation ea					
6 5	staff and volunteer hours devoted to monitoring, inspect	ting, handling of violations, and enforcing	conservation easements during the year			
	mount of expenses incurred in monitoring, inspecting	ig, handling of violations, and enforcing	conservation easements during the year			
	* \$	0(4)) -1	5			
	Ooes each conservation easement reported on line	2(d) above satisfy the requirements of	·			
			· · · · · · · · · · · · · · · · · · ·			
	n Part XIII, describe how the organization reports of alance sheet, and include, if applicable, the text of					
	latance sneet, and include, it applicable, the text of erganization's accounting for conservation easeme		ianciai statements that describes the			
Part I	<u> </u>		Other Similar Assets			
raiti	Complete if the organization answered					
1a ii	the organization elected, as permitted under SF					
	vorks of art, historical treasures, or other similar					
	public service, provide, in Part XIII, the text of the f					
-	the organization elected, as permitted under S					
٧	works of art, historical treasures, or other similar sublic service, provide the following amounts relat	assets held for public exhibition, ed				
(i	Revenue included on Form 990, Part VIII, line 1		> \$			
	i) Assets included in Form 990, Part X					
2 1	the organization received or held works of art,	, historical treasures, or other similar	r assets for financial gain, provide the			
	ollowing amounts required to be reported under S	· · · · · · · · · · · · · · · · · · ·				
	tevenue included on Form 990, Part VIII, line 1 .					
b A	ssets included in Form 990, Part X		> \$			

Par 3	Using the organization's acquisition,					
٠,	collection items (check all that apply):	accession, and on	nor records, criec	K arry or the for	owing that are a	significant use of its
а	☐ Public exhibition		d 🗆 Loan	or exchange pro	ograms	
b	☐ Scholarly research		e 🗌 Other			
C	☐ Preservation for future generations	3	-			
4	Provide a description of the organizat		ind explain how th	ney further the	organization's exe	mpt purpose in Part
	XIII.			-	_	
5	During the year, did the organization					
	assets to be sold to raise funds rather	than to be mainta	ined as part of the	organization's	collection?	☐ Yes ☐ No
Par	t IV Escrow and Custodial Arra					
	Complete if the organization	answered "Yes"	' on Form 990, F	Part IV, line 9,	or reported an a	mount on Form
	990, Part X, line 21.			- · · ·		
1a						
	included on Form 990, Part X?					☐ Yes ☐ No
ь	If "Yes," explain the arrangement in Pa	art XIII and comple	ete the following ta	ıble:		
				<u> </u>		Amount
C	Beginning balance				1c	
d	Additions during the year				1d	
е	Distributions during the year				10	
f	Ending balance			L	1f	
2a	Did the organization include an amour					<u></u>
	If "Yes," explain the arrangement in Pa	art XIII. Check here	e if the explanation	n has been prov	ided on Part XIII	<u> Ll</u>
Par	t V Endowment Funds.					
	Complete if the organization					
		(a) Current year	(b) Pnor year	(c) Two years bac	k (d) Three years ba	ck (e) Four years back
1a	Beginning of year balance	28,501	21,956	17,9	71 14,1	93 5,474
þ	Contributions	6,058	6,133	4,0	96 8	87 7,866
¢	Net investment earnings, gains, and				ĺ	
	losses	3,854	412	-1	11 2,8	91 853
d	Grants or scholarships					
е	Other expenditures for facilities and					
	programs					
f	Administrative expenses					
g	End of year balance	38,413		21,9		71 14,193
2	Provide the estimated percentage of t	_	d balance (line 1g	, column (a)) he	d as:	
a	Board designated or quasi-endowmer		%			
b	Permanent endowment	%				
C	Temporarily restricted endowment ▶	%				
_	The percentages on lines 2a, 2b, and					
3 a	Are there endowment funds not in the	e possession of th	e organization tha	at are held and	administered for 1	
	organization by:					Yes No
	(i) unrelated organizations					. 3a(i) ✓
	(ii) related organizations					. <mark>3a(ii) √</mark>
ь	If "Yes" on line 3a(ii), are the related or					. 3b ✓
4_	Describe in Part XIII the intended uses		n's endowment fu	ınds.		
Part						
	Complete if the organization					
	Description of property	(a) Cost or other	1 ' '	, ,	c) Accumulated	(d) Book value
	<u> </u>	(investme	sur) (O	ther)	depreciation	
1a	Land	·				<u></u>
þ	Buildings					
C	Leasehold improvements			108,137	73,646	34,491
d	Equipment			34,197	15,832	18,365
<u> </u>	Other	·		5,045	4,500	545
Total.	Add lines 1a through 1e. (Column (d) m	nust equal Form 99	90, Part X, column	(B), line 10c.) .	▶	53,401

Part VII	Investments – Other Securities. Complete if the organization answered "Yes" on I	Form 990, Part IV, line	11b. See Form 990, Part X, line 12.
•	(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation. Cost or end-of-year market value
1) Financia	I derivatives	<u>. </u>	
2) Closely-I	held equity interests		
-1 1			
	wment Fund	38.413	End of year market value
(B)		30,4131	Lita of your market value
(C)			······································
(D)			
(E)			
(F)			
<u>`(G)</u>			
<u>\-'</u> (H)			
	h) must over 5 Com 000 Part V and 40 km 10 h		
Part VIII	b) must equal Form 990, Part X, col. (B) line 12.)		
Part VIII	Investments—Program Related. Complete if the organization answered "Yes" on I	Form 990, Part IV, line	11c. See Form 990, Part X, line 13.
	(a) Description of investment	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)	b) must small form 000. Don't V and (0) has 10.) by		
	b) must equal Form 990, Part X, col. (B) line 13.)		
Part IX	Other Assets.	5 000 D 1 N/ 12	44 d O - Francisco Doub V Broad S
	Complete if the organization answered "Yes" on I	Form 990, Part IV, line	
	(a) Description		(b) Book value
(1)			
(2)			
(3)		· · · · · · · · · · · · · · · · · · ·	
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
otal. (Colui	mn (b) must equal Form 990, Part X, col. (B) line 15.) .		•
Part X	Other Liabilities. Complete if the organization answered "Yes" on I	Form 990 Part IV line	11e or 11f See Form 990 Part X
	line 25.	. J Joo, i ditiy iiild	
<u> </u>	(a) Description of liability (b) Book value	ie T	
(1) Federal in			
(2)	CONTO LAXOS		
(3)	·		
			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
otal. (Column (b	n) must equal Form 990, Part X, col. (B) line 25.) ▶		
. Liability for	uncertain tax positions. In Part XIII, provide the text of the fo	otnote to the organization'	s financial statements that reports the
	s liability for uncertain tax positions under FIN 48 (ASC 740).		

Page	•

Part	t XI	Reconciliation of Revenue per Audited Financial Stateme		Retur	n.
		Complete if the organization answered "Yes" on Form 990, I			
1.	Total	revenue, gains, and other support per audited financial statements		1	
2	Amou	ints included on line 1 but not on Form 990, Part VIII, line 12:			
а	Net u	nrealized gains (losses) on investments	2a		
b	Donat	ted services and use of facilities	2b	1	
C	Recov	venes of prior year grants	2c	1	
d		(Describe in Part XIII.)		1 1	
е		nes 2a through 2d		2e	
3	Subtra	act line 2e from line 1		3	
4		ints included on Form 990, Part VIII, line 12, but not on line 1:	. .		
а		tment expenses not included on Form 990, Part VIII, line 7b	4a	1 1	
ь		(Describe in Part XIII.)	4b	1	
C		nes 4a and 4b		4c	
5	Total	revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line	12.)	5	
Part	XII	Reconciliation of Expenses per Audited Financial Statem		er Ret	um.
		Complete if the organization answered "Yes" on Form 990, I			
1	Total	expenses and losses per audited financial statements		11	
2		ints included on line 1 but not on Form 990, Part IX, line 25:			
а		ted services and use of facilities	2a	1 1	
b		year adjustments	2b	1 1	
С	_	losses		1 1	
d		(Describe in Part XIII.)		1	
е		nes 2a through 2d	\	2е	
3		act line 2e from line 1		3	
4		nts included on Form 990, Part IX, line 25, but not on line 1:			
а		ment expenses not included on Form 990, Part VIII, line 7b	4a	1 1	
b		(Describe in Part XIII.)		1 1	
С		nes 4a and 4b		4c	
5	Total e	expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line	9 18.)	5	·
Part		Supplemental Information.			
Provid	le the d	lescriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	4; Part IV, lines 1b and 2b	; Part	V, line 4; Part X, line
2; Part	t XI, line	es 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part	to provide any additional ir	nformat	ion.
v. 4 T	To Supp	oort Programs			
x1, x11	Finan	cial Statements not audited for FY17 (2016).			
	. .				

Schedule D (Form 990) 2016 Page						
Part XII!	Supplemental Information (continued)					
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#### **SCHEDULE G** (Form 990 or 990-EZ)

#### Supplemental Information Regarding Fundraising or Gaming Activities

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

▶ Attach to Form 990 or Form 990-EZ.

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

OMB No 1545-0047

Department of the Treasury internal Revenue Service Name of the organization **Employer identification number Literacy Council of Alaska** 92-6010100 Part I Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part. Indicate whether the organization raised funds through any of the following activities. Check all that apply. Mail solicitations e Solicitation of non-government grants а Internet and email solicitations f Solicitation of government grants c Phone solicitations g Special fundraising events **d** In-person solicitations Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? ☐ Yes ☐ No b If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. (v) Amount paid to (or retained by) fundraiser listed in col. (i) (vi) Amount paid to (or retained by) organization (iii) Did fundraiser have (iv) Gross receipts (i) Name and address of individual (ii) Activity custody or control of contributions? or entity (fundraiser) from activity Yes No 1 2 8 9 10 Total List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

Ρ	art II	Fundraising Events. Con than \$15,000 of fundraising gross receipts greater tha	ng event contributions			
		g. 333 1333.pt. 2 g. 3223. 11.0	(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	21,812			21,812
_	3	Less: Contributions Gross income (line 1 minus line 2)	21,812			21,812
	4	Cash prizes	750			750
	5	Noncash prizes	2,500			2,500
sesue	6	Rent/facility costs	1,500			1,500
Direct Expenses	7	Food and beverages				
Direc	8	Entertainment				
	9	Other direct expenses .	279			279
	10 11	Direct expense summary. Ac Net income summary. Subtra				5,029 16,783
Pa	rt III	Gaming. Complete if the than \$15,000 on Form 9				reported more
Revenue			(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
æ	1	Gross revenue				
ses	2	Cash prizes				
Expenses	3	Noncash prizes				
Direct	4	Rent/facility costs				
_	5	Other direct expenses .				
	6	Volunteer labor	☐ Yes% ☐ No	☐ Yes % ☐ No	☐ Yes% ☐ No	
	7	Direct expense summary. Ad	ld lines 2 through 5 in c	olumn (d)		
	8	Net gaming income summar	y. Subtract line 7 from li	ine 1, column (d)	<u> </u>	
9	a is	ter the state(s) in which the or the organization licensed to co 'No," explain:	onduct gaming activities			🗌 Yes 🗍 No
10		ere any of the organization's g 'Yes," explain:	•		ated during the tax year	

5011600	18 G (1 G III 330 G 330-LZ) 2016		Page 3
11 12	Does the organization conduct gaming activities with nonmembers?	entity	Yes ☐ No Yes ☐ No
13	Indicate the percentage of gaming activity conducted in:	_	
а		13a	%
b	·	13b	%
14	Enter the name and address of the person who prepares the organization's gaming/special events book		
•	records:	J 4	
	Name ►		
	Address ▶		
15a	Does the organization have a contract with a third party from whom the organization receives garevenue?		Yes □ No
b	If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ and the		<u>_</u>
	amount of gaming revenue retained by the third party ▶ \$	-	
С	If "Yes," enter name and address of the third party:		
	11 700; Other harmound address of the third party.		
	Name ►	<del>-</del>	
	Address►		
16	Gaming manager information:		
	Name >		
	Gaming manager compensation ▶ \$		
	Description of services provided ►		
	☐ Director/officer ☐ Employee ☐ Independent contractor		
17	Mandatory distributions:		
а	Is the organization required under state law to make charitable distributions from the gaming process	ds to	
	retain the state gaming license?		Yes 🗌 No
b	Enter the amount of distributions required under state law to be distributed to other exempt organization spent in the organization's own exempt activities during the tax year > \$		
Part		(iii) and (	v). and
	Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additiona See instructions		
	***************************************		
	***************************************		
	***************************************		
<u>-</u>	***************************************		

#### SCHEDULE M (Form 990)

**Noncash Contributions** 

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

OMB No 1545-0047 20**16** 

Department of the Treasury Internal Revenue Service ► Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30. ► Attach to Form 990.

2016
Open to Public

Inspection

Name of the organization

Employer identification number

Litera	cy Council of Alaska			·····	<u> </u>	92-60101	00		
Par	Types of Property			(e)		<u> </u>	/-D		
		(a) Check if applicable	(b) Number of contributions or items contributed	Noncash con amounts repo Form 990, Part	orted on	Method o			_
1	Art-Works of art	<b> </b>		10111.000,1 at	viii, iiilo 1g	<u> </u>			
2	Art—Historical treasures			<del></del>					
3	Art—Fractional interests	<u> </u>							
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					<b> </b>			
17	Real estate—Other								
18	Collectibles					<del> </del>			
19 20	Food inventory					<del> </del>			
21	Drugs and medical supplies					<u> </u>			
22	Historical artifacts								
23	Scientific specimens					<del> </del>			
24	Archeological artifacts		<del></del>	<u> </u>		<del>                                     </del>	··		
25	Other ► ( Computers )	_	58			<del> </del>			
26	Other ► ( )		36						
27	Other ► ()								
28	Other ▶ (								
29	Number of Forms 8283 received	by the org	ganization during the tax y	ear for contribi	utions for				
	which the organization completed	Form 8283	, Part IV, Donee Acknowled	dgement		29			
								Yes	No
30a	During the year, did the organizat	ion receive	by contribution any prope	erty reported in	Part I, line:	s 1 through			
	28, that it must hold for at least to to be used for exempt purposes f			contribution, an			30a		1
b	If "Yes," describe the arrangemen	t in Part II.							
31	Does the organization have a	gift accep	stance policy that require	es the review	of any n	onstandard			   <u>-</u>
00-							31		<b>✓</b>
32a	Does the organization hire or use contributions?					en noncasn	00-	1	,
							32a		
33 33	If "Yes," describe in Part II.  If the organization didn't report an describe in Part II.	amount in	column (c) for a type of pro	perty for which	column (a)	is checked,		,	

Schedule M (	Form 990) (2016) Page 2
Part II	<b>Supplemental Information.</b> 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.
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	***************************************

#### 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.

20**16** 

Department of the Treasury Internal Revenue Service ► 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

Name of the organization	Employer identification number
Literacy Council of Alaska	92-6010100
Does 1/4	
Part V1	
#6 The Literacy Council of Alaska has members. Membership in the Literacy Council of Alaska is	ppen 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.	
#11 a The current 990 was completed and a copy given to each member of the Board of Directors du	ring a regular scheduled meeting.
b The Finance Committee reviews the 990 before it is filed.	
#15 a The Board of Directors, as independent persons, review and approve the compensation of the	Executive Director using current
comparable data from similar organizations as reflected in Board Approved minutes.	
#19 The governing documents of the Literacy Council of Alaska are available to the public. The do	cuments, including the bylaws,
Board of Director's meeting minutes, conflict of interest policy and financial statements are re	etained in a binder onsite at
the Literacy Council of Alaska. The binder is available to the public upon request.	
#12 c The Board of Directors reviews the conflict of interest policy annually at a regularly scheduled	hoard meeting
* 120 The Board of Sirector's reviews are conflict of friends, policy annually at a regularly seriedule.	. Joan a meeding.
Part X11	
#c A Finance Committee was established for this purpose.	
**C A i mance commutee was established for this purpose.	