Form **990**

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax 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.



OMB No. 1545-0047

► Go to www.irs.gov/Form990 for instructions and the latest information.

AF	For the	2021 calendar year, or tax year beginning JUL 1, 2021 and	d ending ਹ	UN 30, 2022		
B (Check if applicabl	C Name of organization		D Employer ident	tification	number
	Addre chang	LITERACY, INC.				
	Name chang	Doing business as LINC		13-391133	31	
	Initial return	Number and street (or P.0. box if mail is not delivered to street address)	Room/suite	E Telephone num	ıber	
	Final return		641	212-620-54	62	
	termir ated	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$		7,750,777.
	Amen return	NEW IORK, NI 10034		H(a) Is this a group	p return	
	Applic tion	F Name and address of principal officer. Roshk obkit		for subordinat	tes?	Yes 🗴 No
	pendi	SAME AS C ABOVE		H(b) Are all subordinate	es included?	Yes No
		empt status: 🗴 501(c)(3) 501(c) () ◀ (insert no.) 4947(a)(1)) or 527	If "No," attach	h a list. Se	e instructions
		WWW.LINCNYC.ORG		H(c) Group exemp		
		organization: X Corporation Trust Association Other	L Year	of formation: 1996	M State	of legal domicile: NY
Pa	art I	Summary				
e	1	Briefly describe the organization's mission or most significant activities:		LLDREN WITH		
Governance		FOUNDATIONAL LITERACY SKILLS BY EMPOWERING FAMILIES AND COM				
ern	2	Check this box if the organization discontinued its operations or dispo		1	1	26
202	3				3	26
ي ھ	4	Number of independent voting members of the governing body (Part VI, line 1b)			4 5	59
ties	5	Total number of individuals employed in calendar year 2021 (Part V, line 2a)			6	100
Activities &	6	Total number of volunteers (estimate if necessary)			<u>о</u> 7а	0.
Ac	/ a	Total unrelated business revenue from Part VIII, column (C), line 12			7a 7b	0.
		Net unrelated business taxable income from Form 990-T, Part I, line 11	·····	Prior Year		Current Year
	8	Contributions and grants (Part VIII, line 1h)		3,843,842		6,508,013.
Revenue	9			22,16		0.
ver	10	Program service revenue (Part VIII, line 2g) Investment income (Part VIII, column (A), lines 3, 4, and 7d)		-1,304		26,840.
Be	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		35,000		181,310.
		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		3,899,705		6,716,163.
		Grants and similar amounts paid (Part IX, column (A), lines 1-3)			0.	0.
		Benefits paid to or for members (Part IX, column (A), line 4)		(0.	0.
S	45	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		2,681,012	2.	3,416,450.
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)		35,000	0.	0.
be	. ь	Total fundraising expenses (Part IX, column (D), line 25)				
ŵ	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		833,643	3.	1,064,178.
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		3,549,655	5.	4,480,628.
	19	Revenue less expenses. Subtract line 18 from line 12		350,050	0.	2,235,535.
Do Se			Ве	ginning of Current Yea	ar	End of Year
sets	20	Total assets (Part X, line 16)		4,595,330	0.	8,106,270.
tAs	21	Total liabilities (Part X, line 26)		784,841	1.	2,088,700.
Net Assets or	22	Net assets or fund balances. Subtract line 21 from line 20		3,810,489	9.	6,017,570.
Pa	art II	Signature Block				
		Ities of perjury, I declare that I have examined this return, including accompanying schedul			my knowle	dge and belief, it is
true	, correc	t, and complete. Declaration of preparer (other than officer) is based on all information of w	vhich preparer	has any knowledge.		
		Signature of officer		Date		

Sign	Signature of officer		Date		
Here	Type or print name and title				
	Print/Type preparer's name	Preparer's signature	Date	Check PTIN	
Paid	ALEXANDER LAZZARUOLO	Alexander Lazzaruolo	4/28/2023	self-employed P01775353	
Preparer	Firm's name 🕒 CONDON O'MEARA MCGINTY a		Firm's	EIN 13-3628255	
Use Only	Firm's address ONE BATTERY PARK PLAZA,	7TH FL.		-	
	NEW YORK, NY 10004		Phone	eno.212-661-7777	
May the I	RS discuss this return with the preparer shown abo	ove? See instructions		X Yes N	No
				000	

132001 12-09-21 LHA For Paperwork Reduction Act Notice, see the separate instructions.

_	990 (2021) LITERACY, INC. t III Statement of Program Service Accomplishments	13-3911331	Page
a	Check if Schedule O contains a response or note to any line in this Part III		X
	Briefly describe the organization's mission:		·····
	SEE SCHEDULE 0.		
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?	ΓY	es X No
3	If "Yes," describe these new services on Schedule O. Did the organization cease conducting, or make significant changes in how it conducts, any program services?		es X No
	If "Yes," describe these changes on Schedule O.		
ł	Describe the organization's program service accomplishments for each of its three largest program services, as Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to other revenue, if any, for each program service reported.		
4a	(Code:) (Expenses \$3,680,440. including grants of \$) (Revelop CHILDREN WITH FOUNDATIONAL LITERACY SKILLS	nue\$	
	ESSENTIAL FOR ACADEMIC ACHIEVEMENT BY EMPOWERING FAMILIES AND		
	MOBILIZING THE COMMUNITY.		
	LINC MOBILIZED MORE THAN 100 COMMUNITY PARTNERS, INCLUDING LIBRARIES,		
	TO DELIVER 235 READING EVERYWHERE PROGRAMS AND 145 PARENT ENGAGEMENT PROGRAMS AND WORKSHOPS. WE ALSO GRADUATED 83 PARENTS IN OUR VERY		
	INVOLVED PARENT (VIP) ACADEMY. NEARLY 80 VIPS VOLUNTEERED TO SUPPORT		
	134 EVENTS IN THE COMMUNITY.		
	<u></u>		
4b	(Code:) (Expenses \$ including grants of \$) (Reve	nue \$	
4c	(Code:) (Expenses \$ including grants of \$) (Reve	nue \$	
4d	Other program services (Describe on Schedule O.)		
	(Expenses \$ including grants of \$) (Revenue \$)	
	(Expenses \$ including grants of \$) (Revenue \$ Total program service expenses 3,680,440.)	

Form	990 (2021) LITERACY, INC. 13-39113	31	Р	age 3
Par	t IV Checklist of Required Schedules		-	
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	х	
2	Is the organization required to complete Schedule B. Schedule of Contributors? See instructions	2	Х	
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		x
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		x
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	· ·		
J		5		x
6	similar amounts as defined in Rev. Proc. 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			x
_	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		x
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10	Х	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X,			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	х	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			
~	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	х	
^	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			
Ū		11c		x
ام	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII 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			
u		444		x
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		x
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	Х	
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		x
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		x
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		x
b	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		x
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
-	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		x
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		x
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			<u> </u>
17		47		x
40	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		<u> </u>
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines		v	
	1c and 8a? If "Yes," complete Schedule G, Part II	18	X	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		X
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		x
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		<u> </u>
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes." complete Schedule I. Parts I and II	21		X
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Form	990 (2021) LITERACY, INC. 13-39113	31	Р	age 4
Pa	TIV Checklist of Required Schedules (continued)			
			Yes	No
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		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No," go to line 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		<u> </u>
С	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		┝──
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		<u> </u>
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		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			x
00	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV,			
-	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If</i>	00-		x
h	"Yes," complete Schedule L, Part IV	28a 28b		X
	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	200		
C	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If	28c		x
29	"Yes," complete Schedule L, Part IV Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	x	<u> </u>
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation	25		<u> </u>
00		30		x
31	contributions? <i>If</i> "Yes," <i>complete Schedule M</i> Did the organization liquidate, terminate, or dissolve and cease operations? <i>If</i> "Yes," <i>complete Schedule N, Part I</i>	31		x
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
02	Schedule N, Part II	32		x
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		x
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		x
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
	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		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		x
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?			
	Note: All Form 990 filers are required to complete Schedule O	38	Х	
Pa	t V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V	<u></u>		
			Yes	No
	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a 2	-		
		<u> </u>		
с	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c	X	
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	form 990 (2021) LITERACY, INC.			13-391133	1	P	age 5
Par	Part V Statements Regarding Other IRS Filings and Tax Compliance (cont	tinued)					
						Yes	No
2a	2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statement						
	filed for the calendar year ending with or within the year covered by this return		2a	59			
b	b If at least one is reported on line 2a, did the organization file all required federal employment ta	ıx returi	ns?		2b	Х	
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. See instr	ruction	s				
3a	3a Did the organization have unrelated business gross income of \$1,000 or more during the year?	•			3a		X
b	b If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Sch	hedule	0		Зb		
	4a At any time during the calendar year, did the organization have an interest in, or a signature or						
	financial account in a foreign country (such as a bank account, securities account, or other fina	ancial a	account)	?	4a		x
b	b If "Yes," enter the name of the foreign country						
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Finar	ncial A	ccounts	(FBAR).			
5a	5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax y	/ear?			5a		x
b					5b		X
с		5c					
	6a Does the organization have annual gross receipts that are normally greater than \$100,000, and						
	any contributions that were not tax deductible as charitable contributions?				6a		x
b	b If "Yes," did the organization include with every solicitation an express statement that such cor						
~	were not tax deductible?		•		6b		
7							
'a		and cor	vices nro	vided to the navor?	7a		x
					7b		
					- 10		
С			•		7-		x
-	to file Form 8282?		1 1		7c		
d	,		7d		7-		
e					7e	<u> </u>	<u> </u>
f					7f	N/A	
g					7g	N/A N/A	
h				a Form 1098-0?	7h	N/A	
8				NT / 3			
				N/A	8		
9							
а				/ -	9a		
b		on?		N/A	9b		
10		-	і I				
а	· · · · · · · · · · · · · · · · · · ·	Α	10a		-		
b	b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities		10b		-		
11							
		Α	11a				
b							
	amounts due or received from them.)		11b				
	12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu o		1 1		12a		L
b	b If "Yes," enter the amount of tax-exempt interest received or accrued during the year	Α	12b				
13							
а	a Is the organization licensed to issue qualified health plans in more than one state?			N/A	13a		
	Note: See the instructions for additional information the organization must report on Schedule						
b	b Enter the amount of reserves the organization is required to maintain by the states in which the						
	organization is licensed to issue qualified health plans		13b				
С	c Enter the amount of reserves on hand		13c				
14a	14a Did the organization receive any payments for indoor tanning services during the tax year?				14a	<u> </u>	x
b	b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on S	Schedu	le O		14b		
15						1	
	excess parachute payment(s) during the year?				15		x
	If "Yes," see the instructions and file Form 4720, Schedule N.						
16		estment	t income	?	16		x
	If "Yes," complete Form 4720, Schedule O.						
17		jage in	any				
	activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953			N/A	17	1	
	If "Yes," complete Form 6069.						
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				-			·

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^{2021.05080} LITERACY, INC.

Form	990 (2021) LITERACY, INC. 13-391			age 6
Par	t VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for	or a "No" i	respor	ise
	to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions.			
	Check if Schedule O contains a response or note to any line in this Part VI			X
Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	26		
	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 on Schedule O.			
b	Enter the number of voting members included on line 1a, above, who are independent 1b	26		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
	officer, director, trustee, or key employee?	2		х
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors, trustees, or key employees to a management company or other person?	3		х
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?			x
5	Did the organization become aware during the year of a significant diversion of the organization's assets?			x
6	Did the organization have members or stockholders?			x
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			
	more members of the governing body?	7a		x
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			
	persons other than the governing body?	7b		x
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
-	The governing body?	8a	х	
b.	Each committee with authority to act on behalf of the governing body?		х	
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? <i>If "Yes," provide the names and addresses on Schedule O</i>	9		x
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)		1	
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		x
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?		х	
	Describe on Schedule O the process, if any, used by the organization to review this Form 990.			
	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	х	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?		х	
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes." describe			
-	on Schedule O how this was done	12c	х	
13	Did the organization have a written whistleblower policy?		х	
14	Did the organization have a written document retention and destruction policy?		х	
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?			
а	The organization's CEO, Executive Director, or top management official	15a	х	
	Other officers or key employees of the organization		х	
~	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
iou	taxable entity during the year?	16a		x
h	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			
~	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed \blacktriangleright^{NY}			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)	(3)s only)	availa	hle
10	for public inspection. Indicate how you made these available. Check all that apply.	(0)0 0113)	avana	010
	X Own website X Another's website X Upon request Other (explain on Schedule O)			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy,	and finan	cial	
13	statements available to the public during the tax year.	and mall	oidi	
20	State the name, address, and telephone number of the person who possesses the organization's books and records			
20	State the name, address, and telephone number of the person who possesses the organization's books and records SHARI LEVINE - 212-620-5462			
	5030 BROADWAY, 641, NEW YORK, NY 10034			
132000	3 12-09-21	Form	1 990	(2021)
102000	6	1011		(2021)
104	28 152490 K4H02M 2021.05080 LITERACY, INC.		K4	н02

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Form 990 (2	2021) LITERACY, INC.	13-3911331	Page 7
Part VII	Compensation of Officers, Directors, Trustees, Key Employees, Highest Cor	npensated	
	Employees, and Independent Contractors		
	Check if Schedule O contains a response or note to any line in this Part VII		
Section A.	Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees		
1a Comple	te this table for all persons required to be listed. Report compensation for the calendar year ending w	ith or within the organizatior	ı's tax year.
	ll of the organization's current officers, directors, trustees (whether individuals or organizations), rega columns (D), (E), and (F) if no compensation was paid.	ardless of amount of comper	isation.

• List all of the organization's current key employees, if any. See the 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, Form 1099-MISC, and/or box 1 of Form 1099-NEC) 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.

See the instructions for the order in which to list the persons above.

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

(A)	(B)			(C)			(D)	(E)	(F)
Name and title	Average	(do	not c		ition		200	Reportable	Reportable	Estimated
	hours per	box	, unles	ss pe	rson i	s both	n an	compensation	compensation	amount of
	week		cer an	id a d	lirecto	or/trus T	tee)	from	from related	other
	(list any	ector						the	organizations	compensation
	hours for	or di	ee			ated		organization	(W-2/1099-MISC/	from the
	related	ustee	trust		e	bens		(W-2/1099-MISC/	1099-NEC)	organization
	organizations below	ual tr	ional		ploye	t com		1099-NEC)		and related organizations
	line)	ndividual trustee or director	nstitutional trustee	Officer	Key employee	Highest compensated employee	Former			organizations
(1) CARLA GODOY	40.00	_	_			<u> </u>				
DIRECTOR OF ADVANCEMENT						х		126,035.	0.	19,614.
(2) SHARI LEVINE	40.00									
EXECUTIVE DIRECTOR				Х				109,826.	0.	17,437.
(3) EMILY GERTZ	40.00									
DIRECTOR OF STRATEGIC INTIATIVE						X		107,873.	0.	16,999.
(4) EMMANUEL J NOVY	40.00									
DIRECTOR OF PROGRAMS						x		103,323.	0.	16,076.
(5) CARLOS RODRIGUEZ	2.00									
CHAIR		Х		Х				0.	0.	0.
(6) MARY FRATTO ROWE	2.00									
VICE CHAIR		Х		Х				0.	0.	0.
(7) ROBERT SPIERER	2.00									
SECRETARY		Х		Х				0.	0.	0.
(8) KOSHA UDANI	2.00									
TREASURER		Х		Х				0.	0.	0.
(9) MIMI LEVIN LIEBER (IN MEMORIAM)	2.00									
FOUNDER		Х						0.	0.	0.
(10) TRACY DOCKRAY	2.00									
DIRECTOR		Х						0.	0.	0.
(11) CARL FOLTA	2.00									
DIRECTOR		Х						0.	0.	0.
(12) JOHN GALISKI (CHAIR, AUDIT COMM	2.00									
DIRECTOR		Х						0.	0.	0.
(13) JOHN HALLEY	2.00									
DIRECTOR		Х						٥.	0.	0.
(14) JORDAN HALPERN-LEISTNER	2.00									
DIRECTOR		Х						0.	0.	0.
(15) HELENE JAFFE	2.00									
DIRECTOR		Х						0.	0.	0.
(16) JACQUELINE KAIKO	2.00									
DIRECTOR		х						0.	0.	0.
(17) NAHID LAKHANI	2.00									
DIRECTOR		Х						0.	0.	0.
										Game 990 (0001)

132007 12-09-21

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Form 990 (2021) LITERACY, INC	•								13-3911	1331		Pa	age 8
Part VII Section A. Officers, Directors, Trust	ees, Key Emj	ploy	ees,	anc	d Hig	ghes	st C	ompensated Employee	s (continued)				
(A)	(B)			(0	C)			(D)	(E)			(F)	
Name and title	Average	(do					200	Reportable	Reportable		Es	timate	ed
	hours per	box	, unle	ss per	rson i	s both	n an	compensation	compensation		am	nount	of
			cer ar I	id a d	irecto	or/trus	tee)	from	from related			other	
		ector						the	organizations			pensa	
		or di	ee			ated		°	•	/		om the	
		ustee	trust		æ	bens			1099-NEC)		•	anizati	
	•	ual tr	tional		ploye	t com		1099-NEC)					
	line)	ndivid	nstituf	officer	ey em	mploy	ormei				orge	Inzan	0113
(18) DAN LEE	2.00	-			×	1 0	<u> </u>			+			
DIRECTOR		х						0.		0.			٥.
(19) JAMES E. LIEBER	2.00												
DIRECTOR		х						0.		٥.			٥.
(20) PAT MITCHELL	2.00												
DIRECTOR		Х						0.		٥.			٥.
(21) ANDREA NEWBORN	2.00	1											
		Х						0.		0.			0.
	2.00	-											
		Х						0.		0.			0.
	2.00	-											
	2 00	X						0.		0.			٥.
	2.00							0					0.
	2 00	^						0.		<u>.</u>			
	2.00	x						0		0			0.
	2.00							·.		<u> </u>			<u> </u>
DIRECTOR		x						0.		٥.			0.
1b Subtotal								447,057.		0.		70,	126.
								0.		0.			٥.
								447,057.		0.		70,	126.
							o re	eceived more than \$100.	000 of reportable				
						,		,					4
· · · ·												Yes	No
3 Did the organization list any former officer,	director, trust	ee, k	key e	empl	loye	e, or	hig	hest compensated empl	oyee on	ſ			
line 1a? If "Yes." complete Schedule J for su	ich individual	·	-	·			0			- [3		х
Name and title Average week (list array of the second ar													
Now Service Down Service points and mathematical and mathema						4		х					
Name and tile Average here were were block and developed and the second and the compensation from the organization organizations were as the second block and developed and the second and the second and the compensation from the organization (W-2/1008-MISC/ 1009-NEC) Reportable compensation from related organizations (W-2/1008-MISC/ 1009-NEC) Reportable compensation from related organizations (W-2/1008-MISC/ 1009-NEC) Reportable compensation from related organizations (W-2/1008-MISC/ 1009-NEC) Reportable compensation from related organizations (W-2/1008-MISC/ 1009-NEC) Reportable compensation from related organizations (W-2/1008-MISC/ 1009-NEC) Reportable compensation from related organizations (W-2/1008-MISC/ 1009-NEC) Reportable compensation from related organization (W-2/1008-MISC/ 1009-NEC) Reportable compensation from related organization from related organization from relation from related organization from relation from relatio													
rendered to the organization? If "Yes." com	olete Schedul	e J fe	or sı	ich i	oers	on .					5		Х
1 Complete this table for your five highest cor	npensated inc	depe	nder	nt co	ontra	acto	rs th	hat received more than \$	100,000 of compe	nsati	on fro	m	
the organization. Report compensation for t	he calendar y	ear e	endir	ng w	rith c	or wi	thin	the organization's tax ye	ear.				
.,	addraaa								orgiona	0	(C		~
	address						_	Description of s	ervices		Sinber	Isation	<u></u>
	00232							CONCILL WANT				186	503
· · · · ·	50252						-	CONSULTANT				100,	593.
	3104							CONSULTANT				150	000.
· · ·													
								CONSULTANT				145.	304.
												,	
2 Total number of independent contractors (in	oluding but a	otlin	nitor	1 + 0 -	thee		tod	abovo) who received me	are then				
\$100,000 of compensation from the organiz	ation 🕨		me	1 10			ied	above, who received mo					
SEE PART VII, SECTION A CONTINU	ATION SHEE	TS	_	_	_	_	_			ſ	Form	990 (2	2021)
132008 12-09-21													

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Form 990 LITERACY, INC	2.								13-39113	331
Part VII Section A. Officers, Directors, Tru	stees, Key En	nplo	yee	s, a	nd H	ligh	est (Compensated Employe	es (continued)	
(A)	(B)				C)			(D)	(E)	(F)
Name and title	Average							Reportable	Reportable	Estimated
	hours	(cl	(check all that ap			app	ly)	compensation	compensation	amount of
	per week					9		from the	from related organizations	other compensation
	(list any	ctor				ploye		organization	(W-2/1099-MISC)	from the
	hours for	r dire				ted en		(W-2/1099-MISC)	,	organization
	related	stee o	rustee			oen sat				and related
	organizations	ıal tru	onal t		ploye	com				organizations
	below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(27) RON RENTEL	2.00	-	-	0	×	<u> </u>	Ē			
DIRECTOR	2.00	х						0.	0.	0.
(28) ANN SHORT	2.00									
DIRECTOR		х						0.	0.	0.
(29) ANDREW SPRING	2.00									
DIRECTOR		х						٥.	0.	0.
(30) STEPHANIE YOUNG	2.00									
DIRECTOR		х						0.	0.	0.
						-				
							L			
				_	\vdash					
	1				I	1				
Total to Part VII, Section A, line 1c										
								1		

132201 04-01-21

			2021) LITERACY,					13-391133	1 Page 9
Pa	rt V	<u>/ </u>							
			Check if Schedule O contain	s a response	or note to any line		(P)	(0)	
						(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
ς Ω	1	а	Federated campaigns	1a					
Contributions, Gifts, Grants and Other Similar Amounts			Membership dues						
D B			Fundraising events		607,588.				
lifts ar A			Related organizations						
s, G milå			Government grants (contribution		1,962,572.				
rsi		f	All other contributions, gifts, grants,	and					
but			similar amounts not included above	1f	3,937,853.				
dO		g	Noncash contributions included in lines 1a-1	f 1g \$	59,495.				
о е		h	Total. Add lines 1a-1f		. <u></u>	6,508,013.			
					Business Code				
e	2	а							
ervi		b							
n S /eni		С							
grar Re∖		d							
Program Service Revenue		e 4							
-			All other program service revenue Total. Add lines 2a-2f						
	3	g	Investment income (including div						
	Ŭ		other similar amounts)			368.			368
	4		Income from investment of tax-ex						
	5		Royalties	-	1				
				(i) Real	(ii) Personal				
	6	а	Gross rents 6a						
		b	Less: rental expenses 6b						
		с	Rental income or (loss) 6c						
		d	Net rental income or (loss)		►				
	7	а	Gross amount from sales of	(i) Securities	(ii) Other				
			assets other than inventory 7a	939,388.					
		b	Less: cost or other basis						
anu			and sales expenses 7b	912,916.					
evenue			Gain or (loss) 7c	26,472.	-	0.6 450			0.6 470
r, R			Net gain or (loss)		····· ►	26,472.			26,472.
Other R	8		Gross income from fundraising event including \$ 607,58						
0			contributions reported on line 1c						
			Part IV, line 18	·	121,698.				
			Less: direct expenses		· · · ·				
			Net income or (loss) from fundrai	·····	· · · · · · · · · · · · · · · · · · ·	0.			
			Gross income from gaming activi			-			
			Part IV, line 19						
		b	Less: direct expenses						
			Net income or (loss) from gaming		►				
	10	а	Gross sales of inventory, less ret	urns					
			and allowances						
		b	Less: cost of goods sold						
		с	Net income or (loss) from sales o	f inventory	····· •				
S					Business Code	104 015			
Miscellaneous Revenue	11		ERTC		900099	181,310.			181,310.
llan 'ent		b							
Bev		c	All all and a second second						
Ϊ			All other revenue			181,310.			
	12	e	Total. Add lines 11a-11d			6,716,163.	0.	0.	208,150.
	9 12-0	00 4				-,0,100.			Form 990 (2021

LITERACY, INC.

Check if Schedule O contains a respons	(A)	(B)	(C)	(D)
not include amounts reported on lines 6b, , 8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
Grants and other assistance to domestic organizations				
and domestic governments. See Part IV, line 21				
Grants and other assistance to domestic				
individuals. See Part IV, line 22				
Grants and other assistance to foreign				
organizations, foreign governments, and foreign				
individuals. See Part IV, lines 15 and 16				
Benefits paid to or for members				
Compensation of current officers, directors,				
trustees, and key employees	153,745.	127,102.	11,037.	15,6
Compensation not included above to disqualified				
persons (as defined under section 4958(f)(1)) and				
persons described in section 4958(c)(3)(B)				
Other salaries and wages	2,782,814.	2,300,565.	199,773.	282,4
Pension plan accruals and contributions (include				
section 401(k) and 403(b) employer contributions)	39,578.	32,719.	2,841.	4,0
Other employee benefits	204,902.	169,392.	14,711.	20,7
Payroll taxes	235,411.	194,615.	16,900.	23,8
Fees for services (nonemployees):	, ,	, .		
a Management				
	64,655.	45,270.	9,190.	10,1
Accounting	01,000.	10,2,0.	5,150.	10,1
Professional fundraising services. See Part IV, line 17				
Investment management fees				
g Other. (If line 11g amount exceeds 10% of line 25,	401 245	242 057	60 904	77 4
column (A), amount, list line 11g expenses on Sch 0.)	491,245.	343,957.	69,824.	77,4
Advertising and promotion	60 195	40 422	4 202	6 4
Office expenses	60,185.	49,423.	4,292.	6,4
Information technology				
Royalties				
Occupancy	87,411.	73,317.	5,091.	9,0
Travel				
Payments of travel or entertainment expenses				
for any federal, state, or local public officials				
Conferences, conventions, and meetings				
Interest				
Payments to affiliates				
Depreciation, depletion, and amortization	715.	591.	51.	
Insurance	14,718.	12,168.	1,056.	1,4
Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If				
line 24e amount exceeds 10% of line 25, column (A),				
amount, list line 24e expenses on Schedule 0.)	294,496.	290,962.	1,973.	1,5
	30,646.	20,252.	1,762.	8,6
CONTRIBUTED BOOKS AND M	20,107.	20,232.	-,/02.	0,0
	20,107.	20,10/.		
All other expenses	4 400 600	2 600 440	220 501	101 0
Total functional expenses. Add lines 1 through 24e	4,480,628.	3,680,440.	338,501.	461,68
Joint costs. Complete this line only if the organization				
reported in column (B) joint costs from a combined				
educational campaign and fundraising solicitation.				

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Form 990 (2021)

LITERACY, INC.

Check if Schedule O contains a response or n	ote to any line	in this Part X			
			(A) Beginning of year		(B) End of year
Cash - non-interest-bearing			1,295,471.	1	3,709,687.
Savings and temporary cash investments	1,777,340.	2	1,472,799.		
Pledges and grants receivable, net			853,474.	3	2,210,725.
Accounts receivable, net			24,908.	4	88,197.
Loans and other receivables from any current					
trustee, key employee, creator or founder, sub					
controlled entity or family member of any of th	ese persons			5	
Loans and other receivables from other disqua	-				
under section 4958(f)(1)), and persons describ	-			6	
Notes and loans receivable, net				7	
Inventories for sale or use				8	
Duran side some some som at starfarmende starser			28,546.	9	39,710.
Land, buildings, and equipment: cost or other					
basis. Complete Part VI of Schedule D		24,381.			
Less: accumulated depreciation		24,024.	1,072.	10c	357.
Investments - publicly traded securities				11	
Investments - other securities. See Part IV, line			599,893.	12	570,169.
Investments - program-related. See Part IV, lin			13	•	
Intangible assets				14	
Other assets. See Part IV, line 11	14,626.	15	14,626.		
Total assets. Add lines 1 through 15 (must ed	4,595,330.	16	8,106,270.		
Accounts payable and accrued expenses	284,841.	17	2,088,700.		
Grants payable		18	· ·		
Deferred revenue		19			
Tax-exempt bond liabilities			20		
Escrow or custodial account liability. Complet				21	
Loans and other payables to any current or fo					
trustee, key employee, creator or founder, sub					
controlled entity or family member of any of th				22	
Secured mortgages and notes payable to unre	-			23	
Unsecured notes and loans payable to unrelat				24	
Other liabilities (including federal income tax,)					
parties, and other liabilities not included on lin					
of Schedule D			500,000.	25	0.
- • • • • • • • • • • • • • • • • • • •			784,841.	26	2,088,700.
Organizations that follow FASB ASC 958, cl			,		, ,
and complete lines 27, 28, 32, and 33.					
			2,357,778.	27	3,223,697.
N N N N N N N N N N			1,452,711.	28	2,793,873.
Organizations that do not follow FASB ASC			, , , -	20	, , -
-					
	le			20	
			3 810 489		6,017,570.
					8,106,270.
Cap Paio Ret Tota	d-in or capital surplus, or land, building, or ained earnings, endowment, accumulated	bital stock or trust principal, or current funds d-in or capital surplus, or land, building, or equipment fun ained earnings, endowment, accumulated income, or oth al net assets or fund balances	bital stock or trust principal, or current funds d-in or capital surplus, or land, building, or equipment fund ained earnings, endowment, accumulated income, or other funds al net assets or fund balances	bital stock or trust principal, or current funds d-in or capital surplus, or land, building, or equipment fund ained earnings, endowment, accumulated income, or other funds al net assets or fund balances	bital stock or trust principal, or current funds 29 d-in or capital surplus, or land, building, or equipment fund 30 ained earnings, endowment, accumulated income, or other funds 31 al net assets or fund balances 3,810,489.32

Form 990 (2021)

132011 12-09-21

	6,163. 0,628. 5,535. 0 489
1 Total revenue (must equal Part VIII, column (A), line 12) 6 , 71	0,628. 5,535.
	0,628. 5,535.
	0,628. 5,535.
	5,535.
2 Total expenses (must equal Part IX, column (A), line 25)	-
3 Revenue less expenses. Subtract line 2 from line 1 3 2,23	0 489
4 Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A)) 4 3,81	<u>,</u>
5 Net unrealized gains (losses) on investments52	8,454.
6 Donated services and use of facilities	
7 Investment expenses 7	
8 Prior period adjustments 8	
9 Other changes in net assets or fund balances (explain on Schedule O) 9	٥.
10 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,	
	7,570.
Part XII Financial Statements and Reporting	
Check if Schedule O contains a response or note to any line in this Part XII	
Ye	s No
1 Accounting method used to prepare the Form 990: Cash X Accrual Other	
If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.	
2a Were the organization's financial statements compiled or reviewed by an independent accountant?	X
If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a	
separate basis, consolidated basis, or both:	
Separate basis Consolidated basis Both consolidated and separate basis	
b Were the organization's financial statements audited by an independent accountant?	
If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis,	
consolidated basis, or both:	
X Separate basis Consolidated basis Both consolidated and separate basis	
c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit,	
review, or compilation of its financial statements and selection of an independent accountant?	
If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.	
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit	
Act and OMB Circular A-133? 3a	x
b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit	
or audits, explain why on Schedule O and describe any steps taken to undergo such audits	0 (0001)

Form **990** (2021)

Department of the Treasury Internal Revenue Service

(Form 990)

Total

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

Attach to Form 990 or Form 990-EZ.

► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047
2021
Open to Public Inspection

Nam	e of t	the organization						Employer	identification number
			ACY, INC.						13-3911331
Pa	rt I	Reason for Public (Charity Status.	(All organizations must c	omplete tl	nis part.) S	ee instructior	IS.	
The	organ	nization is not a private found	lation because it is: (I	For lines 1 through 12, cl	heck only	one box.)			
1		A church, convention of ch	urches, or associatio	on of churches described	in sectio	on 170(b)([.]	1)(A)(i).		
2		A school described in sect	ion 170(b)(1)(A)(ii). (Attach Schedule E (Form	ו 990).)				
3		A hospital or a cooperative)(b)(1)(A)(i	ii).		
4		A medical research organiz)(iii). Enter	the hospital's name.
•		city, and state:		,				<i>NI</i> -	,
5		An organization operated for	or the benefit of a co	lleae or university owned	l or operat	ed by a go	vernmental u	nit describe	ed in
Ū		section 170(b)(1)(A)(iv). (0							
6		A federal, state, or local go		nental unit described in	section 1	70(h)(1)(A)	(v)		
	X	An organization that norma	-					ne deneral i	oublic described in
•		section 170(b)(1)(A)(vi). (C	-		onna gov	Sminoritar		ie general j	
8		A community trust describe			нцу				
9		An agricultural research org			-	ed in coniu	unction with a	land-grant	college
5		or university or a non-land-				-		-	-
		university:	grant college of agric			name, ory	, and state of	the college	
10		An organization that norma	Illy receives (1) more	than 33 1/304 of its supp	ort from o	ontribution	ac momboret	in food and	d gross receipts from
10		activities related to its exen							
		income and unrelated busir							-
				(less section of reak) no		5565 acqui		Janization a	
44		See section 509(a)(2). (Col An organization organized a		ively to test for public est	foty Soo	agation El	$\Omega(a)(A)$		
11		v							numpered of one or
12		An organization organized a	-	-	-			•	
		more publicly supported or	-						Sheck the box on
-		lines 12a through 12d that	• •					-	airtina
а		Type I. A supporting orga	-	-	•	-			
		the supported organization			majority c		cors or truste		ipporting
h		organization. You must o	-		ion with it	o ou poorte	d organizatio	n(a) by bay	ina
b		_ Type II. A supporting org control or management or	-				•		-
		organization(s). You mus			ame perso	113 11141 00		ge the supp	Jonted
с		Type III functionally inte	-		in connec	tion with	and functiona	lly integrate	ad with
U		its supported organization	•					ily integrate	ja with,
d		Type III non-functionally						rted organi-	zation(s)
u	L	that is not functionally int						°.	
		requirement (see instruct	°	0 1	•		-	anallenin	7611633
•		Check this box if the orga							
е		functionally integrated, or					турет, туре	п, туре ш	
4	Ent	er the number of supported of	·						
u a		vide the following information	•	od organization(c)					
<u> </u>		(i) Name of supported	(ii) EIN	(iii) Type of organization	(iv) Is the org	anization listed	(v) Amount o	f monetary	(vi) Amount of other
		organization		(described on lines 1-10 above (see instructions))	Yes	ing document?	support (see ii	nstructions)	support (see instructions)
				above (see instructions))					

Schedule A	Form 990) 2021

Part II

LITERACY, INC.

13-3911331

Page **2**

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support **(a)** 2017 Calendar year (or fiscal year beginning in) 🕨 (b) 2018 (c) 2019 (d) 2020 (e) 2021 (f) Total 1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") 6,508,013 3,586,162. 3,833,859 3,948,046 3,843,842. 21,719,922. 2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf 3 The value of services or facilities furnished by a governmental unit to the organization without charge 3,833,859. 3,586,162, 3,948,046 3,843,842. 6,508,013, 21,719,922. 4 Total. Add lines 1 through 3 The portion of total contributions 5 by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11. column (f) 4,057,671. 17,662,251. 6 Public support. Subtract line 5 from line 4 Section B. Total Support <u>(e) 2</u>021 Calendar year (or fiscal year beginning in) (a) 2017 (b) 2018 (c) 2019 (d) 2020 (f) Total 3,586,162. 3,833,859, 3,948,046, 3,843,842. 6,508,013, 21,719,922. 7 Amounts from line 4 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, 676. 778 530 234 368 2,586. and income from similar sources 9 Net income from unrelated business activities, whether or not the business is regularly carried on 10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) 43,352 181,310, 224,662. 21,947,170. **11 Total support.** Add lines 7 through 10 175,270. **12** Gross receipts from related activities, etc. (see instructions) 12 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) 13 organization, check this box and stop here Section C. Computation of Public Support Percentage 80.48 14 % 14 Public support percentage for 2021 (line 6, column (f), divided by line 11, column (f)) 15 Public support percentage from 2020 Schedule A, Part II, line 14 81.41 15 % 16a 33 1/3% support test - 2021. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ► X b 33 1/3% support test - 2020. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10% -facts-and-circumstances test - 2021. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization b 10% -facts-and-circumstances test - 2020. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization 18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

Schedule A (Form 990) 2021

132022 01-04-22

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.)

Section A. Public Support		•		-		
Calendar year (or fiscal year beginning in) 🕨	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(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 per- formed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that						
are not an unrelated trade or bus-						
iness under section 513						
4 Tax revenues levied for the organ-						
ization'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 disgualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						
Section B. Total Support						
Calendar year (or fiscal year beginning in)	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b Unrelated business taxable income						
(less section 511 taxes) from businesses						
acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						
14 First 5 years. If the Form 990 is for th	ne organization's fi	rst, second, third,	fourth, or fifth tax	year as a section s	501(c)(3) organiza	ation,
check this box and stop here						
Section C. Computation of Publi	c Support Per	rcentage				
15 Public support percentage for 2021 (I	ine 8, column (f), d	livided by line 13,	column (f))		15	%
16 Public support percentage from 2020	Schedule A, Part	III, line 15			16	%
Section D. Computation of Inves	stment Income	e Percentage				
17 Investment income percentage for 20)21 (line 10c, colur	mn (f), divided by I	ine 13, column (f))		17	%
18 Investment income percentage from	2020 Schedule A,	Part III, line 17			18	%
19a 33 1/3% support tests - 2021. If the	organization did r				33 1/3%, and line	17 is not
more than 33 1/3%, check this box ar						
b 33 1/3% support tests - 2020. If the						, and
line 18 is not more than 33 1/3%, che						
20 Private foundation. If the organization						
132023 01-04-22						e A (Form 990) 2021
		16				- •

1

2

3a

Yes No

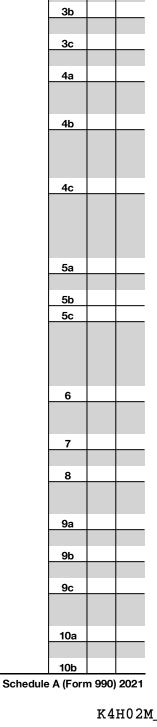
Part IV Supporting Organizations

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

Section A. All Supporting Organizations

- 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.
- 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).
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.
- 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.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- 4a Was any supported organization not organized in the United States ("foreign supported organization")? // "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.
- b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- **5a** Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes." answer lines 5b and 5c 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).
- 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?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- Did the organization provide support (whether in the form of grants or the provision of services or facilities) to 6 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.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If "Yes." complete Part I of Schedule L (Form 990).
- 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.
- b Did one or more disqualified persons (as defined on 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 disgualified person (as defined on 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.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 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.)

132024 01-04-21



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Par	rt IV Supporting Organizations (continued)			
			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 on lines 11b and			
	11c below, the governing body of a supported organization?	11a		
b	A family member of a person described on line 11a above?	11b		
с	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
	detail in Part VI.	11c		
Sec	tion B. Type I Supporting Organizations			
			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or			
-	more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers,			
	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 officers, 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 supported organization of the supported in in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,	2		
Sec	supervised, or controlled the supporting organization. tion C. Type II Supporting Organizations	2		
			Vee	Na
	Ware a majority of the argenization's directors or trustees during the tay year alog a majority of the directors		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			
Sec	the supported organization(s). tion D. All Type III Supporting Organizations	1		
000				
			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		
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 on line 2, above, 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			
0	supported organizations played in this regard.	3		
Sec	tion 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 instruction	ns).		
а	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
С	The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see	instructior	1 <u>s).</u>	
2	Activities Test. Answer lines 2a and 2b below.		Yes	No
а	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 on line 2a, above, 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 Parent of Supported Organizations. **Answer lines 3a and 3b below.**

a 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? *If* "Yes" or "No" provide details in **Part VI.**

b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? *If "Yes," describe in* **Part VI** *the role played by the organization in this regard.* 132025 01-04-22

3b | Schedule A (Form 990) 2021

3a

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	Check here if the organization satisfied the Integral Part Test as a qualify		•	Part VI). See instruction
	All other Type III non-functionally integrated supporting organizations mu	st complete S	Sections A through E.	
ection A	A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
l Net	short-term capital gain	1		
2 Rec	overies of prior-year distributions	2		
B Oth	er gross income (see instructions)	3		
Adc	l lines 1 through 3.	4		
5 Dep	preciation and depletion	5		
Por	tion of operating expenses paid or incurred for production or			
colle	ection of gross income or for management, conservation, or			
mai	ntenance of property held for production of income (see instructions)	6		
' Oth	er expenses (see instructions)	7		
B Adj	usted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
ction B	3 - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
I Agg	regate fair market value of all non-exempt-use assets (see			
inst	ructions for short tax year or assets held for part of year):			
a Ave	rage monthly value of securities	1 a		
b Ave	rage monthly cash balances	1b		
c Fair	market value of other non-exempt-use assets	1c		
d Tot	al (add lines 1a, 1b, and 1c)	1d		
e Dis	count claimed for blockage or other factors			
(exp	plain in detail in Part VI):			
	uisition indebtedness applicable to non-exempt-use assets	2		
Sub	otract line 2 from line 1d.	3		
Cas	h deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,			
see	instructions).	4		
i Net	value of non-exempt-use assets (subtract line 4 from line 3)	5		
i Mul	tiply line 5 by 0.035.	6		
' Rec	overies of prior-year distributions	7		
6 Min	imum Asset Amount (add line 7 to line 6)	8		
ction C	C - Distributable Amount			Current Year
I Adji	usted net income for prior year (from Section A, line 8, column A)	1		
	er 0.85 of line 1.	2		
Min	imum asset amount for prior year (from Section B, line 8, column A)	3		
	er greater of line 2 or line 3.	4		
	ome tax imposed in prior year	5		
	tributable Amount. Subtract line 5 from line 4, unless subject to			
	ergency temporary reduction (see instructions).	6		

Schedule A (Form 990) 2021

132026 01-04-22

Sche	dule A (Form 990) 2021 LITERACY, INC.				13-3911331	Page 7
Pa	rt V Type III Non-Functionally Integrated 509((a)(3) Supporting Orga	nizations (continu	ied)		
Sect	ion D - Distributions				Current Y	/ear
1	Amounts paid to supported organizations to accomplish exer	mpt purposes		1		
2	Amounts paid to perform activity that directly furthers exemp	t purposes of supported				
	organizations, in excess of income from activity			2		
3	Administrative expenses paid to accomplish exempt purpose	es of supported organizations	6	3		
4	Amounts paid to acquire exempt-use assets			4		
5	Qualified set-aside amounts (prior IRS approval required - pro	ovide details in Part VI)		5		
6	Other distributions (<i>describe in Part VI</i>). See instructions.			6		
7	Total annual distributions. Add lines 1 through 6.			7		
8	Distributions to attentive supported organizations to which the	ne organization is responsive				
	(provide details in Part VI). See instructions.	-		8		
9	Distributable amount for 2021 from Section C, line 6			9		
10	Line 8 amount divided by line 9 amount			10		
Sect	ion E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistribution Pre-2021	IS	(iii) Distributa Amount for	
1	Distributable amount for 2021 from Section C, line 6					
2	Underdistributions, if any, for years prior to 2021 (reason-					
	able cause required - explain in Part VI). See instructions.					
3	Excess distributions carryover, if any, to 2021					
а	From 2016					
b	From 2017					
c	From 2018					
d	From 2019					
е	From 2020					
f	Total of lines 3a through 3e					
	Applied to underdistributions of prior years					
	Applied to 2021 distributable amount					
i	Carryover from 2016 not applied (see instructions)					
i	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.					
4	Distributions for 2021 from Section D,					
	line 7: \$					
а	Applied to underdistributions of prior years					
	Applied to 2021 distributable amount					
	Remainder. Subtract lines 4a and 4b from line 4.					
	Remaining underdistributions for years prior to 2021, if					
	any. Subtract lines 3g and 4a from line 2. For result greater					
	than zero, explain in Part VI. See instructions.					
6	Remaining underdistributions for 2021. Subtract lines 3h					
	and 4b from line 1. For result greater than zero, explain in					
	Part VI. See instructions.					
7	Excess distributions carryover to 2022. Add lines 3j					
	and 4c.					
8	Breakdown of line 7:					
	Excess from 2017					
	Excess from 2018					
	Excess from 2019					
	Excess from 2020					
	Excess from 2021					

Schedule A (Form 990) 2021

Schedule A (Form 990) 2021 LITERACY, INC.	13-3911331	Page 8
Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 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, Sectior	n 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; Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any a (See instructions.)	; Part V, Section B, line 1e; Pa additional information.	art V,
SCHEDULE A, PART II, LINE 10, EXPLANATION FOR OTHER INCOME:		
MISCELLANEOUS		
2017 AMOUNT: \$ 43,352.		
ERTC		
2021 AMOUNT: \$ 181,310.		
132028 01-04-22 21	Schedule A (Form	990) 2021

Department of the Treasury

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. he latest information. OMB No. 1545-0047 **Open to Public** Inspection

	Go to www.irs.gov/Form990 for instructions and	1 tł

	Revenue Service Go to www.irs.gov/Forn	n990 for instructions and the latest information	ı.	Inspection
Nam	e of the organization LITERACY, INC.		Employer	identification number
Pa	· · · · · · · · · · · · · · · · · · ·	sed Funds or Other Similar Funds or A		
I UI	organization answered "Yes" on Form 990, Part IV,			
		(a) Donor advised funds	(b) Funds and	d other accounts
4	Total number at and of year			
1 2	Total number at end of year			
2	Aggregate value of grants from (during year)			
4	Aggregate value at end of year			
5	Did the organization inform all donors and donor advisors i		nds	
Ũ	are the organization's property, subject to the organization	5		Yes No
6	Did the organization inform all grantees, donors, and dono			
	for charitable purposes and not for the benefit of the dono			
	impermissible private benefit?		~	Yes No
Pa		organization answered "Yes" on Form 990, Part I	V, line 7.	
1	Purpose(s) of conservation easements held by the organization			
	Preservation of land for public use (for example, recr	eation or education) Preservation of a his	torically impor	tant land area
	Protection of natural habitat	Preservation of a ce	rtified historic	structure
	Preservation of open space			
2	Complete lines 2a through 2d if the organization held a qua	alified conservation contribution in the form of a c		
	day of the tax year.		Held	at the End of the Tax Year
а	Total number of conservation easements		2a	
b				
С	Number of conservation easements on a certified historic s		2c	
d	Number of conservation easements included in (c) acquire	-		
•	listed in the National Register		2d	
3	Number of conservation easements modified, transferred,	released, extinguished, or terminated by the orga	nization during	j the tax
4	year ► Number of states where property subject to conservation e	assement is located		
5	Does the organization have a written policy regarding the p			
5	violations, and enforcement of the conservation easements			Yes No
6	Staff and volunteer hours devoted to monitoring, inspectin			
•	>	3,		
7	Amount of expenses incurred in monitoring, inspecting, ha	Indling of violations, and enforcing conservation e	asements duri	ing the year
	► \$			0 ,
8	Does each conservation easement reported on line 2(d) ab	ove satisfy the requirements of section 170(h)(4)(I	3)(i)	
	and section 170(h)(4)(B)(ii)?			Yes No
9	In Part XIII, describe how the organization reports conserva-			
	balance sheet, and include, if applicable, the text of the for	otnote to the organization's financial statements t	hat describes [.]	the
	organization's accounting for conservation easements.	· · · · · · · · · · · · · · · · · · ·	<u></u>	
Pa	t III Organizations Maintaining Collections		Similar Ass	sets.
	Complete if the organization answered "Yes" on Fo			
1 a	If the organization elected, as permitted under FASB ASC	· · ·		
	of art, historical treasures, or other similar assets held for p	, ,	ance of public	
h.	service, provide in Part XIII the text of the footnote to its fir			
b	If the organization elected, as permitted under FASB ASC			
	art, historical treasures, or other similar assets held for pub	one exhibition, education, or research in idmerance	Se or hanning se	
	provide the following amounts relating to these items:		► ¢	
	(i) Revenue included on Form 990, Part VIII, line 1(ii) Assets included in Form 990, Part X			
2	If the organization received or held works of art, historical t	treasures or other similar assets for financial gain	···· · · <u>·</u>	
2	the following amounts required to be reported under FASE		, PIOVIDE	
а	Revenue included on Form 990, Part VIII, line 1	-	▶ \$	
	Assets included in Form 990, Part X			

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. 132051 10-28-21

Sche	dule D (Form 990) 2021 LITERACY , 1					13-391		P	age 2
Par	t III Organizations Maintaining C	ollections of Art	, Historical Tre	asures, or Oth	er Sim	ilar Asset	s (conti	nued)	
3	Using the organization's acquisition, accession	on, and other records	, check any of the f	ollowing that make	significa	nt use of its			
	collection items (check all that apply):								
а	Public exhibition	d	Loan or exc	hange program					
b	Scholarly research	е	Other						
с	Preservation for future generations								
4	Provide a description of the organization's co	ollections and explain	how they further th	e organization's ex	empt pu	rpose in Part	XIII.		
5	During the year, did the organization solicit o	r receive donations o	f art, historical treas	sures, or other simil	ar assets	; 			_
	to be sold to raise funds rather than to be ma						Yes		No
Par	t IV Escrow and Custodial Arran		te if the organizatio	n answered "Yes" (on Form	990, Part IV,	line 9, or		
	reported an amount on Form 990, Pa	rt X, line 21.							
1a	Is the organization an agent, trustee, custodi		•			_	_	_	-
	on Form 990, Part X?					L	Yes		No
b	If "Yes," explain the arrangement in Part XIII	and complete the foll	owing table:		_				
							Amoun	t	
С	Beginning balance					c			
d	Additions during the year								
е	Distributions during the year								
f	Ending balance				·····	f	7		٦
	Did the organization include an amount on Fe				• •	L	Yes		No
Par	If "Yes," explain the arrangement in Part XIII.								
ια	t V Endowment Funds. Complete i	(a) Current year	(b) Prior year	(c) Two years back		ee years back	(e) Fou	r voare	back
4.	Designing of year balance	1,452,711.	1,567,296.	., ,		.,077,008.	-		
1a	Beginning of year balance	2,946,000.				.,077,008. .,201,066.			
D	Contributions	2,540,000.	1,001,000.	1,400,550	· ·	.,201,000.	-	,005,	512.
C	Net investment earnings, gains, and losses								
a	Grants or scholarships				_				
е	Other expenditures for facilities	1,604,838.	1,205,585.	1,141,816		969,512.		968	100.
4	and programs	1,001,000.	1,205,505.	1,111,010	•	505,512.		, ,,	100.
1	Administrative expenses	2 793 873	1,452,711.	1 567 296	1	,308,562.	1	,077,	008
9 2	End of year balance Provide the estimated percentage of the curr				•	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	-	, • • • •	
2	Board designated or quasi-endowment	ent year end balance	%	ji field as.					
a b	Permanent endowment	%							
	Term endowment 100								
U	The percentages on lines 2a, 2b, and 2c sho	•							
39	Are there endowment funds not in the posse	· · · · ·	tion that are held ar	nd administered for	the oras	nization			
ou	by:	solori or the organizat			the orga	Inzation		Yes	No
	(i) Unrelated organizations						3a(i)		x
	(ii) Related organizations						3a(ii)		x
b	If "Yes" on line 3a(ii), are the related organiza								
4	Describe in Part XIII the intended uses of the								
Par	t VI Land, Buildings, and Equipm								
	Complete if the organization answere	d "Yes" on Form 990,	, Part IV, line 11a. S	ee Form 990, Part	X, line 10				
	Description of property	(a) Cost or ot	her (b) Cost	or other (c)	Accumu	lated	(d) Boo	k valu	е
	r	basis (investm	· · ·		depreciat		., 200		
1 a	Land								
b	Buildings								
	Leasehold improvements								
d	Equipment			24,381.	2	4,024.			357.
e	Other								
	Add lines 1a through 1e. (Column (d) must e		(. column (B). line 1	0c.)		🕨			357.
						Schedule	D (Forr	n 990)	2021

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Part VII Investments - Other Securities.			r ugo -
Complete if the organization answered "Yes" o	n Form 990, Part IV, line 1	1b. See Form 990, Part X, line 12.	
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end	-of-year market value
(1) Financial derivatives			
(2) Closely held equity interests			
(3) Other			
(A) INVESTMENTS IN U.S. TREASURY BILLS	570,169.	COST	
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)	570,169.		
Part VIII Investments - Program Related.	/ -]		
Complete if the organization answered "Yes" o	n Form 990, Part IV. line 1	1c. See Form 990, Part X. line 13.	
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end	-of-vear market value
(1)	(, ,	,
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX Other Assets.			
Complete if the organization answered "Yes" o		1d. See Form 990, Part X, line 15.	
	Description		(b) Book value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line	15.)		
Part X Other Liabilities.			
Complete if the organization answered "Yes" o	n Form 990, Part IV, line 1	1e or 11f. See Form 990, Part X, line 25.	
1. (a) Description of liability			(b) Book value
(1) Federal income taxes			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(<i>t</i>) (8)			
(9)			
	05.)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line	251	🕨	

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII

Schedule D (Form 990) 2021

132053 10-28-21

Sche	dule D (Form 990) 2021 LITERACY, INC.			13-3911331	Page 4
	t XI Reconciliation of Revenue per Audited Financial Stateme	nts With R	evenue per Re	turn.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.				
1	Total revenue, gains, and other support per audited financial statements			1	6,869,018.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains (losses) on investments	2a	-28,454.		
b	Donated services and use of facilities	2b	181,309.		
с	Recoveries of prior year grants				
d					
е	Add lines 2a through 2d			2e	152,855.
3	Subtract line 2e from line 1			3	6,716,163.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	. 4a			
b	Other (Describe in Part XIII.)	4b			
с	Add lines 4a and 4b			4c	0.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			5	6,716,163.
Pa	rt XII Reconciliation of Expenses per Audited Financial Stateme	ents With E	Expenses per R	leturn.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.				
1	Total expenses and losses per audited financial statements			1	4,661,937.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
а	Donated services and use of facilities	2a	181,309.		
b	Prior year adjustments	2b			
с	Other losses	2c			
d	Other (Describe in Part XIII.)				
е	Add lines 2a through 2d			2e	181,309.
3	Subtract line 2e from line 1			3	4,480,628.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	. 4a			
b	Other (Describe in Part XIII.)	4b			
с	Add lines 4a and 4b			4c	0.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)			5	4,480,628.
Pa	rt XIII Supplemental Information.				

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

PART V, LINE 4:

TEMPORARILY RESTRICTED NET ASSETS CONSIST OF CONTRIBUTIONS THAT ARE

RESTRICTED BY THE DONOR FOR A SPECIFIC PROJECT OR PURPOSE OR RELATE TO

FUTURE PERIODS.

132054 10-28-21

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SCHEDULE G	Suppleme	Supplemental Information Regarding Fundraising or Gaming Activities									
(Form 990)	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.								2021		
Department of the Treasury		Attach to Form 990 or Form 990-EZ.							Open to Public		
Internal Revenue Service		to www.irs.g	ov/Form990 for instr	uction	s and	the latest informati	on.		Inspection		
Name of the organization		INC						Employer id 13-39113	entification number		
Part I Fundrais	LITERACY, 1		he organization answe	ered "Y	es" or	Form 990, Part IV, I	ine 1				
required to	complete this part										
c Phone solici d In-person so 2 a Did the organization	tions email solicitations tations licitations on have a written o	r oral agreeme	e X Solicita f X Solicita g X Special	tion of tion of fundra (incluc	non-g gover aising ling of	overnment grants nment grants events ficers, directors, trus	tees,	or X Ye	s 🗌 No		
	-		ies (fundraisers) pursu	ant to	agreei	ments under which th	he fui	ndraiser is to b	e		
compensated at le	east \$5,000 by the	organization.				1	<u> </u>		1		
(i) Name and addres or entity (fund		(1	ii) Activity	or cor	Did raiser ustody ntrol of utions?	(iv) Gross receipts from activity	tò (e	Amount paid or retained by) fundraiser ted in col. (i)	(vi) Amount paid to (or retained by) organization		
				Yes	No	-					
Total											
3 List all states in whi or licensing.	ich the organizatio	n is registered	l or licensed to solicit o	contrib	utions	or has been notified	it is	exempt from r	egistration		
NY											
	aduation Ast N-1		atmotions for Form (00	000 -	7		Onkastel	- C (Form 000) 0001		
LHA For Paperwork R	eduction ACT NOti	ce, see the in	ISTUCTIONS FOR FORM S	າອບ Or	990-F	۷.		Schedul	e G (Form 990) 2021		

LITERACY, INC.

13-3911331 Page **2**

Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990, FZ lines 1 and 6b. List events with gross receipts greater than \$5,000

		of fundraising event contributions and gro				T s greater than \$5,000.
			(a) Event #1	(b) Event #2	(c) Other events NONE	(d) Total events (add col. (a) through
			GALA			col. (c))
e			(event type)	(event type)	(total number)	
Revenue	1	Gross receipts	729,286.			729,286.
	2	Less: Contributions	607,588.			607,588.
	3	Gross income (line 1 minus line 2)	121,698.			121,698.
	4	Cash prizes				
s	5	Noncash prizes				
pense	6	Rent/facility costs				
Direct Expenses	7	Food and beverages				
Δ	8	Entertainment				
	9	Other direct expenses				121,698.
	10	Direct expense summary. Add lines 4 through	n 9 in column (d)		►	121,698.
		Net income summary. Subtract line 10 from li				0.
Pa	rt I		answered "Yes" on Form	990, Part IV, line 19, or r	eported more than	
		\$15,000 on Form 990-EZ, line 6a.	1			
Revenue			(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Reve	1	Gross revenue				
ses	2	Cash prizes				
Expens	3	Noncash prizes				
Direct Expenses	4	Rent/facility costs				

Other direct expenses

7 Direct expense summary. Add lines 2 through 5 in column (d)

8 Net gaming income summary. Subtract line 7 from line 1, column (d)

9 Enter the state(s) in which the organization conducts gaming activities:

6 Volunteer labor

%

Yes

No

%

Yes

No

%

Yes

No

132082 10-21-21

5

Schedule G (Form 990) 2021

Yes

No

Sch	nedule G (Form 990) 2021 LITERACY, INC.	13-3	911331	Page 3
11	Does the organization conduct gaming activities with nonmembers?		Yes	No
	Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed			
	to administer charitable gaming?		Yes	No No
13	Indicate the percentage of gaming activity conducted in:			
a	a The organization's facility		13a	%
	o An outside facility		13b	%
	Enter the name and address of the person who prepares the organization's gaming/special events books and recor			
	Name 🕨			
	Address 🕨			
15a	a Does the organization have a contract with a third party from whom the organization receives gaming revenue?		Yes	No No
b	o If "Yes," enter the amount of gaming revenue received by the organization 🕨 \$ and the am	ount		
	of gaming revenue retained by the third party \blacktriangleright \$			
c	c If "Yes," enter name and address of the third party:			
	Name			
	Address 🕨			
16	Gaming manager information:			
	Name			
	Gaming manager compensation 🕨 \$			
	Description of services provided			
	Director/officer Employee Independent contractor			
17	Mandatory distributions:			
	a Is the organization required under state law to make charitable distributions from the gaming proceeds to			
c			Yes	🗌 No
F	retain the state gaming license? D Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent			
	organization's own exempt activities during the tax year > \$			
Pa	Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v	and Par	t III. lines 9.	9b. 10b.
	15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.	, and r ar	,	,
_				
1320	183 10-21-21	Schedu	ule G (Form	990) 2021
	32			

Schedule G (Form 9

132084 11-18-21

10210428 152490 K4H02M

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047

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.

► Go to www.irs.gov/Form990 for instructions and the latest information.

0004
2021
Open to Public

Name of the organization

LITERACY .	INC.
,	

Employer identification number 13-3911331

Pa	rt I Types of Property							
		(a) Check if applicable	(b) Number of contributions or	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of de noncash contribu	etermini		s
4	Art Works of art			Form 990, Fait Vill, line Tg				
1	Art - Works of art							
2	Art - Historical treasures							
3	Art - Fractional interests							
4	Books and publications							
5	Clothing and household goods							
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property	x		20.200	EN437			
9	Securities - Publicly traded			39,388.	FMV			
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 $_{\dots}$							
15	Real estate - Residential							
16	Real estate - Commercial							
17	Real estate - Other							
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies							
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts							
25	Other (BOOKS/MATERIA)	X	5	20,107.	FMV			
26	Other ► ()							
27	Other ► ()							
28	Other ()							
29	Number of Forms 8283 received by the organized	zation during	g the tax year for c	ontributions				
	for which the organization completed Form 82	83, Part V, D	onee Acknowledg	ement 29				
							Yes	No
30a	During the year, did the organization receive by	y contributio	n any property rep	orted in Part I, lines 1 throug	h 28, that it			
	must hold for at least three years from the date	e of the initia	l contribution, and	which isn't required to be us	sed for			
	exempt purposes for the entire holding period?	?				30a		x
b	If "Yes," describe the arrangement in Part II.							
31	Does the organization have a gift acceptance	policy that re	quires the review o	of any nonstandard contribut	tions?	31		x
32a	Does the organization hire or use third parties	or related or	ganizations to solid	cit, process, or sell noncash				
	contributions?					32a		х
b	If "Yes," describe in Part II.							
33	If the organization didn't report an amount in c	olumn (c) foi	a type of property	r for which column (a) is cheo	cked,			
	describe in Part II.							

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

Schedule M (Form 990) 2021

132141 11-17-21

Schedule M (Form 990) 2021	LITERACY,	INC.
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Part II Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

132142 11-17-21		Schedule M (Form 990) 2021

SCHEDULE O	
(Form 990)	

Department of the Treasury

Name of the organization

Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. ▶ Attach to Form 990 or Form 990-EZ. ▶ Go to www.irs.gov/Form990 for the latest information.



Employer identification number 13-3911331

LITERACY, INC.

FORM 990, PART III, LINE 1

LITERACY INC. (LINC) IS AN AWARD-WINNING ORGANIZATION THAT PROVIDES

EFFECTIVE EARLY LEARNING STRATEGIES FOR PARENTS TO BUILD A STRONG

LITERACY FOUNDATION FOR THEIR CHILDREN DURING THEIR FIRST FIVE YEARS OF

DEVELOPMENT, A TIME WHEN THEIR FUTURE OUTCOMES ARE SHAPED. OUR MISSION

IS TO EQUIP CHILDREN WITH FOUNDATIONAL LITERACY SKILLS ESSENTIAL FOR

ACADEMIC ACHIEVEMENT BY EMPOWERING FAMILIES AND MOBILIZING THE

COMMUNITY.

FORM 990, PART III, LINE 4A

LINC'S 2-GENERATION AND COMMUNITY-BASED EARLY CHILDHOOD PROGRAMMING,

DELIVERED BOTH PHYSICALLY AND VIRTUALLY ACROSS MULTIPLE VIRTUAL

PLATFORMS (POST-COVID19),

LINC MOBILIZED MORE THAN 100 COMMUNITY PARTNERS, INCLUDING LIBRARIES,

TO DELIVER 235 READING EVERYWHERE PROGRAMS AND 145 PARENT ENGAGEMENT

PROGRAMS AND WORKSHOPS. WE ALSO GRADUATED 83 PARENTS IN OUR VERY

INVOLVED PARENT ACADEMY.

FORM 990, PART VI, SECTION B, LINE 11B:

A DRAFT OF THE FORM 990 IS E-MAILED TO BOARD MEMBERS FOR COMMENT BEFORE

FILING.

FORM 990, PART VI, SECTION B, LINE 12C:

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Name of the organization LITERACY, INC.		Employer identification number 13-3911331
		13 3911331
TO REGULARLY MONITOR AND ENFORCE COMPLIANCE WITH TH		
INTEREST POLICY, ANNUAL CONFLICT OF INTEREST STATEM	MENTS ARE SIGNED.	
FORM 990, PART VI, SECTION B, LINE 15:		
THE BOARD OF DIRECTORS CONDUCTS A YEARLY PERFORMANC	CE REVIEW OF THE	
EXECUTIVE DIRECTOR AND SETS THE SALARY FOR THE NEW	YEAR. THIS IS DONE	
APPROXIMATELY IN SEPTEMBER FOR AN OCTOBER 1 NEW SAL	JARY.	
FORM 990, PART VI, SECTION C, LINE 19:		
LINC MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INT	EREST POLICY AVAILABLE	
UPON REQUEST. THE FINANCIAL STATEMENTS ARE AVAILABL	E ON THE LINC WEBSITE.	
FORM 990, PART IX, LINE 11G, OTHER FEES:		
PROFESSIONAL FEES:		
PROGRAM SERVICE EXPENSES	252,289.	
MANAGEMENT AND GENERAL EXPENSES	37,589.	
FUNDRAISING EXPENSES	7,387.	
TOTAL EXPENSES	297,265.	
STAFF DEVELOPMENT & TRAINING:		
PROGRAM SERVICE EXPENSES	32,601.	
MANAGEMENT AND GENERAL EXPENSES	2,838.	
FUNDRAISING EXPENSES	3,983.	
TOTAL EXPENSES	39,422.	
CONSULTANTS:		
PROGRAM SERVICE EXPENSES	59,067.	
MANAGEMENT AND GENERAL EXPENSES	25,590.	
132212 11-11-21	2	Schedule O (Form 990) 202

Schedule O (Form 990) 2021				Page 2
Name of the organization LITERACY, INC.			E	Employer identification number 13-3911331
FUNDRAISING EXPENSES		66,094.		
TOTAL EXPENSES		150,751.		
PAYROLL PROCESSING SERVICES:				
PROGRAM SERVICE EXPENSES		0.		
MANAGEMENT AND GENERAL EXPENSES		3,807.		
FUNDRAISING EXPENSES		0.		
TOTAL EXPENSES				
TOTAL OTHER FEES ON FORM 990, PART IX, LINE 11G, CO	DL A	491,245.		
132212 11-11-21				Schedule O (Form 990) 2021
20503 152490 к4н02м	3 2021.05080	LITERACY,	INC.	к4н021

K4H02M_1

Name of the organization		Page Employer identification number
LITERACY, INC.		13-3911331
INTEREST POLICY, ANNUAL CONFLICT OF INTEREST S	TATEMENTS ARE SIGNED.	
FORM 990, PART VI, SECTION B, LINE 15:		
THE BOARD OF DIRECTORS CONDUCTS A YEARLY PERFO	RMANCE REVIEW OF THE	
EXECUTIVE DIRECTOR AND SETS THE SALARY FOR THE	NEW YEAR. THIS IS DONE	
APPROXIMATELY IN SEPTEMBER FOR AN OCTOBER 1 NEW	W SALARY.	
FORM 990, PART VI, SECTION C, LINE 19:		
LINC MAKES ITS GOVERNING DOCUMENTS, CONFLICT O	F INTEREST POLICY AVAILABLE	
UPON REQUEST. THE FINANCIAL STATEMENTS ARE AVA	ILABLE ON THE LINC WEBSITE.	
FORM 990, PART IX, LINE 11G, OTHER FEES:		
PROFESSIONAL FEES:		
PROGRAM SERVICE EXPENSES	252,289.	
MANAGEMENT AND GENERAL EXPENSES	37,589.	
FUNDRAISING EXPENSES	7,387.	
TOTAL EXPENSES	297,265.	
STAFF DEVELOPMENT & TRAINING:		
PROGRAM SERVICE EXPENSES	32,601.	
MANAGEMENT AND GENERAL EXPENSES	2,838.	
FUNDRAISING EXPENSES	3,983.	
TOTAL EXPENSES	39,422.	
CONSULTANTS:		
PROGRAM SERVICE EXPENSES	59,067.	
MANAGEMENT AND GENERAL EXPENSES	25,590.	
FUNDRAISING EXPENSES	66,094.	Schedule O (Form 990) 202
L0428 152490 K4H02M	39 2021.05080 LITERACY, II	

10210428 152490 К4Н02М

Schedule O (Form 990) 2021		Page 2
Name of the organization LITERACY, INC.		Employer identification number 13-3911331
TOTAL EXPENSES	150,751.	
PAYROLL PROCESSING SERVICES:		
PROGRAM SERVICE EXPENSES	0.	
MANAGEMENT AND GENERAL EXPENSES	3,807.	
FUNDRAISING EXPENSES	0.	
TOTAL EXPENSES	3,807.	
TOTAL OTHER FEES ON FORM 990, PART IX, LINE 11G, COL A	491,245.	
132212 11-11-21 4	0	Schedule O (Form 990) 2021