12/17/21, 8:44 AM

https://efile.prosystemfx.com/

Product Exempt Name Literacy Pittsburgh FEIN: \*\*\*\*2652 Bank Info.

Category: Plan Number:

IRS Center: Opden e-Postmark: 12/17/2021 7:22 AM

Notification:

Fiscal Year Begin Date: 7/1/2020 IRS Message

Fiscal Year End Date: 6/30/2021

eSigned:

Return Information

Date	Return ID	Type of Activity	Submission ID	Refund/(Due)	Updated By	eSign Date			
12/17/2021	20X:000758 001 V1	Upload Started			Walshak, Jeannette				
12/17/2021	20X:000756.001 V1	Released for Transmission - Validation in Progress			Waishak Jeannette				
12/17/2021	20X:000758 001 V1	Ready to transmit - Validation Complete							
12/17/2021	20X 000756 001 V1	Transmitted to FD	25570920213510322e08						
12/17/2021	20X:000756 001:V1	Accepted by FD on 12/17/2021							

FBAR FBAR BSA ID ID Status Date Status State/Other State Category

Form 8879-EO

# IRS e-file Signature Authorization for an Exempt Organization

~					
, 2020,	and end	ling	JUN	30	20 21

OMB No. 1545-0047

2020

Department of the Treasury Internal Revenue Service ► Go to www.irs.gov/Form8879EO for the latest information.

name of exempt organization or person subject to tax	Taxpayer identification number
LITERACY PITTSBURGH	25-1392652
Name and title of officer or person subject to tax  CAREY HARRIS	
CHIEF EXECUTIVE OFFICER Part 1 Type of Return and Return Information (Whole Dollars Only)	
Check the box for the return for which you are using this Form 8879-EO and enter the applicable amount, if any, from the check the box on line 1a, 2a, 3a, 4a, 5a, 6a, or 7a below, and the amount on that line for the return being filed with blank, then leave line 1b, 2b, 3b, 4b, 5b, 6b, or 7b, whichever is applicable, blank (do not enter -0-). But, if you enter return, then enter -0- on the applicable line below. Do not complete more than one line in Part I.	this form was
1a Form 990 check here X b Total revenue, if any (Form 990, Part VIII, column (A), line 12)	ıь <u>5,005,452.</u>
2a Form 990-EZ check here b Total revenue, if any (Form 990-EZ, line 9)	2b
3a Form 1120-POL check here b Total tax (Form 1120-POL, line 22)	3b
4a Form 990-PF check here b Tax based on investment income (Form 990-PF, Part VI, line 5)	
5a Form 8868 check here	5b
6a Form 990-T check here b Total tax (Form 990-T, Part III, line 4)	6b
7a Form 4720 check here b Total tax (Form 4720, Part III, line 1)	7Ь
Part II Declaration and Signature Authorization of Officer or Person Subject to Tax	
Under penalties of perjury, I declare that X I am an officer of the above organization or I am a person sub	
(name of organization), (EIN), (EIN), of the 2020 electronic return and accompanying schedules and statements, and, to the best of my knowledge and	and that I have examined a cop
to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reasor processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its degree to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the software for payment of the federal taxes owed on this return, and the financial institution to debit the entry to this a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of the confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a identification number (PIN) as my signature for the electronic return and, if applicable, the consent to electronic fundable.	esignated Financial e tax preparation account. To revoke to the payment ixes to receive bersonal ds withdrawal.
	to enter my PIN 00756
ERO firm name	Enter five numbers, but do not enter all zeros
as my signature on the tax year 2020 electronically filed return. If I have indicated within this return that a a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforeme PIN on the return's disclosure consent screen.  As an officer or person subject to tax with respect to the organization, I will enter my PIN as my signature	ntioned ERO to enter my
electronically filed return. If I have indicated within this return that a copy of the return is being filed with a regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure co	state agency(ies)
Part III Certification and Authentication	Date -
ERO's EFIN/PIN. Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN.  25570912345 Do not enter all zeros	
I certify that the above numeric entry is my PIN, which is my signature on the 2020 electronically filed return indicate that I am submitting this return in accordance with the requirements of Pub. 4163, Modernized e-File (MeF) Informatics e-File Providers for Business Returns.	tion for Authorized
ERO's signature Date Date Date Date	17/2021
ERO Must Retain This Form - See Instructions	
Do Not Submit This Form to the IRS Unless Requested To Do S	80

LHA For Paperwork Reduction Act Notice, see Instructions.

Form 8879-EO (2020)

#### \*\* PUBLIC DISCLOSURE COPY \*\*

Form **990** 

### **Return of Organization Exempt From Income Tax**

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

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

2020
Open to Public Inspection

Department of the Treasury
Internal Revenue Service

A For the 2020 calendar year.

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

_	FOI L	ne 2020 calendar year, or tax year beginning 001, 1, 2020 and er	naing J	<u>UN 30, 202</u> 1	
В	Check applica	C Name of organization		D Employer identif	ication number
	chai				
	Nan Chai	Doing business as		25-13926	52
	Initio		E Telephone numbe		
	Fina	411 SEVENTH AVENUE 5:	(412)393		
	ter m a led	G Gross receipts \$	5,005,452.		
	Ame	etum			
	App	Finame and address of principal officer: CARE 1 FIARRIS		for subordinate	
	pen	SAME AS C ABOVE		H(b) Are all subordinates i	
		xempt status: X 501(c)(3) 501(c) ( ) ◀ (insert no.) 4947(a)(1) or	527	900	list. See instructions
J	Webs	ite: ► WWW.LITERACYPITTSBURGH.ORG		H(c) Group exemption	
K	Form	of organization: X Corporation Trust Association Other	L Year o		VI State of legal domicile; PA
P	art I	Summary			
	1	Briefly describe the organization's mission or most significant activities: BASIC	EDUC	ATION PROGR	AMS FOR
Governance		ADULTS AND CHILDREN THAT LIFT FAMILIES OUT			
E	2	Check this box larger if the organization discontinued its operations or disposed	of more	than 25% of its net as	sets.
200	3	Alicenter of continuous and the account of the state of t		3	25
Ö	4	Number of independent voting members of the governing body (Part VI, line 1b)			25
ලේ ගු	5	Total number of individuals employed in calendar year 2020 (Part V, line 2a)		5	87
Activities &	6	Total number of volunteers (estimate if necessary)	6	559	
cţi	7 a	Total unrelated business revenue from Part VIII, column (C), line 12		7a	0.
⋖	Ŀ	Net unrelated business taxable income from Form 990-T, Part I, line 11		7b	0.
				Prior Year	Current Year
	8	Contributions and grants (Part VIII, line 1h)		4,491,546.	4,479,149.
Jue .	9	Program service revenue (Part VIII, line 2g)	3966	379,806.	452,340.
Revenue	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		83,233.	65,224.
Œ	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		-10,434.	8,739.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	-	4,944,151.	5,005,452.
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0.	0.
	14	Repetits paid to or for members (Part IV, column (A), line 4)	22710	0.	0.
48	40	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		2,818,219.	3,032,958.
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)	200	0.	0.
- Sed	h	Total fundraising expenses (Part IX, column (D), line 25)  201,456			the state of the s
X	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		1,540,387.	1,287,884.
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	***	4,358,606.	4,320,842.
	19	Revenue less expenses. Subtract line 18 from line 12		585,545.	684,610.
<u>ار در در</u>		Treatment to 35 expenses, dubitact line to monthine 12		inning of Current Year	
ats (	20 21 22	Total assets (Part X, line 16)	Deg	4,776,733.	5,702,076.
ASS.	21	Total liabilities (Part X, line 26)	-	874,501.	407,842.
	22	Net assets or fund balances. Subtract line 21 from line 20		3,902,232.	5,294,234.
Pε	art II	Signature Block	2027	3,302,232.	
		alties of perjury, I declare that I have examined this return, including accompanying schedules an	d statemen	te and to the best of mu	knowledge and belief it is
		ct, and complete. Declaration of preparer (other than officer) is based on all information of which			Knowledge and belief, it is
,	, 00110	At A single of the state of the	bi ebai ei ii	as any knowledge.	17.71
Sigr	1	Signature of officer		Date	
Her Her		CAREY HARRIS, CHIEF EXECUTIVE OFFICER			
Her	•	Type or print name and title			
		Print/Type preparer's name Preparer's signature	Da	ite Check	PTIN
Paid		ELIZABETH E. KRISHER		]#	
	arer	Firm's name MAHER DUESSEL, CPA'S		Self-employe	25-1622758
	Only	Firm's address 503 MARTINDALE STREET, SUITE 600		ram's ElW	47-1044130
396	July	PITTSBURGH, PA 15212		Dhann A 1 9	0_171 EE00
Mes	Alexa III			Prione no. 4 1	2-471-5500
viay	tne II	RS discuss this return with the preparer shown above? See instructions		The state of the s	X Yes No

Form	990 (2020) LITERACY PITTSBURGH 25-1392652 Page 2
Par	
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
	LITERACY PITTSBURGH'S MISSION IS BETTER LIVES THROUGH LEARNING.
	11111111111111111111111111111111111111
2	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?
•	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three targest program services, as measured by expenses,
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and
	revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$1, 795, 748. including grants of \$) (Revenue \$)
	OASIS INTERGENERATIONAL TUTORING OPERATING IN SIX ALLEGHENY COUNTY
	SCHOOL DISTRICTS, OASIS INTERGENERATIONAL TUTORING PAIRS ADULTS AGE 50
	AND OVER WITH HIGH-NEED CHILDREN IN GRADES K-4. IN FISCAL YEAR 2021,
	30 CHILDREN RECEIVED WEEKLY TUTORING AIMED AT IMPROVING READING SKILLS
	AND BOOSTING CONFIDENCE AND SELF-ESTEEM.
4b	ADULT BASIC EDUCATION IN FISCAL 2021, LITERACY PITTSBURGH VOLUNTEERS AND PROFESSIONAL INSTRUCTORS HELPED 2,034 INDIVIDUALS BECOME READY AND RELEVANT FOR THE WORKFORCE. BY IMPROVING READING, WRITING OR MATH SKILLS, EARNING A HIGH SCHOOL CREDENTIAL OR LEARNING ENGLISH, STUDENTS CAN SECURE JOBS, EARN PROMOTIONS, AND GO ON TO COLLEGE AND JOB TRAINING. AS A RESULT, THEY CREATE SECURITY AND STABILITY FOR THEIR FAMILIES.
4c	(Code:) (Expenses \$ 254,421. including grants of \$ ) (Revenue \$ 128,125.) COMPASS AMERICORPS MEMBERS OF COMPASS AMERICORPS, A PENNSERVE PROGRAM MANAGED BY LITERACY PITTSBURGH, STRENGTHEN AREA NONPROFITS BY PROVIDING
	FULL-TIME SOCIAL SERVICES SUPPORT AND ENGLISH LANGUAGE INSTRUCTION TO
	NEWLY RESETTLED REFUGEES, IMMIGRANTS AND INTERNATIONAL POPULATIONS.
	MEMBERS SERVE IN ORGANIZATIONS THROUGHOUT PITTSBURGH, PLAN SERVICE
	PROJECTS AND ENGAGE COMMUNITY VOLUNTEERS. IN FISCAL YEAR 2021, MEMBERS
	PROVIDED 31,442 HOURS OF SERVICE TO 2,203 CLIENTS.
	TIGATORD STARE HOOKE OF DRIVATOR TO STORE CRITICIS.
4d	Other program services (Describe on Schedule O.)
-	(Expenses \$ 175,000 · including grants of \$ ) (Revenue \$ )
4e	2 222 440
70	Total pregnant entries enperiose P

Form **990** (2020)

Form 990 (2020) LITERACY PITTSBURGH
Part IV | Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for	1		
	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			
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Х
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		х
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, VIII, IX, or X	12.3	-	
• •	as applicable.			
	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D.	10000000		
•	, , , , , , , , , , , , , , , , , , , ,	11a	х	
h	Part VI  Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total	III	-22	
		446		х
_	assets reported in Part X, tine 16? If "Yes," complete Schedule D, Part VII  Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total	11b		<u> </u>
C		44.		x
al.	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	11c		
a	- · · · · · · · · · · · · · · · · · · ·	المما		X
_	Part X, line 16? // "Yes," complete Schedule D, Part IX	11d	₩	
0	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
T	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	l [		37
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	-	<u> </u>
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	l l	٦,	
	Schedule D, Parts XI and XII	12a	X	
þ	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		<u>X</u>
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	<del></del>	X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		<u> </u>
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,		ļ	
	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		<u>X</u>
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		<u>X</u>
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		<u>X</u>
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			_
	1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? # "Yes,"			
	complete Schedule G, Part III	19		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
Ь	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? // "Yes." complete Schedule I. Parts I and II	21	- [	X
	The case destroyed a section of the			

Form 990 (2020) LITERACY PITTSBURGH
Part IV 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			x
	Schedule K. If "No," go to line 25a	24a		
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		$\vdash$
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	24c		
d	any tax-exempt bonds?  Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		$\vdash$
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	240		
200	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		x
h	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			$\overline{}$
	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			
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions, for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? #			l
	"Yes," complete Schedule L, Part IV	28a		X
	A family member of any individual described in line 28a? If "Yes, " complete Schedule L, Part IV	28b		X
С	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? #			.,
	"Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30_	_	X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? # "Yes," complete	32		x
22	Schedule N, Part II  Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	32		
33		33		x
34	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I  Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and	33		
-	Part V, line 1	34		Х
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
	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 in Schedule O for Part VI, lines 11b and 19?			
	Note: All Form 990 filers are required to complete Schedule O	38	X	
Pa	rt 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	,		
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
b				
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming		N. A	-
	(gambling) winnings to prize winners?	1c_		

Page 5 Statements Regarding Other IRS Filings and Tax Compliance (continued) Yes No 2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, 87 filed for the calendar year ending with or within the year covered by this return b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? X 2b Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? За X b If "Yes," has it filed a Form 990 T for this year? If "No" to line 3b, provide an explanation on Schedule O ЗЬ 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? X 4a b If "Yes," enter the name of the foreign country See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? X 5a b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5b c If "Yes" to line 5a or 5b, did the organization file Form 8886-T? 5c 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? 6a b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 6b 7 Organizations that may receive deductible contributions under section 170(c). a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? X 7a b If "Yes," did the organization notify the donor of the value of the goods or services provided? 7b c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? 7c d If "Yes," indicate the number of Forms 8282 filed during the year e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7e Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 7a h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 7h 8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year? 8 Sponsoring organizations maintaining donor advised funds. a Did the sponsoring organization make any taxable distributions under section 4966? 9a b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? 9b Section 501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on Part VIII, line 12 10a b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b 11 Section 501(c)(12) organizations. Enter: Gross income from members or shareholders 11a b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 11b 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a b If "Yes," enter the amount of tax-exempt interest received or accrued during the year Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? 13a Note: See the instructions for additional information the organization must report on Schedule O. b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans 13b c Enter the amount of reserves on hand X 14a Did the organization receive any payments for indoor tanning services during the tax year? 14a b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O 14h 15 Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? 15 If "Yes," see instructions and file Form 4720, Schedule N.

Is the organization an educational institution subject to the section 4968 excise tax on net investment income?

16

X

If "Yes," complete Form 4720, Schedule O.

LITERACY PITTSBURGH 25-1392652 Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions. X Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management No Yes 25 1a Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule 0. 25 **b** Enter the number of voting members included on line 1a, above, who are independent 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other X 2 officer, director, trustee, or key employee? 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? X 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? X Did the organization become aware during the year of a significant diversion of the organization's assets? X Did the organization have members or stockholders? 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or X more members of the governing body? b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or 7b persons other than the governing body? Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: X 8a a The governing body? X 8b b Each committee with authority to act on behalf of the governing body? Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the X organization's mailing address? If "Yes," provide the names and addresses on Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No X 10a 10a Did the organization have local chapters, branches, or affiliates? b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, 10b and branches to ensure their operations are consistent with the organization's exempt purposes? 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a b Describe in Schedule O the process, if any, used by the organization to review this Form 990. 12a 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 X b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe 12c in Schedule O how this was done X 13 Did the organization have a written whistleblower policy? 13 X 14 14 Did the organization have a written document retention and destruction policy? 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? a The organization's CEO, Executive Director, or top management official 15a 15b b Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a X taxable entity during the year? 16a b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed ▶PA 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) available for public inspection, Indicate how you made these available. Check all that apply. X Upon request Another's website Other (explain on Schedule O) X Own website 19 Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.

State the name, address, and telephone number of the person who possesses the organization's books and records

15219

CHERYL GARCIA - 412-393-7635

411 SEVENTH AVENUE, SUITE 550, PITTSBURGH,

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

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter 0- in columns (D), (E), and (F) if no compensation was paid.
  - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

Check this box if neither the organization	n nor any related	orga	niza	tion	cor	nper	nsat	ed any current officer, d	irector, or trustee.	
(A)	(B)		(C)					(D)	(E)	(F)
Name and title	Average	Position (do not check more than one		Reportable	Reportable	Estimated				
	hours per	por	box, unless person is both an officer and a director/trustee)		compensation	compensation	amount of			
	week		T	1	1 000	7,000	100,	- from	from related	other
	(list any hours for	firect						the organization	organizations (W-2/1099-MISC)	compensation from the
	related	e of	ag z			sate		(W-2/1099-MISC)	(***2/1055***********************************	organization
	organizations	individual trustee or director	Institutional Irustee		),tee	ag mg		(** =**********************************		and related
	below	ndual	tution	<sub>B</sub>	Кеу етрюуее	est c	1 5			organizations
	line)	ğ	SE SE	Officer	Æ.	Highest compensated employee	Former			
(1) CAREY HARRIS	40.00	1	Ι.							
CEO		$\vdash$		X	_	╙		119,850.	0.	23,070.
(2) CHERYL GARCIA	37.50	1								
DIRECTOR OF FINANCE		╙		X				80,000.	0.	13,504.
(3) DANELL R. COOPER	1.00	]								
TREASURER		X	Ш	X				0.	0.	0.
(4) RICHARD HEISER	1.00									
BOARD MEMBER		X						0.	0.	0.
(5) LESLIE GROMIS BAKER	1.00									
BOARD MEMBER		X						0.,	0.	
(6) PATRICIA L. HASSELBUSCH	1.00									
BOARD MEMBER		<u> </u>						0.	0.	0.
(7) STEVEN SOKOLOSKI	1.00									·
VICE PRESIDENT		X		X			L	0.	0.	
(8) NANCY J. CROUTHAMEL	1.00								-	
BOARD MEMBER		X						0.	0.	0.
(9) KATHLEEN SULLIVAN	1.00									
PRESIDENT		X		X				0.	0.	0.
(10) ANDREA CLARK-SMITH	1.00	П								
BOARD MEMBER		x						0.1	0.	0.
(11) GIANINNA MERCADO	1.00									
BOARD MEMBER		x						0.1	0.	0.
(12) KAREN R. WORCESTER	1.00	П								
BOARD MEMBER		х						0.1	0.	0.
(13) SCOTT A BARTLETT	1.00		$\neg$							
BOARD MEMBER		x						0.	0.	0.
(14) KAREN B. BOLDEN	1.00			コ	$\neg$					
BOARD MEMBER		х						0.	0.	0.
(15) TOM HITTER	1.00		_	寸		$\dashv$	$\neg$			
BOARD MEMBER		x		-				0.	0.	0.
(16) CHARLES OSHURAK	1.00	-	$\dashv$	$\dashv$	$\dashv$	$\neg$	$\dashv$			
BOARD MEMBER		$\mathbf{x}$						0.	0.	0.
(17) ELLEN FREEMAN	1.00		$\dashv$	$\dashv$	$\dashv$	$\dashv$	$\dashv$			
BOARD MEMBER		$\mathbf{x}$						0.	0.	0.
032007 12-23-20							_			Form 990 (2020)

Part VII Section A. Officers, Directors, Trus		oloy:	ees,			hes	t Ç	ı ı		4=1
(A)	(B)			(C Posi				(D)	(E)	(F)
Name and title	Average hours per	do not check m				than o		Reportable compensation	Reportable compensation	Estimated amount of
	week		, unie: cer an					from	from related	other
	(list any	101						the	organizations	compensation
	hours for	i dire	۵.			Pa.	ı	organization	(W-2/1099-MISC)	from the
	related	stee 0	ruste			DZ L		(W-2/1099-MISC)		organization
	organizations below	an true	onal t		pakog	E 60 m				and related organizations
	line)	Individual trustee or director	nstitutional trustee	Officer	ey em	Highest compensated employee	Former			Organizations
(18) GARY SINGERY	1.00	_	=_	Ť	Ť		Ť			
BOARD MEMBER		X			L			0.	0.	0.
(19) EMMANUEL GEORGE	1.00									
BOARD MEMBER	1 00	X	<del> </del>	<u> </u>	<u> </u>	$\vdash$		0.	0.	0.
(20) TINA MYLES	1.00	x			ĺ			0.	0.	0.
BOARD MEMBER (21) THOMAS F. O'BOYLE	1.00	<u> </u>	$\vdash$	$\vdash$	-	$\vdash$	$\vdash$	0.		
SECRETARY	1.00	x		x				0.	0.	0.
(22) REBECCA ROADMAN	1.00					_				
BOARD MEMBER		x						0.	0.	0.
(23) ZACK LESKOSKY	1.00			Г		П	Г			
BOARD MEMBER		X						0.	0.	0.
(24) JARED MILLER	1.00									
BOARD MEMBER	7 00	X	├		┞		-	0.	0.	0.
(25) BILL SOUTHERN	1.00	x						0.	0.	0.
BOARD MEMBER (26) JENNIFER STYRAN	1.00	A	-		-			0.	0.	
BOARD MEMBER	1.00	X						0.	0.	0.
1b Subtotal				2010	6.0%	0.000	<u></u>	199,850.	0.	36,574.
c Total from continuation sheets to Part VI							•	0.	0.	
d Total (add lines 1b and 1c)							<u> </u>	199,850.	0.	36,574.
2 Total number of individuals (including but n	ot limited to th	ose	liste	d at	oove	e) wh	io re	eceived more than \$100,	000 of reportable	1
compensation from the organization							_			Yes No
minutes the New York and the State of the St	elling about the contract		د د ده دا		1		- bio	heat compared amp	lavos on	163 140
3 Did the organization list any former officer,										3 X
line 1a? If "Yes," complete Schedule J for s  4 For any individual listed on line 1a, is the su										
and related organizations greater than \$150										4 X
5 Did any person listed on line 1a receive or										
rendered to the organization? If "Yes." con										5 X
Section B. Independent Contractors										<u> </u>
1 Complete this table for your five highest co										ation from
the organization. Report compensation for	the calendar y	ear (	endi	ng w	vith (	or w	ithir	l	ear.	(C)
(A) Name and business	address	N	ONI	R				(B) Description of s	services	Compensation
					_					
							_			
										1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
2 Total number of independent contractors (	ncluding but n	ot li	mite	d to			sted	l above) who received m	ore than	
\$100,000 of compensation from the organi	zation >	171	<del></del>	m×		0	***	17mg		Form 990 (2020)

Form 990 LITERACY PITTSBURGH 25-1392652  Part VII Section A. Officers Directors Trustees Key Employees and Highest Companyated Employees (1)									2652		
	stees, Key Employees, and Highest Compensated Employees (continued)										
(A) Name and title	(B) Average hours	(c	hecl	Pos	C) sition that	app	oly)	(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of	
	per week (list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations	
(27) ERIN WEBER	1.00				_						
BOARD MEMBER	<del> </del>	X	<del> </del>		┢	L	_	0.	0.	0	
		-				-	_				
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	ļ <u> </u>										
			Н								
	300										
		$\dashv$			$\dashv$	$\exists$					
		$\dashv$	$\dashv$	$\dashv$	$\dashv$	$\dashv$					
				-	-						
			$\dashv$	$\dashv$	$\dashv$		$\dashv$				
		$\dashv$	-	$\dashv$	$\dashv$	-	$\dashv$			<u></u>	
						$\Box$					
		$\dashv$	$\dagger$	$\forall$	+	$\dashv$	$\dashv$				
		+	+	+	+	$\dashv$	$\dashv$	·			
		_	$\perp$	4	_	$\perp$					
		Ì									
		$\dashv$	$\dashv$	$\top$	十	7	$\dashv$			<u> </u>	
		+	+	+	$\dashv$	+	$\dashv$			<u></u> -	
tal to Part VII, Section A, line 1c		******									

25-1392652 Page 9 LITERACY PITTSBURGH Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (D) (B) (C) Revenue excluded Related or exempt Unrelated Total revenue from tax under function revenue business revenue sections 512 - 514 1 a Federated campaigns 1a Contributions, Gifts, Grants and Other Similar Amounts **b** Membership dues 1b c Fundraising events 1c d Related organizations 1d 2,993,494. e Government grants (contributions) f All other contributions, gifts, grants, and 1,485,655. similar amounts not included above g Noncash contributions included in lines 1a-1f 4,479,149. h Total. Add lines 1a-1f Business Code 324,215. 324,215. 611710 2 a TEACHING AND WORKPLACE Program Service Revenue 128,125. 128,125. b AMERICORPS 611710 f All other program service revenue 452,340. g Total. Add lines 2a-2f Investment income (including dividends, interest, and 65,224. 65,224. other similar amounts) Income from investment of tax-exempt bond proceeds Royalties (i) Real (ii) Personal 6a 6 a Gross rents b Less: rental expenses c Rental income or (loss) d Net rental income or (loss) (i) Securities (ii) Other 7 a Gross amount from sales of assets other than inventory **b** Less: cost or other basis and sales expenses Other Revenue c Gain or (loss) d Net gain or (loss) 8 a Gross income from fundraising events (not including \$ contributions reported on line 1c), See 2,495. Part IV, line 18 0. b Less direct expenses 2,495. 2,495. c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19 9b b Less: direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less: cost of goods sold c Net income or (loss) from sales of inventory **Business Code** 6,244 6,244. Miscellaneous Bevenue 900099 11 a OTHER

6,244.

452,340.

**▶** 5,005,452.

0.

d All other revenue

e Total. Add lines 11a-11d

12 Total revenue. See instructions\_

Form 990 (2020) LITERACY PITTSBURGH
Part IX | Statement of Functional Expenses Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A). Check if Schedule O contains a response or note to any line in this Part IX

υÇ	Check if Schedule O contains a respons	(A)	(B)	(C)	(D)
7b	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
1	Grants and other assistance to domestic organizations				
_	and domestic governments. See Part IV, line 21				
2					
_	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	254 050	10 001	224 226	44 680
_	trustees, and key employees	357,850.	12,091.	334,086.	11,673
6	Compensation not included above to disqualified		1		
	persons (as defined under section 4958(f)(1)) and				
_	persons described in section 4958(c)(3)(B)	0 100 010	1 000 005	454 065	405 440
7	Other salaries and wages	2,109,810.	1,802,997.	171,365.	135,448
8	Pension plan accruals and contributions (include	E4 420			
_	section 401(k) and 403(b) employer contributions)	71,438.	61,111.	5,868.	4,459
9	Other employee benefits	297,712.	249,550.	29,087.	19,075
10	Payroll taxes	196,148.	159,949.	24,661.	11,538
11	Fees for services (nonemployees):		İ		
a	Management				
þ	•				
C	Accounting	19,528.		19,528.	
d		18,433.	18,433.		
e					
f	Investment management fees	18,518.		18,518.	
9	Other. (If line 11g amount exceeds 10% of line 25,				
	column (A) amount, list line 11g expenses on Sch O.)	<u>654,951.</u>	<u>596,3</u> 48.	<u>58,603.</u>	
12	Advertising and promotion	42,911.	39,548.	1,878.	1,485.
13	Office expenses	136,237.	55,141.	69,289.	11,807.
14	Information technology				
15	Royalties		_		
16	Occupancy	291,507.	268,053.	18,988.	4,466.
7	Travel	6,855.	4,529.	1,912.	414.
8	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
9	Conferences, conventions, and meetings	28,525.	17,453.	11,072.	
0	Interest				
1	Payments to affiliates				<del></del>
2	Depreciation, depletion, and amortization	21,817.	18,981.	1,745.	1,091.
3	Insurance	19,337.		19,337.	
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 O.)  INSTRUCTIONAL MATERIALS	26 600	26 600		
a		26,680.	26,680.		
þ					
C				_	
d		0.505	0.505		
	All other expenses	2,585.	2,585.		
5	Total functional expenses. Add lines 1 through 24e	4,320,842.	3,333,449.	785,937.	201,456.
	Joint costs. Complete this line only if the organization				
6					
	reported in column (B) joint costs from a combined				
	reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				

Part X | Balance Sheet Check if Schedule O contains a response or note to any line in this Part X (A) End of year Beginning of year 2,165,445. 1,909,762. Cash - non-interest-bearing 2 Savings and temporary cash investments 288,063. 299,682. 3 Pledges and grants receivable, net 39,834. 94.039. 4 4 Accounts receivable, net Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% 5 controlled entity or family member of any of these persons Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) 6 7 Notes and loans receivable, net Inventories for sale or use 78,063. 75,983. Prepaid expenses and deferred charges 9 10a Land, buildings, and equipment: cost or other 667,310. basis. Complete Part VI of Schedule D 10a 10,890. 32,707. 656,420. 10c b Less: accumulated depreciation 10b 2.422.740. 3,046,313. 11 Investments · publicly traded securities 11 12 Investments - other securities. See Part IV, line 11 12 Investments - program-related. See Part IV, line 11 13 13 14 Intangible assets 14 7,644. 7,644. 15 Other assets. See Part IV, line 11 15 4,776,733. 5,702,076. Total assets. Add lines 1 through 15 (must equal line 33) 16 16 145,377. 90,698. 17 17 Accounts payable and accrued expenses 18 18 Grants payable 633,600. 229,887. 19 19 Deferred revenue 20 20 Tax-exempt bond liabilities 21 21 Escrow or custodial account liability. Complete Part IV of Schedule D Loans and other 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 22 Secured mortgages and notes payable to unrelated third parties 23 23 Unsecured notes and loans payable to unrelated third parties 24 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X 87,257. 95,524. 25 of Schedule D 874,501. 407,842. 26 Total liabilities. Add lines 17 through 25 Organizations that follow FASB ASC 958, check here 🕨 🗓 Net Assets or Fund Balances and complete lines 27, 28, 32, and 33. 1,076,018. 1,809,410. 27 Net assets without donor restrictions 27 2,826,214. 3,484,824. 28 Net assets with donor restrictions Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33. 29 Capital stock or trust principal, or current funds 30 Paid-in or capital surplus, or land, building, or equipment fund 31 31 Retained earnings, endowment, accumulated income, or other funds 5,294,234. 3,902,232. 32 Total net assets or fund balances 32 5,702,076. 4,776,733. Total liabilities and net assets/fund balances

Form 990 (2020)

#### **SCHEDULE A**

Department of the Treasury

Internal Revenue Service

(Form 990 or 990-EZ)

Public Charity Status and Public Support Complete if the organization is a section 501(c)(3) organization or a section

4947(a)(1) nonexempt charitable trust. ► Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

Employer identification number 25-1392652 LITERACY PITTSBURGH

Part I Reason for Public Charity Status. (All organizations must complete this part.) See instructions.												
he organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)												
1 A church, convention of ch					(A)(i).							
2 A school described in sec												
3 A hospital or a cooperative					).							
4 A medical research organi	zation operated in con	iunction with a hospital	described	in section	1 170(b)(1)(A)(iii). Enter 1	the hospital's name,						
city, and state:						•						
	for the benefit of a coll	lege or university owned	or operate	d by a go	vernmental unit describe	d in						
section 170(b)(1)(A)(iv).		logo or bilitorolly owner	от орогато	, - g-								
		ontal unit described in	ention 17	OLEN 1 V A V	ul							
6 A federal, state, or local go						while described in						
-												
	section 170(b)(1)(A)(vi). (Complete Part II.)  A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.)											
				4 :	and the control of the control of the control	ll						
9 An agricultural research or												
or university or a non-land	grant college of agricu	ulture (see instructions).	Enter the n	iame, city,	and state of the college	or						
university:			7.77									
10 An organization that norm												
activities related to its exe												
income and unrelated bus	iness taxable income	(less section 511 tax) fro	m busines	ses acquir	ed by the organization a	fter June 30, 1975.						
See section 509(a)(2). (Co												
11 An organization organized	l and operated exclusi	vely to test for public sat	ety. See s	section 50	9(a)(4).							
12 An organization organized	and operated exclusi	vely for the benefit of, to	perform th	ne function	is of, or to carry out the	purposes of one or						
more publicly supported of	organizations describe	d in section 509(a)(1) o	r section 5	509(a)(2)	See <b>section 509(a)(3).</b> C	Check the box in						
lines 12a through 12d tha	t describes the type of	supporting organization	and comp	olete lines	12e, 12f, and 12g.							
					anization(s), typically by	giving						
					tors or trustees of the su							
organization. You must												
b Type II. A supporting or	nanization supervised	or controlled in connect	ion with its	supporte	d organization(s), by hav	ring						
					ntrol or manage the supp							
organization(s). You mu												
			in connect	ion with: a	nd functionally integrate	d with.						
		). You must complete I				,						
					ith its supported organiz	ration(s)						
					uirement and an attentiv	7611633						
		nplete Part IV, Sections										
		written determination fro			Type I, Type II, Type III							
		nally integrated supporti	ng organiza	ation.								
f Enter the number of supported												
g Provide the following informati	on about the supporte	d organization(s)	i i iivi le iha oma	icization listed	(v) Amount of monetary	full Amount of other						
	(ii) EIN	(iii) Type of organization (described on lines 1-10			support (see instructions)	(vi) Amount of other support (see instructions)						
organization		above (see instructions))	Yes	No	support (see instructions)	support (300 mondenons)						
Total												
IVWI												

Schedule A (Form 990 or 990 EZ) 2020 LITERACY PITTSBURGH 25-1392652 Page 2

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Se	etion A. Public Support						
Cal	endar year (or fiscal year beginning in) 🕨	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
- 1	Gifts, grants, contributions, and			1,7,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	1 101	(1) 10.01
	membership fees received. (Do not						1
	include any "unusual grants.")	2409393.	2899878.	3637876.	4491546.	4479149.	17917842.
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf		<u> </u>	į			
3	The value of services or facilities						
	furnished by a governmental unit to						1
	the organization without charge				<u> </u>		
4	Total. Add lines 1 through 3	2409393.	2899878.	3637876.	4491546.	4479149.	17917842.
5	The portion of total contributions			P' saun v 3			
	by each person (other than a						
	governmental unit or publicly				A SECTION		
	supported organization) included						1
	on line 1 that exceeds 2% of the	E CORUN					
	amount shown on line 11	THE RESERVE OF	TO SECTION				
	column (f)						866,581.
6	Public support. Subtrect line 5 from line 4.	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	L 100 1 23	visa (sussection)			17051261.
	ction B. Total Support						
	ndar year (or fiscal year beginning in) 📂	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
	Amounts from line 4	2409393.	2899878.	3637876.	4491546.	4479149.	17917842.
8			ļ				
	dividends, payments received on			ľ			
	securities loans, rents, royalties,					ļ	
	and income from similar sources	66,500.	119,939.	135,190.	83,233.	65,224.	470,086.
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	04 350				[	
	assets (Explain in Part VI.)	24,360.	17,839.	31,817.	3,396.	8,739.	<u>86,151.</u>
	Total support. Add lines 7 through 10	1000					18474079.
	Gross receipts from related activities,						,606,466.
	First 5 years. If the Form 990 is for the			52			_
	organization, check this box and stop tion C. Computation of Public						
							00.00
	Public support percentage for 2020 (lir			olumn (f))		14	92.30 %
	Public support percentage from 2019 !					15	94.29 %
	33 1/3% support test - 2020. If the or stop here. The organization qualifies a						
							► X
U	33 1/3% support test - 2019. If the or	iganization did not ios os o publicius:	check a box on lin	ie 13 or 16a, and li :	ine 15 is 33 1/3% (	or more, check this	box
179	and stop here. The organization qualif	2000 If the area	uppoπeα organizat	ion	10.40		
	10% -facts-and-circumstances test -						
	and if the organization meets the facts-	t The crossinstance	s lest, check this b	ox and stop here			
	meets the facts and circumstances test						
U	10% -facts-and-circumstances test -	Language in the orga	materion did not ch	eck a box on line '	13, 16a, 16b, or 17	a, and line 15 is 10	U% or
	more, and if the organization meets the						
	organization meets the facts and circur						
	Private foundation. If the organization	GIG HOLCHECK & D	UN UIT IINE 13, 168,	10D, 17a, 0f 17b,			
					Sched	luie A (Form 990 c	or 990-EZ) 2020

Schedule A (Form 990 or 990 EZ) 2020 LITERACY PITTSBURGH

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

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

Sec	tion A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	) (f) Total
	Gifts, grants, contributions, and			1			
	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							
3	are not an unrelated trade or bus-						
	iness under section 513						
	711111111111111111111111111111111111111						
4	Tax revenues levied for the organ-						
	ization's benefit and either paid to		İ				
	or expended on its behalf	<del></del>			<del> </del>		
5	The value of services or facilities						
	furnished by a governmental unit to			1	1		
	the organization without charge						
6	Total. Add lines 1 through 5						
7:	Amounts included on lines 1, 2, and					1	
	3 received from disqualified persons						
- (	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						
	Public support. (Subtract line 7c from line 6)						
	ction B. Total Support			<u> </u>			
	endar year (or fiscal year beginning in)	(a) 2016	(ь) 2017	(c) 2018	(d) 2019	(e) 202	0 (f) Total
	Amounts from line 6	(0)	10000				
	a Gross income from interest.						
10	dividends, payments received on						
	securities loans, rents, royalties,				İ		
	and income from similar sources		<del> </del>	<del>                                     </del>	<del></del>		
	b Unrelated business taxable income		1				
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975					<del>                                     </del>	
	c Add lines 10a and 10b		-			-	
11	Net income from unrelated business activities not included in line 10b.				1		1
	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.)				<u> </u>		
14	First 5 years. If the Form 990 is for the	ne organization's	first, second, third	fourth, or fifth tax	year as a section (	501(c)(3) orga	inization,
	check this box and stop here					Carron recession	·······························
Se	ction C. Computation of Publi						
15				cotumn (f))	109-00-3-165-11-1-29-1150	15	
				(7)		16	%
16 Se	ection D. Computation of Inves						
						17	%
17						18	%
18	Investment income percentage from	ZU19 SCHEQUIE A	eran iii, iii8 17	on lice 44 and the	o 15 is more than		
19	a 33 1/3% support tests - 2020. If the						IIII 17 13 1101
	more than 33 1/3%, check this box a	nd stop here. The	e organization qua	umes as a publicly	supported organiz	ation and	/20/ and
	b 33 1/3% support tests - 2019. If the	organization did	not check a box o	on line 14 or line 19	a, and line 16 is m	ore than 33 1	/3%, and
	line 18 is not more than 33 1/3%, che	ck this box and s	stop here. The org	janization qualifies	as a publicly supp	orted organiz	ation
20	Private foundation. If the organization	on did not check a	<u>a box on line 14, 1</u>	9a, or 19b, check t	this box and see in	structions	

#### 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")? If 
  "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? // "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?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 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 or 990-EZ).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 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 in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.
- c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 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.)

				_	
_		_		_	
			Yes	+	No
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Schedo	ule A (Form 990 or 990 EZ) 2020 LITERACY PITTSBURGH 25-13	39265	2 Pa	age 5
Part				
		_	Yes	No
11t	las the organization accepted a gift or contribution from any of the following persons?			
	A person who directly or indirectly controls, either alone or together with persons described in lines 11b and			
1	11c below, the governing body of a supported organization?	11a	-	
b /	A family member of a person described in line 11a above?	11b_		
c /	A 35% controlled entity of a person described in line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
(	detail in Part VI.	11c		
Secti	on B. Type I Supporting Organizations			
			Yes	No
( (	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.  Did the organization operate for the benefit of any supported organization other than the supported	1		
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in	1200	100	( )
	The state of the s			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,	2		
Secti	supervised or controlled the supporting organization.			
	on o. Type it dapper uning disguitted and		Yes	No
4	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors	6		100
	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			
		1		
Sect	the supported organization(s). ion D. All Type III Supporting Organizations			
0001	on Sirai Type in outper and outper and		Yes	No
4	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
1	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		
	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		
	By reason of the relationship described in 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		İ	733
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
		3		
Sect	supported organizations played in this regard. ion E. Type III Functionally Integrated Supporting Organizations			
	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instruction	 s).		
a b	The organization satisfied the Activities Test. Complete line 2 below.  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	instructic	ns)	
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		1	
	those supported organizations and explain how these activities directly furthered their exempt purposes,	55.00		100
	how the organization was responsive to those supported organizations, and how the organization determined		-	
	that these activities constituted substantially all of its activities.	2a	_	_
b	Did the activities described in 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	$\perp$	1_
3	Parent of Supported Organizations. Answer lines 3a and 3b below.	45		
-	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or		1	

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.

Schedule A (Form 990 or 990-EZ) 2	020 LITERACY PITTSBURGH			25-1392652 Page (
	ctionally Integrated 509(a)(3) Support		zations	
1 Check here if the organ	nization satisfied the Integral Part Test as a qualif	ing trust on N	ov. 20, 1970 ( explain in	Part VI). See instructions.
All other Type III non-fu	nctionally integrated supporting organizations m	ist complete S	ections A through E.	
Section A - Adjusted Net Income			(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain		1		
2 Recoveries of prior year distri	butions	2		
3 Other gross income (see instr	uctions)	3		
4 Add lines 1 through 3.		4		
5 Depreciation and depletion		5		
6 Portion of operating expense	s paid or incurred for production or		<u></u>	
	for management, conservation, or			
	for production of income (see instructions)	6		
7 Other expenses (see instructi		7		
	act lines 5, 6, and 7 from line 4)	8		
Section B - Minimum Asset Amount			(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value o	f all non-exempt-use assets (see	THE RE	net out his	
instructions for short tax year	or assets held for part of year):	2010		
a Average monthly value of sec		1a		
b Average monthly cash balance	es	1b		
c Fair market value of other nor	-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1		1d		
e Discount claimed for blockag	e or other factors	1257 (2)		
(explain in detail in Part VI):				
	licable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d.		3	-	
	use. Enter 0.015 of line 3 (for greater amount,	1-		
see instructions).	the state of the state state and an arrivality	4		
	ssets (subtract line 4 from line 3)	5	· · · · · · · · · · · · · · · · · · ·	
6 Multiply line 5 by 0.035.	TOTAL TOTAL WILL OF	6		
7 Recoveries of prior-year distrib	outions	7		-
8 Minimum Asset Amount (add		8		
Section C - Distributable Amount	, me , to me cy			Current Year
1 Adjusted net income for prior	year (from Section A, line 8, column A)	1 1		
2 Enter 0.85 of line 1.		2	1000	
3 Minimum asset amount for pri	or year (from Section B, line 8, column A)	3	Maria Caracteria de la Caracteria de la Caracteria de la Caracteria de la Caracteria de la Caracteria de la Car	
4 Enter greater of line 2 or line 3		4		
5 Income tax imposed in prior w		-		

Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see

Schedule A (Form 990 or 990-EZ) 2020

6 Distributable Amount. Subtract line 5 from line 4, unless subject to

emergency temporary reduction (see instructions).

instructions).

Part	V Type III Non-Functionally Integrated 509(	a)(3) Supporting Orga	nizations <i>(continu</i>	ıed)				
Section	on D - Distributions				Current Year			
1 Amounts paid to supported organizations to accomplish exempt purposes 1								
	Amounts paid to perform activity that directly furthers exemp							
	organizations, in excess of income from activity	<u>.</u>		2				
	Administrative expenses paid to accomplish exempt purpose	s of supported organizations		3				
	Amounts paid to acquire exempt-use assets			4				
	Qualified set aside amounts (prior IRS approval required - pro	ovide details in Part VI)		5	_ <del>.</del>			
6 _	Other distributions (describe in Part VI). See instructions.		6					
7	Total annual distributions. Add lines 1 through 6.		7					
8	Distributions to attentive supported organizations to which the							
	(provide details in Part VI). See instructions.	<u> </u>	8					
9	Distributable amount for 2020 from Section C, line 6	<u> </u>		9				
10	Line 8 amount divided by line 9 amount			10				
Section	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistribution Pre-2020	ns	(iii) Distributable Amount for 2020			
1	Distributable amount for 2020 from Section C, line 6	X Laugus L						
2	Underdistributions, if any, for years prior to 2020 (reason-							
	able cause required - explain in Part VI). See instructions.							
	Excess distributions carryover, if any, to 2020	200						
a	From 2015		520 B 300 B	2111				
ь	From 2016							
С	From 2017			0.00				
d	From 2018			100				
e	From 2019			100				
f	Total of lines 3a through 3e							
g	Applied to underdistributions of prior years							
h	Applied to 2020 distributable amount							
	Carryover from 2015 not applied (see instructions)			9	-			
i	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				Oran State Control of the Control of			
	Distributions for 2020 from Section D,							
	line 7: \$							
8	Applied to underdistributions of prior years							
	Applied to 2020 distributable amount			01 g				
С	Remainder, Subtract lines 4a and 4b from line 4.							
5	Remaining underdistributions for years prior to 2020, 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 2020. Subtract lines 3h		DIE CONTRACTOR					
	and 4b from line 1. For result greater than zero, explain in	1 2011-111-1		3 1.1				
	Part VI. See instructions.			-10				
7	Excess distributions carryover to 2021. Add lines 3j		THE RESERVE					
	and 4c							
8_	Breakdown of line 7:				The second second			
а	Excess from 2016				-			
b	Excess from 2017							
c	Excess from 2018			- 3	W 107 / 17 / 17 / 17 / 17 / 17 / 17 / 17			
d	Excess from 2019							
-	Excess from 2020							

line 1; Part IV, Sec	ction D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e, Part V, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information.
SCHEDULE A, PART	II, LINE 10, EXPLANATION FOR OTHER INCOME:
SPECIAL EVENT IN	NCOME OTHER THAN CONTRIBUTIONS AND MISCELLANEOUS
2016 AMOUNT: \$	24,210.
2017 AMOUNT: \$	17,040.
2018 AMOUNT: \$	24,717.
2019 AMOUNT: \$	1,375.
2020 AMOUNT: \$	2,495.
OTHER	
2016 AMOUNT: \$	150.
2017 AMOUNT: \$	799.
2018 AMOUNT: \$	7,100.
2019 AMOUNT: \$	2,021.
2020 AMOUNT: \$	6,244.
<u> </u>	
3 223	

#### Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

### **Schedule of Contributors**

➤ Attach to Form 990, Form 990-EZ, or Form 990-PF.

→ Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2020

Name of the organization Employer identification number

LITERACY PITTSBURGH 25-1392652

Organization type (check one):

Organization type (check one):						
Filers of: Section:						
Form 990 or 990-EZ	X 501(c)( 3 ) (enter number) organization					
	4947(a)(1) nonexempt charitable trust not treated as a private foundation					
	527 political organization					
Form 990-PF	501(c)(3) exempt private foundation					
	4947(a)(1) nonexempt charitable trust treated as a private foundation					
	501(c)(3) taxable private foundation					
	s covered by the <b>General Rule</b> or a <b>Special Rule.</b> (7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.					
General Rule						
	n filing Form 990, 990·EZ, or 990·PF that received, during the year, contributions totaling \$5,000 or more (in money or one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.					
Special Rules						
For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.						
For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.						
year, contributions is checked, enter l purpose. Don't co	For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year					
Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on tine H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).						

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

Schedule B (Form 990, 990-EZ, or 990-PF) (2020)

Name of organization

Employer identification number

LITERACY PITTSBURGH

25-1392652

LITER	ACY PITTSBURGH		25-1392652
Part I	Contributors (see instructions). Use duplicate copies of Part I if additions	al space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1_		\$ 2,123,17	Person X Payroli
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2		\$267,60	Person X Payroll  Noncash  (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3		s149,23	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4		\$375,000	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>5</u>		\$ 533,600	Person X Payroll  Noncash  (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
6		s115,000	Person X Payroll

Name of organization

Employer identification number

### LITERACY PITTSBURGH

25-1392652

Part II	Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.					
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received			
—		\$				
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received			
		\$				
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received			
		\$				
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received			
		\$				
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received			
		\$				
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received			
		\$				

Schedule B (Form 990, 990-EZ, or 990-PF) (2020) Page 4 Name of organization Employer identification number LITERACY PITTSBURGH 25-1392652 Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. [Enter this info, once.] Use duplicate copies of Part III if additional space is needed. (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

#### SCHEDULE C

(Form 990 or 990-EZ)

**Political Campaign and Lobbying Activities** 

For Organizations Exempt From Income Tax Under section 501(c) and section 527

Complete if the organization is described below. Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Open to Public Inspection

Department of the Tressury Internal Revenue Service

If the organization answered "Yes," on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes," on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes," on Form 990, Part IV, line 5 (Proxy Tax) (See separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (See separate instructions), then

•	Section 501(c)(4), (5), or (6) organizati	ons: Complete Part III.			
	ne of organization			Emple	oyer identification number
	LITERAC	Y PITTSBURGH			<u>25-1392652</u>
Pa	art I-A Complete if the org	anization is exempt und	er section 501(c) (	or is a section 527 org	janization.
2	Provide a description of the organiz Political campaign activity expendite Volunteer hours for political campain	ures		n Part IV.	
Pa	art I-B Complete if the org	anization is exempt und	er section 501(c)(	3).	
	Enter the amount of any excise tax				
	Enter the amount of any excise tax				
3	If the organization incurred a section		for this year?		Yes No
Ь	If "Yes." describe in Part IV.				2002
Pa	art I-C Complete if the org	anization is exempt und	er section 501(c),	except section 501(c	(3).
1	Enter the amount directly expended	by the filing organization for se	ction 527 exempt funct	tion activities	
2	Enter the amount of the filing organ				
	exempt function activities				
3	Total exempt function expenditures				
	line 17b				
	Did the filing organization file Form				111
5		ployer identification number (El	N) of all section 527 po	litical organizations to which	the filing organization
	made payments. For each organizate contributions received that were pro-	tion listed, enter the amount pai	a trom the filling organiz	ration's lunus. Also enter the	segregated fund or a
	political action committee (PAC). If				o oogrogatoo tarra or a
	<u> </u>			(d) Amount paid from	(e) Amount of political
	(a) Name	(b) Address	(c) EIN	filing organization's funds. If none, enter -0	contributions received and promptly and directly delivered to a separate political organization.  If none, enter -0

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

Schedule C (Form 990 or 990-EZ) 2020

Schedule C (Form 990 or 990-EZ) 2020				25-1	392652 Page 2
Part II-A   Complete if the org section 501(h)).	anization is	exempt under section	501(c)(3) and file	ed Form 5768 (ele	ection under
	tion belongs to		D		
expenses, and shar	e of excess John	an affiliated group (and list in	Part IV each attiliated	group member's name	e, address, EIN,
		x A and "limited control" prov	visions apply		
Limit	ts on Lobbying	-	изона арріу.	(a) Filing organization's	(b) Affiliated group totals
				totals	
1a Total lobbying expenditures to influ					
b Total lobbying expenditures to influ				18,433.	
c Total lobbying expenditures (add lin	nes 1a and 1b)			18,433.	
d Other exempt purpose expenditure				4,302,409.	
e Total exempt purpose expenditures				4,320,842.	
f Lobbying nontaxable amount. Ente	366,042.				
if the amount on line 1e, column (a) or	r (b) is: Th	e lobbying nontaxable amo	unt is:	IS TOWN IN SERVE	Describer Maria
Not over \$500,000	20	% of the amount on line 1e.			
Over \$500,000 but not over \$1,000	,000 \$1	00,000 plus 15% of the exces	ss over \$500,000.		
Over \$1,000,000 but not over \$1,50		75,000 plus 10% of the exces	ss over \$1,000,000.		
Over \$1,500,000 but not over \$17,0	000,000 \$2	25,000 plus 5% of the excess	s over \$1,500,000.		
Over \$17,000,000	\$1	,000,000.		and the Nation	The state of the
g Grassroots nontaxable amount (ent				91,511.	
h Subtract line 1g from line 1a, If zero	or less, enter -0			0.	
i Subtract line 1f from line 1c. If zero				0.	
j If there is an amount other than zen		h or line 1i, did the organizati	ion file Form 4720		-
reporting section 4911 tax for this y	ear?				Yes No
(Some organizations the	at made a secti	r Averaging Period Under S on 501(h) election do not ha eparate instructions for line	ive to complete all o	f the five columns be	low.
	Lobbying E	xpenditures During 4-Year	Averaging Period		
Calendar year (or fiscal year beginning in)	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) Total
2a Lobbying nontaxable amount		429,300.	367,930.	366,042.	1,163,272.
b Lobbying ceiling amount				No.	,
(150% of line 2a, column(e))					1,744,908.
c Total lobbying expenditures	62	6.		18,433.	19,059.
d Grassroots nontaxable amount		107,325.	91,983.	91,511.	290,819.
e Grassroots ceiling amount (150% of line 2d, column (e))					436,229.
f Grassroots lobbying expenditures					

Schedule C (Form 990 or 990-EZ) 2020

Schedule C (Form 990 or 990 EZ) 2020 LITERACY PITTSBURGH 25-13926

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

for each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.  1 During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:  a Volunteers?  b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	Yes		(b	<i>.</i>
local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:  a Volunteers?  b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?		No	Amo	unt
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				
c Media advertisements?				
c Media advertisements? d Mailings to members, legislators, or the public?				
The state of the s				
f Grants to other organizations for lobbying purposes?				-
g Direct contact with legislators, their staffs, government officials, or a legislative body?				
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
i Other activities?				
j Total. Add lines 1c through 1i		4-1-37		
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			203	
b If "Yes," enter the amount of any tax incurred under section 4912				
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).	n 501(c)(	5), or sec	tion	
			Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?		1		
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?		2		_
3 Did the organization agree to carry over lobbying and political campaign activity expenditures from the Part III-B   Complete if the organization is exempt under section 501(c)(4), s	ne <u>prior year</u>	7 3		
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."  1 Dues, assessments and similar amounts from members				
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).				
a Current year		2a		
b Carryover from last year				
b Carryover from last year				
c Total		3		
c Total  3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	cess	3		
c Total  3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues  4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the ex		3		
<ul> <li>Total</li> <li>Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues</li> <li>If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the ex does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and</li> </ul>		3		
c Total  3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues  4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the ex	oolitical			

#### **SCHEDULE D**

(Form 990)

Department of the Treasury Internal Revenue Service

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.

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

OMB No. 1545-0047 Open to Public Inspection

Name of the organization

LITERACY PITTSBURGH

Employer identification number 25-1392652

Pa	art I Organizations Maintaining Donor Advise	d Funds or Other Similar Funds or	r Accou	nts. Complete if the
	organization answered "Yes" on Form 990, Part IV, lin			
	11	(a) Donor advised funds	(b) Fu	nds and other accounts
1	Total number at end of year			
2	Aggregate value of contributions to (during year)			<del> </del>
3	Aggregate value of grants from (during year)			
4	Aggregate value at end of year			
5	Did the organization inform all donors and donor advisors in v	writing that the assets held in donor advised	funds	
	are the organization's property, subject to the organization's	exclusive legal control?		Yes No
6	Did the organization inform all grantees, donors, and donor as	dvisors in writing that grant funds can be use	ed only	WHEELY LESS O
	for charitable purposes and not for the benefit of the donor or			
10	impermissible private benefit?			Yes No
PE	rt II Conservation Easements. Complete if the org		t IV, line 7	·
1	Purpose(s) of conservation easements held by the organization			
	Preservation of land for public use (for example, recreat			important land area
	Protection of natural habitat	Preservation of a	certified h	istoric structure
	Preservation of open space			
2	Complete lines 2a through 2d if the organization held a qualifi	ied conservation contribution in the form of a	a conserva	ation easement on the last
	day of the tax year.		1	Held at the End of the Tax Year
а	Total number of conservation easements		2 <sub>B</sub>	
Ь	, annual		2b	
C	Number of conservation easements on a certified historic stru	cture included in (a)	_2c	
d	Number of conservation easements included in (c) acquired at			
_	listed in the National Register		2d	
3	Number of conservation easements modified, transferred, rele	eased, extinguished, or terminated by the org	ganization	during the tax
	year >			
4	Number of states where property subject to conservation ease	——————————————————————————————————————		
5	Does the organization have a written policy regarding the period			
	violations, and enforcement of the conservation easements it			
6	Staff and volunteer hours devoted to monitoring, inspecting, h	nandling of violations, and enforcing conserv	ation ease	ements during the year
7		tana afa talaktana anaka fi ta		
•	Amount of expenses incurred in monitoring, inspecting, handli  \$\black\$\$	ing of violations, and enforcing conservation	easemen	ts during the year
8	Does each conservation easement reported on line 2(d) above	and of the continue of the stat		
6				
9	and section 170(h)(4)(B)(ii)?			Yes No
5	In Part XIII, describe how the organization reports conservation			
	balance sheet, and include, if applicable, the text of the footnot organization's accounting for conservation easements.	ote to the organization's financial statements	inat desc	cribes the
Pai	t III Organizations Maintaining Collections of	Art. Historical Treasures, or Other	r Simila	r Accete
	Complete if the organization answered "Yes" on Form 9			nascis.
	If the organization elected, as permitted under FASB ASC 958		holonee el	
	of art, historical treasures, or other similar assets held for publi			
	service, provide in Part XIII the text of the footnote to its finance		erance or p	DUDIIC
ь	If the organization elected, as permitted under FASB ASC 958.			wanta at
_	art, historical treasures, or other similar assets held for public e			
	provide the following amounts relating to these items:	exhibition, education, or research in tunneral	nce or put	DIIC Service,
				rh .
	ATTA A			\$
2		turno or other similar consta for financial ac		
_	If the organization received or held works of art, historical treas		n, provide	
а	the following amounts required to be reported under FASB ASI			•
	Revenue included on Form 990, Part VIII, line 1		ornei .	\$ <u></u> _

Sched	lule D (Form 990) 2020 LITERAC	Y PITTSBURG	H			<u> 25-13:</u>			ige 2
Par	III Organizations Maintaining C						(contin	ued)	
3	Using the organization's acquisition, accession	on, and other records,	check any of the f	ollowing that ma	ake significan	t use of its			
	collection items (check all that apply):								
а	Public exhibition	d	Loan or excl	nange program					
b	Scholarly research	e	Other						
C	Preservation for future generations								
4	Provide a description of the organization's co	llections and explain	how they further th	e organization's	exempt purp	ose in Part	XIII.		
	During the year, did the organization solicit or								
	to be sold to raise funds rather than to be ma						Yes		No
Par							ine 9, or		
	reported an amount on Form 990, Par				<u> </u>		2.5		
1a	Is the organization an agent, trustee, custodi	an or other intermedia	ry for contributions	or other assets	s not included		-		,
	on Form 990, Part X?						Yes	<u></u>	No
b	If "Yes," explain the arrangement in Part XIII	and complete the follo	owing table:			No. 30 Commission			
							Amount		
С	Beginning balance				1c				
	Additions during the year				TO THE REAL PROPERTY.	<u> </u>			
-	Distributions during the year								
	Ending balance								
2-	Did the organization include an amount on Fe					osecul D	Yes		No
28	If "Yes," explain the arrangement in Part XIII.								i
Par									
T CIT	E T E E E E E E E E E E E E E E E E E E	(a) Current year	(b) Prior year	(c) Two years t	- 1	e years back	(e) Four	vears	hack
		2,422,740.	2,606,950.	2,613,9		414,088.		223	
1a	Beginning of year balance	2,422,740.	2,000,300.	2,010,0	-	44,413.			
Ь	Contributions	770 616	20 011	85,7	750	173,172.		330,	353
С	Net investment earnings, gains, and losses	772,616.	-39,911.	65,	700.	173,172.		330,	555,
d	Grants or scholarships								
e	Other expenditures for facilities								220
	and programs	130,535.	127,082.					123,	
f	Administrative expenses	18,508.	17,217.		_	17,758.			366.
g	End of year balance	3,046,313.	2,422,740.	2,606,9	950. 2	,613,915.	2	,414,	008.
2	Provide the estimated percentage of the curr	rent year end balance	(line 1g, column (a)	)) held as:					
а	Board designated or quasi-endowment	22.0000	%						
b	Permanent endowment ► 29.0000	%	_						
	Term endowment ► 49.0000	%							
_	The percentages on lines 2a, 2b, and 2c sho								
22	Are there endowment funds not in the posse		tion that are held ar	nd administered	for the organ	ization			
Ga	by:				J			Yes	No
	*						3a(i)		X
	(i) Unrelated organizations						3a(ii)	$\neg$	Х
	(ii) Related organizations  If "Yes" on line 3a(ii), are the related organizations							$\neg$	
Ь	-			***************************************			30		
4	Describe in Part XIII the intended uses of the		vment tunas.						
Pa									
	Complete if the organization answere								
	Description of property	(a) Cost or ot basis (investm	1 ''	t or other (other)	(c) Accumul depreciati		(d) Boo	k valu	е
1a	Land								
ь	Buildings								
c	Leasehold improvements			8,912.	378,	022.	1	0,8	
		I	27	8,398.	278.	398.			0.
	Equipment	CONT.		0,350.					·
d	Equipment Other			0,330.				0,8	

Part VII Investments - Other Securities.	<del></del>		-1392032 Page
Complete if the organization answered "Yes" of a) Description of security or category (including name of security)	on Form 990, Part IV, line (b) Book value	(c) Method of valuation: Cost or end	l of some modest solve
	(b) Dook value	(C) Method of Valuation: Cost of end	r-or-year market value
(1) Financial derivatives			
(2) Closely held equity interests			
(3) Other			
_(A)			
(B)			
(C)	<del></del>	<u> </u>	
(D)			
(E)			<u> </u>
(F)			
(G)	<del> </del>		
(H)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)	<u> </u>		
Part VIII Investments - Program Related.			
Complete if the organization answered "Yes" o	n Form 990, Part IV, line	11c. See Form 990, Part X, line 13.	
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end	-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			· · · · · · · · · · · · · · · · · · ·
(6)			
(7)			
(8)			
(9)		<u> </u>	
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX Other Assets.			A SECTION OF THE SECT
Complete if the organization answered "Yes" or		11d. See Form 990, Part X, line 15.	
	escription		(b) Book value
(1)			
(2)			
(3)			
(4)	<u> </u>		
(5)			
(6)			· -
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990. Part X. col. (B) line 1 Part X Other Liabilities.	5.)		
Complete if the organization answered "Yes" on	Form 990, Part IV, line 1	11e or 11f. See Form 990, Part X, line 25.	
1. (a) Description of liability			(b) Book value
(1) Federal income taxes	<u> </u>		
(2) COMPENSATED ABSENCES			<u>87,257.</u>
(3)			<u> </u>
(4)			
(5)			
(6)			
(7)			
(8)	-		
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line 2	51		87.257

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

032054 12 01 20

Schedule D (Form 990) 2020

### SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

# Supplemental Information to Form 990 or 990-EZ Complete to provide information for responses to specific questions on

Form 990 or 990-EZ or to provide any additional information.

Attach to Form 990 or 990-EZ.

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

OMB No. 1545-0047 Open to Public Inspection

Name of the organization

LITERACY PITTSBURGH

Employer identification number 25-1392652

FORM 990, PART I, LINE 6
THE IMPACT OF VOLUNTEERS ON LITERACY PITTSBURGH STUDENTS IS
SIGNIFICANT. IN FISCAL YEAR 2021, 559 VOLUNTEERS PROVIDED 58,797 HOURS
OF SERVICE AS TUTORS, INSTRUCTORS AND ADMINISTRATIVE SUPPORT.
EXTENSIVE ASSISTANCE FROM VOLUNTEERS ALLOWS LITERACY PITTSBURGH TO
EXPAND ITS REACH MORE EFFICIENTLY, AND STUDENT OUTCOMES ARE IDENTICAL
THANKS TO A STRONG TRAINING, SUPPORT AND OVERSIGHT STRUCTURE. NO
VALUATION OF VOLUNTEER TIME IS INCLUDED IN THE REVENUE AND EXPENSES BUT
THESE HOURS COULD BE VALUED AT \$1,194,167.
FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:
OTHER - FAMILY LITERACY THIS UNIQUE PROGRAM COMBINES ADULT LITERACY
CLASSES AND EARLY CHILDHOOD EDUCATION. PARENTS STUDY FOR THEIR HIGH
SCHOOL CREDENTIAL, LEARN ENGLISH OR PREPARE FOR U.S. CITIZENSHIP WHILE
CHILDREN PARTICIPATE IN LEARNING ACTIVITIES. IN FISCAL YEAR 2021, 123
CHILDREN AND ADULTS PARTICIPATED. FAMILY LITERACY IS GROUNDED IN THE
BELIEF THAT A PARENT IS A CHILD'S FIRST AND BEST TEACHER. PARENTS ALSO
LEARN ABOUT NUTRITION, BUDGETING, AMERICAN CULTURE, WORKPLACE SKILLS,
HEALTHY LIVING, AND OF COURSE, HOW TO PROMOTE LITERACY AND LEARNING IN
THE HOME.
EXPENSES \$ 175,000. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.
FORM 990, PART VI, SECTION B, LINE 11B:
THE DIRECTOR OF FINANCE REVIEWS THE DRAFTED FORM 990. A COPY OF THE DRAFT

LITERACY PITTSBURGH

Employer identification number 25-1392652

CIRCULATED TO THE BOARD OF DIRECTORS PRIOR TO FILING.

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

AT THE BEGINNING OF EACH FISCAL YEAR THE BOARD MEMBERS ARE REQUIRED TO

COMPLETE A CONFLICT OF INTEREST DISCLOSURE FORM. THE EXECUTIVE COMMITTEE OF

THE BOARD OF DIRECTORS COLLECTS AND REVIEWS THESE FORMS. THE COMMITTEE

CONSIDERS AN APPROPRIATE COURSE OF ACTION REGARDING EACH CONFLICT ON A CASE

BY CASE BASIS.

FORM 990, PART VI, SECTION B, LINE 15:

LITERACY PITTSBURGH USES THE BAYER CENTER FOR NONPROFIT MANAGEMENT ANNUAL
WAGE AND BENEFIT SURVEY AS A BASIS FOR COMPARISON. THE EXECUTIVE COMMITTEE
OF THE BOARD OF DIRECTORS USES THIS DATA AND ITS OWN PERFORMANCE EVALUATION
METHODOLOGY TO SET THE CEO'S ANNUAL COMPENSATION. THE CEO USES THIS DATA TO
SET THE DIRECTOR OF FINANCE'S ANNUAL COMPENSATION.

FORM 990, PART VI, SECTION C, LINE 19:

ON LITERACY PITTSBURGH'S ANNUAL AUDIT AND FORM 990 ARE AVAILABLE TO THE PUBLIC ON LITERACY PITTSBURGH'S WEBSITE. LITERACY PITTSBURGH DOES NOT MAKE

ORGANIZATIONAL BYLAWS NOR CONFLICT OF INTEREST STATEMENTS AVAILABLE ON THE WEBSITE, BUT WOULD PROVIDE THIS INFORMATION TO INTERESTED PARTIES UPON REQUEST.

FORM 990, PART IX, LINE 11G, OTHER FEES:

CONSULTING:

PROGRAM SERVICE EXPENSES 114,841.

MANAGEMENT AND GENERAL EXPENSES 58,603.

FUNDRAISING EXPENSES

0.

Schedule O (Form 990 or 990 EZ) 2020	Page 2
Name of the organization  LITERACY PITTSBURGH	Employer identification number 25-1392652
TOTAL EXPENSES	173,444.
SUBCONTRACTORS:	
PROGRAM SERVICE EXPENSES	481,507.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	481,507.
TOTAL OTHER FEES ON FORM 990, PART IX, LINE 11G, COL A	654,951.
FORM 990, PART XII, LINE 2C	
THE PROCESS HAS NOT CHANGED FROM THE PRIOR YEAR.	
	, , , , , , , , , , , , , , , , , , ,

### Form **8868**

(Rev. January 2020)

# Application for Automatic Extension of Time To File an Exempt Organization Return

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

File a separate application for each return.

Internal Rev	venue Service	Go to www.irs.	gov/Forma	bob for the latest information.				
Electron	nic filing (e-file)	You can electronically file Form 8868 t	o request a	6-month automatic extension of time	to file any	y of the		
		he exception of Form 8870, Information						
Contrac	ts, for which an	extension request must be sent to the II	RS in paper	format (see instructions). For more de	etails on th	he electronic		
		ww.irs.gov/e-file-providers/e-file-for-cha						
_								
Auton	natic 6-Mont	h Extension of Time. Only sub	mit origina	al (no copies needed).				
All corpo	orations required	to file an income tax return other than	Form 990-T	(including 1120-C filers), partnerships	, REMICs	, and trusts		
must us	e Form 7004 to	request an extension of time to file inco	me tax retur	ns.				
						* 1 - 10 - 11 - 11 - 11	L (T(N))	
Type or	Type or Name of exempt organization or other filer, see instructions.						iber (TIN)	
print		ALL DEMOCRATIONS				25-1392652		
File by the	-	CY PITTSBURGH				25-13920	34	
due date lo	x   Number, sti	eet, and room or suite no. If a P.O. box		tions.				
filing your return. See		VENTH AVENUE, NO. 55				- 550		
instruction		or post office, state, and ZIP code. For a	foreign add	ress, see instructions.				
F 1 4		URGH, PA 15219	filo a congra	to application for each return)			01	
-		or the return that this application is for (	T				Return	
Applica	tion		Return	Application			Code	
Is For		7	Code	Is For			07	
	30 or Form 990-l		01	Form 990-T (corporation) Form 1041-A		- 11	08	
Form 99			03	Form 4720 (other than individual)			09	
	720 (individual)		03	Form 5227			10	
Form 99		- 400(-) 4		Form 6069			11	
	30-T (sec. 401(a)		05	Form 8870	-		12	
Form 98	30-T (trust other	CHERYL GARCIA	- 00	Fulli 6670			12	
• The		care of ▶ 411 SEVENTH AV	TENTIE	SHITTE 550 - PITTSE	IIRGH .	PA 15219	)	
Total	books are in trie	12-393-7635	V DITOD /	Fax No.	<u> </u>			
l elej	pnone ivo.	pes not have an office or place of busine	ee in the lin					
- If the	e organization of	Return, enter the organization's four dig	it Group Exe	emotion Number (GEN)	f this is fo	r the whole group.	check this	
box 🕨	If it is fo	part of the group, check this box	and atta	ach a list with the names and TINs of	all memb	ers the extension i	is for.	
00x	] . 11 12 13 10	part of the group, discont the our						
1 1	renuest an auto	matic 6-month extension of time until	MA'	Y 16, 2022 to file	the exem	npt organization re	turn for	
		named above. The extension is for the o						
		year or	<b>3</b>					
		peginning JUL 1, 2020	, ar	nd ending JUN 30, 2021				
	(III) tax your .					_		
2 If	the tax year eni	ered in line 1 is for less than 12 months	, check reas	on: Initial return	Final retur	m		
ï	_	accounting period						
•								
3a If	this application	is for Forms 990-BL, 990-PF, 990-T, 472	20, or 6069,	enter the tentative tax, less				
		e credits. See instructions.			За	\$	0.	
		is for Forms 990-PF, 990-T, 4720, or 60	69, enter an	y refundable credits and				
		yments made. Include any prior year over			3b_	s	0.	
		hteest line 3h from line 3e, feelude vour						

using EFTPS (Electronic Federal Tax Payment System). See instructions.

Caution: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

LHA For Privacy Act and Paperwork Reduction Act Notice, see instructions.

Form 8868 (Rev. 1-2020)

Product: Exempt Extension

Name: Literacy Pittsburgh FEIN: \*\*\*\*\*2652

Category

IRS Center: Ogden

e-Postmark: 10/14/2021 11:21 AM

Notification

Fiscal Year Begin Date: 7/1/2020

Fiscal Year End Date: 6/30/2021

eSigned

#### **Return Information**

Date	Return ID	Type of Activity	Submission ID	Refund/ (Due)	Updated By	eSign Date
10/14/2021	20X 000756 001 V1	Upload Started			Clever,Kathy	
10/14/2021	20X:000756.001:V1	Released for Transmission + Validation in Progress			Clever,Kathy	
10/14/2021	20X:000756 001:V1	Ready to transmit - Validation Complete				
10/14/2021	20X:000756.001:V1	Transmitted to FD	2557092021287033ce21			
10/14/2021	20X 000756.001 V1	Accepted by FD on 10/14/2021				

